

Public Document Pack



**Service Director – Legal, Governance and
Commissioning**

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Wednesday 30 July 2025

Notice of Meeting

Dear Member

Health and Wellbeing Board

The **Health and Wellbeing Board** will meet in the **Council Chamber - Town Hall, Huddersfield** at **1.00 pm** on **Thursday 7 August 2025**.

This meeting will be live webcast. To access the webcast please go to the Council's website at the time of the meeting and follow the instructions on the page.

The items which will be discussed are described in the agenda and there are reports attached which give more details.

A handwritten signature in black ink, appearing to read "S Lawton".

Samantha Lawton

Service Director – Legal, Governance and Commissioning

Kirklees Council advocates openness and transparency as part of its democratic processes. Anyone wishing to record (film or audio) the public parts of the meeting should inform the Chair/Clerk of their intentions prior to the meeting.

The Health and Wellbeing Board members are:-

Member

Councillor Beverley Addy (Chair)	Cabinet Member – Public Health
Councillor Nosheen Dad	Cabinet Member - Adult Social Care and Corporate
Councillor Carole Pattison	Leader of the Council
Councillor Ashleigh Robinson	
Councillor Mark Thompson	
Tom Brailsford	Director for Children's Services)
Alasdair Brown	Third Sector Leaders
James Creegan	Social Care providers (nominated by Kirklees Care Association)
Michelle Cross	Executive Director - Adults and Health (DASS)
Vicky Dutchburn	Interim Accountable Officer
Dale Gardiner	West Yorkshire Fire & Rescue
Professor Warren Gillibrand	University of Huddersfield
Chief Supt Jim Griffiths	West Yorkshire Police
Nicola Goodberry Kenneally	Chief Executive Officer, Community Pharmacy West Yorkshire
Karen Jackson	Chief Executive, Locala
Brent Kilmurray	Mid Yorkshire Hospitals Trust
Sheran Loran	Kirklees Healthwatch
Liz Mear	Independent Chair of the Kirklees Integrated Care Board Committee
Catherine Riley	Calderdale and Huddersfield NHS Foundation Trust
Rachel Spencer-Henshall	Deputy Chief Executive and Executive Director for Public Health and Corporate Resources
Dr Vanessa Taylor	University of Huddersfield
Izzy Worswick	South West Yorkshire Partnership Foundation Trust

Agenda

Reports or Explanatory Notes Attached

Pages

1: Membership of the Board/Apologies

To receive apologies for absence from those Members who are unable to attend the meeting.

2: Minutes of previous meeting

1 - 8

To approve the minutes of the meeting of the Board held on the 27 March 2023.

3: Declaration of Interests

9 - 10

Members will be asked to say if there are any items on the Agenda in which they have any disclosable pecuniary interests or any other interests, which may prevent them from participating in any discussion of the items or participating in any vote upon the items.

4: Admission of the Public

Most agenda items take place in public. This only changes where there is a need to consider exempt information, as contained at Schedule 12A of the Local Government Act 1972. You will be informed at this point which items are to be recommended for exclusion and to be resolved by the Board.

5: Deputations/Petitions

The Board will receive any petitions and/or deputations from members of the public. A deputation is where up to five people can attend the meeting and make a presentation on some particular issue of concern. A member of the public can also submit a petition at the meeting relating to a matter on which the body has powers and responsibilities.

In accordance with Council Procedure Rule 10, Members of the Public must submit a deputation in writing, at least three clear working days in advance of the meeting and shall subsequently be notified if the deputation shall be heard. A maximum of four deputations shall be heard at any one meeting.

6: Public Question Time

To receive any public questions.

In accordance with Council Procedure Rule 11, the period for the asking and answering of public questions shall not exceed 15 minutes.

Any questions must be submitted in writing at least three clear working days in advance of the meeting.

7: Partner updates on actions taken following health and well-being board discussions

Regular update - This is an opportunity for partners to update the board on progress made and actions taken by their organisations to improve the health and well-being of the people who work for them and the Kirklees population as a whole.

Contact: Cllr Beverley Addy, Portfolio Holder for Public Health

8: Changes to the Integrated Care Board landscape

Verbal update on the ongoing changes to the Integrated Care Board (ICB) landscape.

Contact: Vicky Dutchburn, Accountable Officer, NHS, West Yorkshire ICB, Kirklees Place.

9: Kirklees SEND Sufficiency for Kirklees 2025-2028

11 - 28

This paper is for information to provide members of the Health & Wellbeing Board assurance of the work being undertaken to ensure sufficiency of provision for children with special educational needs and disabilities (SEND) in Kirklees.

Contact: Jo-Anne Sanders, Service Director, Learning and Early Support

10: Director of Public Health Annual Report 2024/25: Physical Activity 29 - 32

This paper highlights to the Board the Kirklees Director of Public Health (DPH) Annual Report 2024/25, entitled Physical Activity Matters.

Contact: Rachel Spencer-Henshall, Executive Director for Public Health and Corporate Resources, Lucy Wearmouth, Head of Improving Population Health, Owen Richardson, Data and Insight Enablement Lead for Public Health, and Martin Gonzalez, Public Health Manager.

11: Pharmaceutical Needs Assessment 2025-28 final sign-off 33 - 42

The Board is asked to sign off the Pharmaceutical Needs Assessment (PNA) 2025-28, prior to publication on the Kirklees Council web site.

Contact: Owen Richardson, Data and Insight Enablement Lead for Public Health.

12: Kirklees Joint Strategic Assessment (KJSA) update 43 - 44

To provide an update to the Board on the Kirklees Joint Strategic Assessment (KJSA).

Contact: Owen Richardson, Data and Insight Enablement Lead for Public Health.

13: Kirklees Partnership Framework Review 45 - 60

The presentation sets out the background to the current Partnership Framework, establishes that Council officers are currently conducting a review, and poses a series of questions about the Framework for the Board's consideration.

Contact: Tom Whitehead, Policy and Partnership Officer

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Contact Officer: Jenny Bryce-Chan

KIRKLEES COUNCIL

HEALTH AND WELLBEING BOARD

Thursday 27th March 2025

Present: Cllr Beverley Addy, Chair of the Health and Wellbeing Board
Catherine Riley, Associate Director of Strategy
Calderdale and Huddersfield NHS Foundation Trust
Warren Gillibrand, Professor of Nursing Practice
Tom Brailsford, Executive Director for Children and Families
Liz Mear, Independent Chair Kirklees Integrated Care Place Committee
Karen Jackson, Chief Executive Locala
Rachel Spencer-Henshall, Deputy Chief Exec
Michelle Cross, Executive Director Adults and Health
Alaisdair Brown, Chief Executive of Kirklees Active Leisure
Cllr Carole Pattison, Leader of the Council
Vicky Dutchburn, Interim Accountable Officer, Kirklees ICB

In attendance: Alex Chaplin, Strategy and Policy Officer
Emily Parry-Harries, Consultant in Public Health
Steve Brennan, Kirklees Director Partner Development
Cllr Jo Lawson, Lead Member for the Health and Adults Scrutiny Panel
Clare Groves, Service manager CGL
Jacqui Stansfield, Safeguarding Adults Partnership Manager (via Teams)

Apologies: James Creegan
Christine Fox
Sean Rayner
Len Richards
Dr Vanessa Taylor

1 Membership of the Board/Apologies

Apologies were received from James Creegan, Christine Fox and Sean Rayner.

The Chair gave a special note of thanks to former Board members Carol McKenna and Len Richards who had recently retired.

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2 **Minutes of previous meeting**

That the minutes of the meeting held on the 20 January 2025, be approved as a correct record.

3 **Declaration of Interests**

No interests were declared.

4 **Admission of the Public**

All agenda items were considered in public session.

5 **Deputations/Petitions**

No deputations or petitions were received.

6 **Public Question Time**

No public questions were asked.

7 **Update from board members following the KAL items and role as employer**

Cllr Beverley Addy led the discussion, reminding Board members that at the informal meeting of the Health and Wellbeing Board on the 28th November 2024, colleagues from Kirklees Active Leisure (KAL) presented their targeted health and wellbeing initiatives aimed at reducing health inequalities, support the NHS by alleviating demand and improving overall health outcomes. Following the discussion, board members were encouraged to look at how they might engage with the initiatives from their own staffing point of view and how they might take up healthy options to enable employees to look after their own health and wellbeing. Board members were invited to provide feedback and give examples of initiatives they have undertaken within their organisations.

Dr Liz Mear, Independent Chair Kirklees Integrated Care Place Committee, advised that for staff in the Health and Care Partnership, as an induction offer to employees, they can link through to KAL to see what is on offer and join up. Dr Mear posed a question explaining that previously members of a corporate body could potentially get a discount for joining, giving an extra incentive and wondered if that was still possible and if it was still happening?

Professor Warren Gillibrand, University of Huddersfield provided the Board with information on the Employee Wellbeing Framework used within the University of Huddersfield, explaining that the University has enjoyed a long and positive relationship with KAL. He informed the Board that Health and wellbeing is approached in various different ways particularly around mental health and also physical health. There are a whole raft of initiatives that are provided for free to staff and students equating to approximately 30,000 people. Some examples are a range of social sports including cricket, football and a new one called pickleball, walking events and archery. In terms of physical and mental health there are choirs, musical events, book clubs, menopause support group and a regular wellbeing fare which anyone can attend. In addition, there is a return-to-work support group for parents.

Rachel Spencer-Henshall, Deputy Chief Executive and Executive Director for Public Health and Commissioning Kirklees Council, advised the Board that the Council has

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a wide range of activities and recently carried out an active travel survey for staff to enable the Council to get a sense of what would help them to actively travel. It is not just exercise during or after the workday, it is how it can also be incorporated into getting to and from work. The findings from the survey will be used to inform how staff can be effectively supported to actively travel.

In addition, the Council has quite a few staff networks, and these networks tend to set up activities such as walking groups or other types of activity groups which is beneficial as both a connection with their colleagues, and also as a way to improve physical activity. The Council also has two volunteering days a year for all staff, and some of the staff and teams will use this as an opportunity to raise money for charity as well as volunteering for the more physical types of activity.

The Council is privileged to have its own wellness service, which is the public health delivery arm, aiming to help people identify what they want to improve for their health and wellbeing, and the service can refer people into KAL.

Rachel Spencer-Henshall informed the Board that following the previous conversation, a number of questions came to mind. For example, given that a lot of money is spent on interventions for anxiety and mental health, how can we be more creative about the solutions offered? Whilst counselling has an important place, in terms of prevention, how can we get people more active because this might then prevent them needing other interventions if they can be directed to physical activity offered locally. There is more to do, however, there is quite a lot going on and the aim is to continue working with staff to understand what they want to help to move more.

Karen Jackson, Chief Executive, Locala, informed the Board that Locala runs a significant number of initiatives and events and regularly holds a wellbeing week with a timetable of events ranging from mental health and physical activities. In addition, as a social enterprise, staff are given three days each year where they can volunteer how they choose. The team are good at being active and organising their own activities and walking type meetings particularly during Covid was encouraged and people found this to be positive for their mental health and wellbeing. There is a lot going on and the staff are in control and tend to drive this themselves and come with suggestions and requests. There is also a colleague fund where they can come with suggestions and if it needs a bit of financial leverage to set something up, that is available for them to do that.

Vicky Dutchburn, Interim Accountable Officer, Kirklees ICB, informed the Board that the Health Service has a range of initiatives including Employee Assist which offers a range of initiatives and mental health first aiders. There is also the volunteering type work with the aim of keeping it in the local communities, giving back into the community. The service advocates movement, not necessarily physical exercise but more movement and, an initiative from Covid that has carried on within a significant number of teams is the walking meetings.

Vicky Dutchburn explained that with the current organisational issues, these initiatives are being actively promoted and with the change in weather, employees are being encouraged to take their lunch break and use it productively. On a wider

scheme across West Yorkshire, they are currently doing the cycle to work review and once again promoting that scheme.

RESOLVED:

That the information presented be noted.

8 Annual Report - Kirklees Safeguarding Children's Partnership

Julie Sykes, Independent Scrutineer of Kirklees Safeguarding Children's Partnership, presented the Kirklees Safeguarding Children's Partnership's (KSCP) annual report, advising that the report outlines the milestones achieved and the ongoing challenges faced during the reporting period April 2023 to March 2024.

In summary, the Board was informed that Kirklees partners aim to provide high standards of safeguarding, fostering cultures of continuous improvement underpinned by ambition and innovation. Whilst each partner retained its own existing lines of accountability for safeguarding and performance monitoring, how the partnership works as a whole system is of crucial importance.

The partnership are committed to a strength-based approach, learning from work that has been successful in safeguarding children and the risk they face, as well as reviewing poor practice to facilitate improvements. As a result of this, there has been a continued focus on shared responsibility and learning across all the partnership priorities.

Highlights in terms of volume of cases dealt with indicate that 2023/24 was a busy year. The Front Door dealt with 17,608 initial contacts and 1,499 early help assessments were completed linked to 690 families. There was also a steady increase in the number of children looked after, rising from 604 in 2021, to 838 in 2023. The numbers of 16- and 17-year-olds who are not in education employment or training, remained positive for Kirklees, with rates well below those recorded for England and the Yorkshire and Humber region.

During the reporting period, the partnership focused on four key priorities, each supported by a subgroup who have developed action plans, taking responsibility for delivering against agreed actions.

Priority 1 – Tackling child exploitation and serious youth violence. The aim of this subgroup is to reduce the level of risk and harm caused by exploitation and violence for those young people who are identified at risk.

Priority 2 – Enhancing the emotional wellbeing of children and young people. The work of this subgroup focused on ensuring that all schools, colleges and universities have a postvention offer built into their bereavement policies to support healing and reduce risk after a suicide death.

Priority 3 – Promoting healthy relationships. This subgroup has focused much of its efforts engaging with educational settings, supporting them to tailor their approach to what analysis indicates are the risks the children and young people in their areas.

Priority 4 – to identify and reduce the impact of neglect on children and young people and achieve the offer of early support for children and families. The work of this subgroup focused on help that is needed to ensure that children are able to live in safe and supportive families. This includes understanding the support that is needed to enable young people and families to be resilient and able to identify their own problems before they are in crisis.

The Board was informed that the annual report also covers work from other subgroups including the Safeguarding Effectiveness Subgroup, Learning and Development, Child Death Overview Panel and the Policies and Procedures and Guidance Subgroup.

RESOLVED:

That the Board notes and accepts the Kirklees Safeguarding Children's Partnership's Annual Report and that Julie Sykes be thanked for presenting the information.

9 Kirklees Safeguarding Adults Board Annual Report

Jacqui Stansfield, Safeguarding Adults Partnership Manager, attended the meeting to present the Kirklees Safeguarding Adults Board Annual Report, on behalf of Rob MuCulloch-Graham, Independent Chair of the Kirklees Safeguarding Adults Board.

In summary, the Health and Wellbeing Board was advised that as in previous years, there has been significant challenge across the partnership with the economic difficulties which continue to impact on communities and the reduction in resources to be able to support them. It has been a year where work has been undertaken to look at how to work together to overcome financial challenges to maintain both the prevention and intervention work of services. Without the partnership work adults and families would have faced further significant health and social care difficulties.

The annual report outlines work against the strategic plan and shared objectives that have been agreed across the partnership. The KSAB's vision is to work together to take action to keep the people of Kirklees safe from abuse and neglect and putting people at the heart of everything and one aspect that is paramount is making safeguarding personal.

Work is in accordance with the six safeguarding principles which are empowerment, prevention, proportionality, protection, partnership and accountability. Working together, supporting adults to make safer choices within their chosen lifestyle, working together to take steps to prevent or stop abuse and neglect.

Having a confident workforce which is able to respond to safeguarding matters and promoting the public as a key partner is important. KSAB undertakes this through leadership, protection, prevention and learning and development. There is a three-year strategic plan and the annual report for 2023/24, showcases the shared objectives as follows:

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Supporting the workforce – enabling frontline staff and volunteers to expand their knowledge and supporting them to acquire the skills necessary to carry out their role effectively.

Learning from experience – proactively share good practice and challenge practice that could be improved through the board's subgroups and board meetings to reevaluate and improve services across the partnership.

Partnership working – continuing to strengthen links and work closely with KSAB partners to provide assurance that safeguarding strategies are effective via self-assessments and joint learning events.

Community/public engagement – exploring ways of harvesting and sharing stories of people who have a direct lived experience of safeguarding as well as from those working or volunteering in the safeguarding sector, seeking examples of good practice and problematic areas across the partnership to improve ways of working.

The Board was informed that in 2023/24, the learning and development subgroup, were looking at different ways of shared learning. Partners have different shift patterns, for example, Locala nurses and hospital doctors and nurses who may need to access information, therefore there is a need to look at how to reach people at different times, aware that not everyone works nine to five.

Included in the learning and development offer is a variety of learning aids and different sources of resources that both staff and volunteers across the partnership can access. Another area looked at was around transitional safeguarding, mental capacity, professional curiosity, trauma, civility and respect, support/advice and learning and development for carers and young people. In addition to a whole programme of safeguarding adults in faith-based organisations.

The Board was informed that as part of reaching out to partnerships, a variety of network events were held. Once such event was navigating the 'carerverse' where a selection of invited speakers talked to frontline staff and the volunteer workforce about considering challenge and hidden challenge that carers encounter. The session included looking at pathways to support carers and those they care for in their situation and circumstance. There was also a network event around the Mental Capacity Act, aiming to demystify some of the mental capacity concerns that staff have.

A task and finish group was established with colleagues from communities and children's safeguarding partnership. The aim was to look at how to effectively embed learning from reviews, identify reoccurring themes coming out of the safeguarding adults' reviews, the domestic homicide reviews, (now called domestic homicide related deaths) and the children's practice reviews, to ensure learning reaches frontline staff.

The KSAB challenge event takes place each year in order to undertake constructive challenge about performance and to identify and agree priority areas of focus for each agency and KSAB over the next year. In 2024, the themes coming from quality and performance data from discussion with practitioners, highlighted that the

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areas that needed to be focused on are, transitions, domestic abuse, working with families and households, community work and community networks, dealing with resource reduction and capacity reduction.

RESOLVED:

That the Board notes the Kirklees Safeguarding Adults Board Annual Report and that Jacqui Stansfield be thanked for presenting the information.

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KIRKLEES COUNCIL COUNCIL/CABINET/COMMITTEE MEETINGS ETC DECLARATION OF INTERESTS HEALTH AND WELL BEING BOARD			
Name of Councillor			
Item in which you have an interest	Type of interest (eg a disclosable pecuniary interest or an "Other Interest")	Does the nature of the interest require you to withdraw from the meeting while the item in which you have an interest is under consideration? [Y/N]	Brief description of your interest

Signed: Dated:

NOTES

Disclosable Pecuniary Interests

If you have any of the following pecuniary interests, they are your disclosable pecuniary interests under the new national rules. Any reference to spouse or civil partner includes any person with whom you are living as husband or wife, or as if they were your civil partner.

Any employment, office, trade, profession or vocation carried on for profit or gain, which you, or your spouse or civil partner, undertakes.

Any payment or provision of any other financial benefit (other than from your council or authority) made or provided within the relevant period in respect of any expenses incurred by you in carrying out duties as a member, or towards your election expenses.

Any contract which is made between you, or your spouse or your civil partner (or a body in which you, or your spouse or your civil partner, has a beneficial interest) and your council or authority -

- under which goods or services are to be provided or works are to be executed; and
- which has not been fully discharged.

Any beneficial interest in land which you, or your spouse or your civil partner, have and which is within the area of your council or authority.

Any licence (alone or jointly with others) which you, or your spouse or your civil partner, holds to occupy land in the area of your council or authority for a month or longer.

Any tenancy where (to your knowledge) - the landlord is your council or authority; and the tenant is a body in which you, or your spouse or your civil partner, has a beneficial interest.

Any beneficial interest which you, or your spouse or your civil partner has in securities of a body where -

- (a) that body (to your knowledge) has a place of business or land in the area of your council or authority; and
- (b) either -

the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body; or

if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which you, or your spouse or your civil partner, has a beneficial interest exceeds one hundredth of the total issued share capital of that class.

KIRKLEES HEALTH & WELLBEING BOARD	
MEETING DATE:	07.08.2025
TITLE OF PAPER:	Kirklees SEND Sufficiency for Kirklees 2025-2028 & Appendix
1. Purpose of paper	<p>For information only.</p> <p>This paper is being provided to members of the Health & Wellbeing Board to provide assurance of the work being undertaken to ensure sufficiency of provision for children with special educational needs and disabilities (SEND) in Kirklees.</p>
2. Background	<p>All local authorities have a legal duty to understand local needs and demands in terms of children and young people with Special Educational Needs and Disabilities (SEND).</p> <p>This plan is to help us to make sure we have the enough of the right type of learning places in Kirklees so that all children and young people can learn and thrive. It shows that we understand the needs of the local population and how those needs are changing.</p> <p>This plan and the data in the appendix demonstrate that understanding. The plan sets out the amounts of the different types of learning provision we have currently and what we need to develop more of, as well as what we might need less of in the future. In Kirklees we call this 'enough of the right stuff'.</p> <p>This plan sits alongside other strategies and plans:</p> <ul style="list-style-type: none">• Our Kirklees Futures which describes our overall strategy for learning in Kirklees• SEND - The Big Plan and The Big Plan 2 which describes our approach to transforming our SEND system• Kirklees SEND Joint Commissioning Strategy which describes how the different partners work together in Kirklees to plan and deliver services• Securing High Quality Learning Places which details the forecast demand and analysis of cohorts in our whole school system <p>The plan looks at our longer-term intentions, as well as our more immediate needs for provision. It tells us where we need to invest more money in creating new places or provisions. This includes working with Alternative Provision, building new schools and/or adapting existing schools for a different purpose. It helps us to explain to providers (e.g. schools and health services) where we need to make changes to current provision to meet current and future need. It will help us to make sure we plan in advance and that our provision is sustainable and that we get the best value for money.</p>
3. Proposal	<p>The Board is asked to support the aims and objectives described in the SEND Sufficiency Strategy for Kirklees 2025-2028.</p>

<p>The recommendations provided in the SEND Sufficiency Strategy for Kirklees supports the outcomes described in the JHWS, supporting the best start outcome and inequalities and inclusion priority.</p>
<p>4. Financial Implications</p> <p>Support for children and young people with SEND represents significant finance and resource pressures for Kirklees council. This strategy helps to guide our SEND Transformation Programme to improve value for money and efficiency of services.</p>
<p>5. Sign off</p> <p>Tom Brailsford – Executive Director Children and Families 30/07/2025</p>
<p>6. Next Steps</p> <p>Continue to implement the recommendations contained within the strategy. The strategy will be updated on an annual basis to include new data, as it becomes available.</p>
<p>7. Recommendations</p> <p>The Board is asked to support the aims and objectives described in the SEND Sufficiency Strategy for Kirklees 2025-2028.</p>
<p>8. Contact Officer</p> <p>Stewart Horn Head of Children’s Integrated Commissioning Children & Families Stewart.horn@kirklees.gov.uk</p>

Special Educational Needs and Disabilities (SEND)

SEND The Big Plan

SEND Sufficiency Strategy for Kirklees (Enough of the right stuff)



2025-2028

What this plan covers

This plan is to help us to make sure we have the enough of the right type of learning places in Kirklees so that all children and young people can learn and thrive. It will show that we understand the needs of the local population and how those needs are changing. All local authorities have a legal duty to understand local needs and demands in terms of children and young people with Special Educational Needs and Disabilities (SEND). This plan and the data in the appendix will demonstrate that understanding.

The plan will set out the amounts of the different types of learning provision we have currently and what we need to develop more of, as well as what we might need less of in the future.

In Kirklees we call this 'enough of the right stuff'.

This plan sits alongside other strategies and plans:

- [Our Kirklees Futures](#) which describes our overall strategy for learning in Kirklees
- [SEND - The Big Plan!](#) Which describes our approach to transforming our SEND system
- Kirklees SEND Joint Commissioning Strategy which describes how the different partners work together in Kirklees to plan and deliver services
- [Securing High Quality Learning Places](#) which details the number of places in our whole school system

We make sure that we use accurate data and intelligence to help us to make plans and decisions. The main source of this information is from the [Kirklees Joint Strategic Assessment \(KJSA\)](#).

The plan will look at our longer-term intentions, as well as our more immediate needs for provision.

It will tell us where we need to invest more money in creating new places or provisions. This might include working with the independent education sector, building new schools or adapting existing schools for a different purpose.

It will help us to explain to providers (e.g. schools and health services) where we need to make changes to current provision to meet future needs.

It will help us to make sure our provision is sustainable and that we get the best value for money.

Where the data comes from

This plan has been created using a number of data sources. The aim is for the data to be accurate, consistent, and comparable with national data. For this reason, we have used the annual SEN2 extraction point (January 2023). All local authorities are required to make an annual return to the Department for Education (DfE) with information about our special educational needs population and this is called the SEN2 return. It is completed in January every year.

We have also used data from the school census, which is carried out in the spring and autumn each year.

To inform our projections, in addition to this annual data set we have used intelligence from a number of other sources. This includes:

- population data and trends from the national census
- our recent Education, Health & Care plans (EHCPs)
- annual reviews of existing EHCPs
- SEN Support and My Support Plan documents
- information from schools and other learning establishments
- conversations with families
- complaints or tribunals

which have been produced and the subsequent decision-making processes.

We will hold termly discussions so that we continue to take this into account and adjust our plans accordingly.

We will update this document annually when new data becomes available.

The Kirklees approach to planning school places

Planning learning places is a complex process. It depends on numerous variables, many of which are difficult to predict over the given period of time. Therefore, it cannot be an exact science because it pulls together the effects of these changing variables. Variables include fluctuations and underlying trends in child population demographics, changes in housing developments, the migration of families between and within local authority areas, local geography, and the exercising of parental preference for schools in Kirklees and in neighbouring local authorities. The context for planning for future school places is set out, including the limited availability of capital funding, alongside the different opportunities and associated processes. This poses the challenge of finding creative, cost effective and value for money solutions that provide the sufficient numbers of high-quality learning places required, where they are needed and when they are needed, so that children and young people can access schools locally. The introduction of new places in the wrong place or at the wrong time can create sustainability challenges for existing schools, already under increasing financial pressures.

Our [Securing Sufficient High Quality Learning and Childcare Places](#) document looks at current child population, as measured by NHS GP registration data, to describe the size and distribution of the potential child population. This baseline information is used to determine the likely need for learning places in the future. Like most other local authorities, Kirklees has seen a significant change in the size of the school age population in recent years. There has been an increase of almost 20% since 2000, from approximately 5,000 per age cohort to around 6,000 in 2015/16. However, since this time, the size of Reception cohorts has been declining. Evidence suggests that this trend will continue towards 2025/26 before a slight increase in 2026/27 in North Kirklees only. It is not possible to tell at this stage whether this increase will be short-lived or more sustained, however, there is some evidence to suggest that beyond this time the population will start to stabilise, though caution is required as the children referred to here have not been born yet. Apart from a small increase in Batley East, there are no areas of Kirklees showing a growth in the size of Reception cohorts and some areas are showing a more rapid decline than others. The population growth previously experienced in the primary phase has now moved into the secondary phase, peaking in 2022/23 with demand for places remaining high in 2023/24, although below this Kirklees-level headline there was a small reduction in demand in the North, offset by increased demand in the South. However, a decline in demand for secondary places across the authority is expected in 2024/25 and beyond, with the only possible exception being where there will be significant housing development.

Both housing development and the impact of inward migration (from other parts of the country and those new to the country) are important considerations affecting the need for places. These factors are harder to predict but cannot be ignored when assessing the requirement for places.

The variation in localised child populations means that in some places, such as some of the more rural areas of Kirklees, there may be an increasing number of school places that are either unfilled or attract preferences from outside the area (an important factor when assessing basic need). This may also be the case where new schools have been introduced.

Our inclusive ambitions

In Kirklees we have high aspirations for our children and young people. We have developed a set of 'inclusive ambitions' as part of our SEND Transformation Programme which describe our approach to developing a high performing, inclusive education system. These ambitions are set out below, along with how they apply to SEND sufficiency.

Children have the best start in life and achieve their potential

We want all children and young people in Kirklees to receive appropriate high-quality education so that they can fulfil their potential and maximise their future opportunities.

Children and families are supported at the earliest opportunity

We will ensure that support is targeted towards early years so that needs are identified and support put in place.

Our young people are educated in Kirklees

Our ambition is that Kirklees CYP will be educated within the Kirklees area in state funded provision.

Our young people have a consistent and inclusive offer

We support an inclusive approach in schools and want the majority of our children and young people with SEND to be educated in inclusive mainstream provisions.

Educational outcomes and whatever our young people are interested in - we want them to excel

We will ensure that we have a range of provisions available that will inspire young people to achieve. This might include vocational, outdoor learning or similar.

Where are our children and young people currently being educated?

Establishment Type	% of All Age EHCP (SEN2 2024)	% of Statutory school age EHCP (SEN2 2024)
Alternative provision	2.0	2.4
Educated elsewhere	1.1	1.4
Further education	20.1	0
Mainstream	44.6	62.8
NEET (Not in Education, Employment or Training)	4.7	1.1
NEET - Other	0.1	0.0
Non-maintained early years	0.2	0.3
Other	1.4	0.2
Special schools	25.7	31.6

The table above shows that in line with our inclusive ambitions, the majority of children with SEND in Kirklees are supported to learn in a mainstream school.

To support this, we have developed a number of Additionally Resourced Provisions (ARPs) within mainstream schools and many schools have developed their own nurture bases or similar to help children to thrive.

We have commissioned a range of Alternative Provisions (AP) which schools can access through our Inclusion Multi-Agency Panel (IMAP) process to provide additional support to children where it is needed. Alternative Provision is described in further detail below.

We have seen an increasing number of children who are electively home educated in the last 5-years.

To address the number of older young people who are not in education, employment or training we are increasing the number of opportunities for our learners post-16. Options will cover a range of education, employment and training opportunities.

Current provision for children and young people with Special Educational Needs (SEN) in Kirklees

We already have some very effective learning provision in place for children and young people in Kirklees, with a skilled and committed workforce across the partnership. This section will describe the range of options currently available.

Inclusive mainstream schools and colleges

We support all of our learning establishments to provide an inclusive learning environment so that as many children and young people with additional needs as possible can learn alongside their peers. This ensures that they can attend local schools and make friends within their local community, that they have positive emotional health, strong social connections and make good progress with learning. Investing in our learners and their families at the earliest opportunity will support us to help them achieve their best possible outcomes.

We have developed a range of toolkits to support schools to implement the 'graduated approach' which enable teachers to identify children and young people who need something additional or different to their peers to make progress. The toolkits help school staff identify the provision that can be put in place to meet the needs of such children and young people and to monitor the impact of that provision. Additional support is provided by our Specialist SEND Outreach and Educational Psychology teams who provide training, advice, guidance and strategies to assist schools and colleges. Many of our schools have developed their own 'nurture bases' as a dedicated resource within the school.

We have worked closely with our mainstream schools to develop a 'cluster' approach to meeting needs at an earlier stage which involves schools being grouped together in clusters based on location. Cluster schools work together to share resources, expertise and good practice which enables children and young people to get the support that they need more quickly. Each cluster is supported by a team of professionals for example from Early Support and Educational Psychology who provide advice, guidance and training to support with meeting the needs of children with SEND.

Additionally Resourced Provision in mainstream schools

Additionally Resourced Provision (ARP) is a provision in a mainstream school, designed to provide specialist and targeted support for children with special educational needs and disabilities (SEND). ARPs receive additional funding, which means they can offer additional support and resources for the pupils who attend the provision offering:

- Teaching and support staff with additional knowledge, skills, expertise and allocated time in a particular area of SEND
- Specialist environments which support the learning, behaviour and social and emotional needs of each pupil
- Systems to identify, plan for and track small-step progress to inform next steps

- Lessons in mainstream classes, but with additional specialist resources and teaching
- Additional Educational Psychologist and specialist health input as necessary
- Accommodation and environment that is adapted to meet need

Each ARP specialises in a particular area of special educational need and places are allocated according to the specific needs of the child or young person (as described in the table below). The ARP is an integral part of the school, with pupils sharing spaces and interactions.

Admissions to the ARPs is through the statutory EHCP process. Children and young people must have an EHCP to access an ARP place and requests for a place are made through the annual review process. Schools will have sought additional specialist advice and have documented evidenced use of the graduated approach in the review paperwork. If this indicates that provision is now required which is over and above what can be provided in the mainstream school, an ARP may be considered. Requests are then considered in the SEND Decision-Making Groups.

Additionally Resourced Provision in mainstream schools		
Strand	Primary	Secondary
Hearing Impairment	Lowerhouses CE (VC) JI & EY School 14 Places	Newsome Academy 14 Places
Visual Impairment	Dalton School 14 Places	Moor End Academy 14 Places
Physical Impairment	N/A	Newsome Academy 14 Places
Complex Communication and Interaction Needs	Windmill Church of England Primary School (Communication & Interaction) 6 Places Netherhall St. James (CE) VC I&N School 12 Places Netherhall Learning Campus Junior School 12 Places	Royds Hall Community School (SLCN) 24 Places Netherhall Learning Campus High School 20 Places Honley High School 20 Places Thornhill Community Academy 20 Places
Cognition and Learning	Old Bank Academy 16 Places	N/A
Social, Emotional and Mental Health Needs	Beaumont Primary Academy 6 Places Carlinghow Academy 12 Places	N/A

Alternative Provision

Alternative provision is education arranged by local authorities for pupils who, because of exclusion, illness or other reasons, would not otherwise receive suitable education; education arranged by schools for pupils on a fixed period suspension; and pupils being directed by schools to off-site provision to improve their behaviour.

Alternative provision can take many different forms, depending on the individual needs of the child. It is important the school or local authority service, commissioning the provision, is clear on whether the provision is a registered school with a DfE number, or an unregistered setting as this will have considerations regarding how many hours a pupil can access the provision.

In all cases, the provision should be both efficient in its delivery of education and suitable to the child's age, ability, and aptitude; and to any special educational needs they may have.

Provision will differ from pupil to pupil, but there are some common elements that alternative provision should aim to achieve, including:

- good academic attainment on par with mainstream schools, particularly in English
- mathematics, and science (including IT), with appropriate accreditation and qualifications
- the specific personal, social, and academic needs of pupils are properly identified and met to help them to overcome any barriers to attainment
- improved pupil motivation and self-confidence, attendance, and engagement with education; and
- clearly defined objectives, including the next steps following the placement such as reintegration into mainstream education, further education, training or employment

Alternative provision should be good quality, registered where appropriate, and delivered by high quality staff with suitable training, experience, and safeguarding checks. It should have clearly defined objectives relating to personal and academic attainment. Where an intervention is part-time or temporary, to help minimise disruption to a pupil's education, it should complement and keep up with the pupil's current curriculum, timetable, and qualification route.

In Kirklees we have commissioned a range of alternative provision from relevant providers as part of a framework contract. This is described in more detail on our [Local Offer website](#). The offer includes medical provision, outdoor learning and online learning provision, as well as assessment places. Admissions into the alternative provision will be through the Kirklees Inclusion Multi-Agency Panel (IMAP). The IMAP includes representation from the EHCP team, Educational Psychology, Designated Clinical Officer, Designated Social Care Officer, School Head Teachers/Special Educational Needs & Disabilities Co-ordinators, and other multi agency professionals.

Special schools

In Kirklees we have six special schools which provide the specialisms shown in the table below. Some special school places are commissioned from other Local Authorities or independent providers to meet specific pupil needs.

Special school planned places for the 2025 - 2026 academic year			
Specialism	School	Places	Total places
Complex Communication and Interaction Difficulties (including Autism)	Woodley School & College	180 places (approval to gradually increase to 194 places in the lead up to completion of a new school building)	180 places
Social Emotional and Mental Health Difficulties (age 7 - 16)	Joseph Norton Academy	80 places (approval to gradually increase to 132 places in the lead up to completion of a new school building)	80 places
Complex needs (age 5 - 19)	Southgate School	184 places	394 places
	Ravenshall School	210 places	
Profound and Multiple Learning Difficulties (age 3 - 19)	Fairfield School	124 places	248 places
	Castle Hill School	124 places	
		TOTAL	902 places

We are in the process of rebuilding two of our special schools. This will give us modern, state of the art facilities which will not only increase our capacity but will provide high quality, accessible learning environments.

Our SEMH special school, Joseph Norton Academy will relocate to a new site in the centre of Kirklees. Capacity will increase to 132 places. The age range will be expanded to include KS1 and KS2 children, as well as increased provision for girls.



Artist impression of the proposed new SEMH school rebuild, Huddersfield

To meet the need for additional places for children with autism Woodley School & College will move to a new site in Almondbury and capacity will increase to 194 by late 2026. In advance of the new school building opening, we have already increased the capacity of the school by opening two satellite provisions. The first at Woodley Moor has a capacity of 25, and a shop facility has been created in Huddersfield town centre to provide learning for post 16 young people with a capacity of 13.

Special school satellite provision

Special school satellite provision is where a special school increases its capacity by expanding onto an additional site. The additional site may be on the site of a mainstream school which provides some physical space for satellite purposes, or it could be a suitable building not occupied by another school.

This applies to:

- Ravenshall Special School hosted by Headfield CE (VC) Junior School
- Ravenshall post-16 provision based in a former library building
- Southgate Special School hosted by Newsome Academy
- Woodley Moor based in a former children's centre building
- Woodley post-16 provision based in a shop in Huddersfield town centre

As pupils accessing satellite provision remain on the roll of the special school, the number of places in the table above includes satellite provision.

Areas of demand

Our data and intelligence (Appendix 1) tell us that we have the following pressures in our SEND system which we need to address:

Social Emotional and Mental Health (SEMH) needs

We are seeing increasing SEMH needs particularly for:

- younger children in primary settings
- young people in secondary school who are at risk of exclusion or have low attendance
- there is a significant cohort of young people with identified SEMH needs in secondary provision who will need suitable 16+ provision

Neurodiversity

In line with national trends, we have seen a significant increase in children with identified needs relating to neurodiversity (e.g. autism, ADHD). There is also a significant number of children in primary settings who will need suitable provision as they move into secondary and post-16 education. It is important that we consider the impact of growing recognition of neurodiversity in our mainstream schools, as well as the need for special school places.

Speech, language and communication

We have seen a significant increase in the identification of speech, language and communication needs in younger children since the Covid 19 pandemic. If these needs are identified and addressed in early years, children will stand a better chance of catching up with expected levels of achievement and reduce the need for more specialist provision in later years.

Multiple needs

It is being increasingly recognised that many children and young people have needs which do not always fit into individual categories, e.g. many children with SEMH needs will also have neurodiversity needs. It is essential that our education provisions are equipped with the appropriate knowledge and skills to meet these needs.

Change of phase

We know that many children with SEND are thriving in inclusive primary schools but can struggle with the change of phase to a busy secondary school. We need to ensure that there are suitable inclusive provisions in secondary schools and post-16 provisions to meet the needs of these young people.

Post-16 provision

The increasing number of children in specialist education provision will lead to an increased future demand for more specialist post-16 provision. We need to ensure that we expand our current offer and develop a range of education, employment and training opportunities for young people when they leave school at 16.

Immediate place pressures

We have identified an immediate need for places to meet demands arising from recent EHCPs being completed. This demand is primarily in Autism Spectrum

Condition and Social, Emotional and Mental Health needs. It is likely that some of these provisions may only need to be short term until other measures take effect, including the rebuild of special schools.

What are we doing about it?

In line with our inclusive ambitions, we want more of our children with SEND to be educated in mainstream schools which have an inclusive approach. We are working on a number of schemes to support this which are listed below. We will also support our inclusive approach by developing satellite or ARP provision within mainstream schools to enable more children and young people with additional needs to learn alongside their friends and peers.

School clusters

We will continue to support the development of our school 'clusters' to help them to provide a more inclusive environment for children and reduce the need for more specialist provision.

Clusters will be able to pool their resources and locally commission services and support where required.

Additionally Resourced Provisions (ARPs)

We will continue to expand our ARP provision.

We have identified a need for ARP in secondary schools for children presenting with SEMH issues. We will work with our secondary schools to open at least one north and one south SEMH ARP by 2026.

Primary assessment centre

We will develop a primary provision for primary age children who are at risk of exclusion, or have been excluded, or have low attendance. The emphasis will be on short term assessment and re-engagement, with the aim of returning to their mainstream school.

Speech language and communication

We will invest in additional support for early years and primary settings to address the speech, language and communication needs of our younger children to enable them to make progress and reduce the need for more intensive support or specialist places in later years.

Special schools

In Kirklees we have some well-established special schools, providing a high standard of education and care for our children. It is essential that we make the most efficient use of the places we have available. We are working with our special schools to ensure that their admissions criteria match the needs outlined in this document, to be confident that places are available for those children with the highest levels of need. It is essential that our decision making, and allocations processes are consistent with this approach.

We also need to be confident that our special schools have the resources, facilities, staff and skills to provide a high-quality learning experience.

We are in the process of rebuilding our CCI and SEMH schools with increased capacity, as described above.

Special school satellites

An effective way to increase capacity of our special schools are satellite provisions. These are classes based in mainstream schools that are staffed by Special School teachers and support staff. We have already successfully opened five satellites. We intend to open new satellite provision for up to 20 primary age children with SEMH needs to add temporary capacity until the new school building is completed. It is likely that this temporary facility will be decommissioned at that point.

Use of independent special school places

Due to a shortage of capacity in local state funded schools we have placed children in independent and/or out of area special schools. This has been primarily for children with autism and SEMH needs, particularly older children, as well as younger children with profound and multiple learning difficulties. Whilst there will always be a small number of children whose level of need requires a very specialist provision which is not available locally, this tells us that we need to increase our provision in Kirklees to meet our ambition for children to be educated close to where they live.

As of January 2025, we have 183 children placed in independent schools. It is our aim to have less reliance on the independent sector for our new school places. The additional places created by the special school rebuilds, satellites and other means will contribute to the reduction.

Alternative Provision Free School

We have applied to the Department for Education to open a new Alternative Provision Free School in Kirklees. The bid has been submitted in partnership with a multi-academy trust and if approved will provide additional alternative provision capacity.

Immediate place pressures

We will address our immediate requirement for places by working with our school system to rapidly put in place additional special school satellite and ARP provisions, along with commissioning appropriate alternative provisions.

16+ provision

We will review our 16+ provision to ensure it meets the growing needs of young people with SEMH and/or neurodiversity currently in the school system.

Next Steps

This plan will form a key pillar of the SEND Transformation Programme in Kirklees. It will be published on our Local Offer website and shared with key stakeholders, including our schools.

This plan will also be used to engage with independent sector providers to develop and shape the SEND market in Kirklees.

A SEND sufficiency group has been established, which will meet on a termly basis to review the available data and intelligence. The membership of the group includes Local Authority and Health commissioners, EHCP team, SEND leads and representation from the Schools Forum. The group will examine the outcomes from recent EHCPs created and Decision-Making Panel recommendations, as well as intelligence gathered from across the learning system to inform commissioning or decommissioning decisions.

This plan will be reviewed annually, in line with the availability of the SEN2 dataset.

Conclusion & summary of needs

We recognise that many of our children have complex needs which means that they cross over multiple need categories. We will help all of our provisions adapt in recognition of this. For the purpose of this summary, we have used primary need as the descriptor.

Key

↑	We will develop more of this type of provision
→	We have the right amount of this type of provision/ demand remains the same
↓	We will reduce the amount of this type of provision
↗	Demand is rising for this type of provision
↘	Demand is reducing for this type of provision

Provision Type	Early Years	Primary	Secondary	Post-16	What are we doing?
Special school (including satellites)					
<ul style="list-style-type: none"> • SEMH • ASC • Complex needs • Visual Impairment/ Hearing Impairment 	<ul style="list-style-type: none"> ↑ ↗ ↑ ↗ ↑ ↗ ↓ ↘ 	<ul style="list-style-type: none"> ↑ ↗ ↑ ↗ ↑ ↗ ↓ ↘ 	<ul style="list-style-type: none"> ↑ ↗ ↑ ↗ ↑ ↗ ↓ ↘ 	<ul style="list-style-type: none"> ↑ ↗ ↑ ↗ ↑ ↗ ↓ ↘ 	<p>Building a new SEMH school to add places and increase age range.</p> <p>Building a new ASC/CCI school.</p> <p>Develop additional satellite provision for SEMH and complex needs.</p>

<p>Additionally Resourced Provision (ARP)</p> <ul style="list-style-type: none"> • SEMH • ASC • Complex Needs • Visual Impairment/ Hearing Impairment 	<p>N/A N/A N/A N/A</p>	<p>↑ ↗ ↑ ↗ N/A → →</p>	<p>↑ ↗ ↑ ↗ N/A → →</p>	<p>N/A N/A N/A N/A</p>	<p>We will open 2 new secondary SEMH ARPs.</p> <p>We will expand ASC ARP provision.</p>
<p>Alternative Provision</p> <ul style="list-style-type: none"> • Full time AP • Complementary (or wraparound) alternative provision • Day 6 	<p>N/A N/A N/A</p>	<p>↑ ↗ ↑ ↗ ↑ ↗</p>	<p>↑ ↗ ↑ ↗ ↑ ↗</p>	<p>N/A N/A N/A</p>	<p>We are reviewing our commissioned AP provision and will revise contracts to increase or decrease number of places for each type of need and age group where required.</p>
<p>Ordinarily Available Inclusive Provision (ie education in mainstream provisions)</p> <ul style="list-style-type: none"> • SEMH • ASC • Complex Needs • Visual Impairment/ Hearing Impairment 	<p>↑ ↗ ↑ ↗ N/A →</p>	<p>↑ ↗ ↑ ↗ N/A →</p>	<p>↑ ↗ ↑ ↗ N/A →</p>	<p>↑ ↗ ↑ ↗ N/A →</p>	<p>We will support our mainstream provisions to improve their skills and facilities to accommodate more children with additional needs in an inclusive environment.</p> <p>This will include support within clusters, support and training from specialist outreach and additional commissioned support where required.</p>

KIRKLEES HEALTH & WELLBEING BOARD
MEETING DATE: 7th August, 2025
TITLE OF PAPER: Director of Public Health Annual Report 2024/25: Physical Activity Matters
<p>1. Purpose of paper</p> <p>This paper highlights to the Board the Kirklees Director of Public Health (DPH) Annual Report 2024/25, entitled Physical Activity Matters.</p> <p>Directors of Public Health have a statutory requirement to write an annual report on the health and wellbeing of their local populations. The focus of the report is chosen by the DPH and its aim is to inform local people about the health of their community as well as inform decision-makers on health gaps and priorities that need to be addressed - for example in subsequent policies, strategies or action plans. It is important to note that all DPH reports are an independent professional statement about the health of local communities and are separate to the political decision-making process of Local Authorities.</p> <p>This paper outlines the purpose and content of the 2024/25 DPH report, which the Board can use to support the promotion of the report findings and the implementation of its recommendations.</p>
<p>2. Background</p> <p>There is strong evidence to show that at all stages of life, from the very early years and right into older age (including during pregnancy, and for those with long-term health conditions), physical activity (in its many different forms) is a fantastic way to maintain and improve physical and mental health, to better connect with families and friends and with local places and open spaces.</p> <p>Even small amounts of physical activity can make a big difference over time; the key message is that <i>'some is good, more is better'</i>.</p> <p>National and local evidence shows us that levels of physical activity vary hugely across different population groups. Within Kirklees, data tells us that around a quarter of people (children and adults) report that they do less than 30 minutes of physical activity each week. When this rate is considered amongst different groups of people, the inequalities become clear. For example, we know from the 2021 CLiK (Current Living in Kirklees) survey that people out of work in Kirklees are over three times more likely to be inactive than people in work.</p> <p>The trend data from Sport England's Active Lives Surveys and our CLiK surveys also tells us is that these inequalities have existed for many years and remain persistent across a range of population groups. Despite what we may perceive as a broad range of opportunities for people to be physically active in Kirklees, there remains a range of complex barriers and enablers which influence our ability to live an active life.</p>

The 2024/25 DPH report is presented as a series of web pages, including national and local contextual information, alongside case studies and next step recommendations. The report also includes an Executive Summary and Plain English Summary in accessible PDF format.

By reading the report and next step recommendations, people and organisations will gain an improved understanding of the Kirklees inequalities experienced around physical activity. By working together, we can help to reduce these barriers and reduce the inequalities experienced by too many of our people and places.

This report provides a focus for upcoming work on developing new strategies and approaches to increasing physical activity levels amongst the least active, as part of a drive to a healthier and happier Kirklees.

This report is the start of an important journey. It focuses on developing a systems understanding of physical inactivity across Kirklees, the associated inequalities and the factors that influence our ability to move more. It is not intended to provide solutions as other ongoing work will provide further insight into our local communities. We can then use these collective findings to drive forward local action across systems to enable as many people as possible to gain from the benefits of physical activity.

4. Financial Implications

There are no direct financial implications connected to this DPH Report, however there are programmes of work with officer time and some external funding which may be influenced by the report and its recommendations for next steps.

5. Sign off

Rachel Spencer-Henshall, Executive Director for Public Health and Corporate Resources

6. Next Steps

The report will be published on the Council's web site and will be promoted by the Council's Comms Team via the usual channels.

A slide deck will also be made available to help support partners to disseminate the findings across organisations.

7. Recommendations

It is intended that Board members will make use of and disseminate the DPH report, and to adopt a *proportionate universalism* approach, which prioritises the reduction in inequalities in physical activity by supporting the next step recommendations.

1. Working with, not doing to. It is of fundamental importance that our guiding principle for future work and strategy development is one where stakeholders and partners are working with our communities and not 'doing to' them. Despite the many assets that we have in Kirklees, inequalities in access to physical activity opportunities remain. With this in mind, it is important

that all system partners base interventions and communications on what people, and especially the least active, tell us they want.

2. Research and Insight. More broadly, it is important that a research led place-based approach is taken to understanding inequalities and local need. For example, there is currently a research insights project focusing on physical activity in North Kirklees that aims to engage residents between June and August 2025. We will use these findings, as well as new data obtained through the 2025 CLIK survey, to understand place-based needs and opportunities and develop a community informed local area action plan based on this feedback. It is important that we learn from this approach and continue to develop this way of working across Kirklees places.

3. Place Partnership development. Kirklees Council and partner organisations are currently working with Sport England on their Place Partnership Expansion Programme. This work will act as a catalyst to develop and embed a whole systems approach to movement and physical activity in Kirklees. This will involve looking at specific challenges of some of our least active cohorts and communities experience, and understanding what systemic level change may be effective in reducing barriers to activity in a sustained manner.

4. Community Champions. We have a fantastic group of Community Champions, who are supported by Third Sector Leaders Kirklees. We will work with colleagues to develop a Community Champions approach to physical activity. This work recognises the significance and importance of place-based working and the power of communities.

5. Strategy. In combination, this work will be used to develop a new physical activity strategy for Kirklees, supported by the Everybody Active Advisory Group and other key partners. The aim of this strategy will be to provide a clear steer to the Kirklees system on ways in which individuals, communities and organisations from across Kirklees can enable more people to access and participate in physical activity. Whilst recognising the universal importance of physical activity across the life course, national and local data makes it clear that our strategy needs to have a specific emphasis on helping inactive people to become more active, and on reducing the inequalities in physical activity levels that are experienced by some groups.

6. Physical activity in all policies. Key to our ongoing work will be the recognition of taking a 'physical activity in all policies approach' which places emphasis on local levers that can influence change. Examples include: effectively using Health Impact Assessments to adopt active design principles through the planning system; and ensuring major regeneration projects consider and incorporate access to high quality, accessible environments, places and spaces and that travel infrastructure is designed to enable more people to be active.

7. Immediate steps. As well as the work already identified, there are immediate steps we can all take now to support people to move more:

- I would urge you, your colleagues or your organisation to promote the wonderful assets we have in Kirklees for being physically active
- Think about how your organisation encourages its members of staff to be active, and whether more could be done to support staff
- Consider how your front-line workforce can engage in brief conversations with Kirklees residents in order to remove barriers and enable participation in physical activity

- And finally, if this report has enabled you to reflect on your own personal physical activity levels, think about how our local assets and opportunities can support you to move more.

The full report will be available via the Kirklees Council web site.

8. Contact Officer

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Lucy Wearmouth, Head of Improving Population Health, lucy.wearmouth@kirklees.gov.uk

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Martin Gonzalez, Public Health Manager, martin.gonzalez@kirklees.gov.uk

KIRKLEES HEALTH & WELLBEING BOARD
MEETING DATE: 07/08/25
TITLE OF PAPER: Pharmaceutical Needs Assessment 2025-28 final sign-off
<p>1. Purpose of paper</p> <p>The Board is asked to sign off the Pharmaceutical Needs Assessment (PNA) 2025-28, prior to publication on the Kirklees Council web site.</p>
<p>2. Background</p> <p>Since 1st April 2013, every Health and Wellbeing Board in England has had a statutory responsibility to publish and keep up to date a statement of the need for pharmaceutical services for the population in its area, referred to as a Pharmaceutical Needs Assessment (PNA). Broadly, the PNA should describe the current range of pharmaceutical services, the need for such services and potential future need. It should identify any service gaps and highlight any new services that may be required.</p> <p>PNAs have a lifespan of three years. The current (2022-25) Kirklees PNA remains valid until 22/09/25, at which point it must be replaced by a new PNA. The process used for creating the new (2025-28) PNA was similar to the process previously adopted in 2022, with a West Yorkshire PNA Steering Group coordinating the work regionally, and separate PNAs being produced for each of the five Health and Wellbeing Board areas.</p> <p>The 2025-28 PNA delivery timeline was presented to the Board at the September 2024 meeting. The Board reviewed and approved the draft PNA in February 2025, prior to the report being made publicly available for a 60-day consultation period in March and April 2025.</p> <p>Four consultation responses were received in total, including two from members of the public. A public survey had previously gathered views from the public at an earlier stage in the process to help shape the content of the draft report. The Steering Group agreed that the consultation feedback did not alter the original conclusions of the report.</p> <p>Changes in pharmacy provision between publication of the draft and final PNA documents have also been considered. This relates to any changes coming into effect between March and July 2025, including a consolidation of two closely located pharmacies onto a single site, and changes to supplementary hours for four other pharmacies (two reducing their opening hours and two increasing their opening hours). None of these changes are deemed have sufficient impact to change the original conclusions of the PNA.</p> <p>The final PNA report includes new appendices containing the consultation responses and recent pharmacy changes, along with details of the considerations given to this additional information.</p>
<p>3. Proposal</p> <p>A summary of the amendments to the final version of the PNA is provided with this paper (Appendix 1). It is proposed that the Board approves the final version of the 2025-28 PNA, prior to publication on the Kirklees Council web site.</p>
<p>4. Financial Implications</p>

None
5. Sign off Rachel Spencer-Henshall, Deputy Chief Executive and Executive Director for Public Health and Corporate Resources
6. Next Steps Once approved, the 2025-28 PNA will be published on the Kirklees Council web site on 22/09/25 (when the current PNA expires): Pharmaceutical Needs Assessment (PNA) Kirklees Council
7. Recommendations The Board to approve the final version of the 2025-28 PNA
8. Contact Officer Owen Richardson, Data and Insight Enablement Lead for Public Health, Kirklees Council Owen.richardson@kirklees.gov.uk ; 01484 221000

Appendix 1

Kirklees Pharmaceutical Needs Assessment 2025-28: Summary for Health and Wellbeing Board meeting, 07/08/25

This Appendix provides a summary of the amendments to the final 2025-28 Pharmaceutical Needs Assessment (PNA), following a 60-day consultation period (April to May 2025). The draft PNA was approved by the Board in February 2025, prior to publication for consultation; the final version has been amended to incorporate consultation feedback and any additional pharmacy changes coming into effect between March and July 2025.

The following extracts from the full PNA are included here:

1. Executive Summary
2. Appendix A17: Consultation responses
3. Appendix A18: Changes in pharmacy provision between draft and final documents

Once approved by the Board, the 2025-28 PNA will be published on the Kirklees Council web site:

[Pharmaceutical Needs Assessment \(PNA\) | Kirklees Council](#)

If any members of the Board would like to receive a copy of the full PNA prior to publication, please email owen.richardson@kirklees.gov.uk.

1. Executive Summary

Since 1st April 2013, every Health and Wellbeing Board (HWBB) in England has had a statutory responsibility to publish and keep up to date a statement of the need for pharmaceutical services for the population in its area, referred to as a Pharmaceutical Needs Assessment (PNA). Broadly, the PNA should describe the current range of pharmaceutical services, the need for such services and potential future need. It should identify any service gaps and highlight any new services that may be required.

The PNA is used by NHS West Yorkshire Integrated Care Board (ICB) to assess applications for new pharmacies, to determine if the proposed pharmacy meets an identified need. PNAs are also used by local commissioning bodies to make decisions about which other NHS and Local Authority funded services need to be provided by local community pharmacies.

This PNA was undertaken in accordance with the requirements set out in Regulations 3-9 Schedule 1 of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.

A joint steering group was initially established to produce the 2022-25 PNA by the five West Yorkshire HWBBs (Bradford, Calderdale, Kirklees, Wakefield, and Leeds) in November 2021, and has continued in existence to produce the current PNA (2025-28). The steering group consists of representatives from each Local Authority's Public Health Intelligence team, West Yorkshire ICB Medicines Optimisation, West Yorkshire ICB, Community Pharmacy West Yorkshire, the Local Medical Committee (LMC) and Healthwatch.

Local information was gathered relating to population counts and projections, health conditions, mortality, levels of deprivation and income, planned housing developments, car availability and travel times. This was combined with insight from local surveys and the Kirklees Joint Strategic Needs Assessment (KJSA) and utilised alongside details of pharmacy location, service provision and dispensing activity, to assess level of need and provision in Kirklees.

A systematic approach was taken to identify whether any of the following gaps in pharmaceutical service provision existed:

- Geographical gaps in location of premises
- Geographical gaps in provision of services
- Gaps in the times at which, or days on which, services are provided.

In total, there are 95 pharmacies in Kirklees, with a good geographical spread across the district. All residents live within a 20-minute drive of at least one pharmacy (including pharmacies outside the Kirklees border), and surveys suggest most residents find it easy to access a pharmacy when needed. Seventy-six pharmacies offer evening opening hours, 52 are open on a Saturday, and 10 offer 72-plus-hour opening. The majority of residents live within a 20-minute drive of at least one 72-plus-hour pharmacy; only the sparsely populated very rural areas of South Kirklees have a longer travel time to a 72-plus-hour pharmacy.

The number of pharmacies providing necessary services (as defined by the Kirklees HWBB), in addition to those essential services provided at all 95 premises, include 92 signed up to provide the Pharmacy First service. Based on dispensing activity between April 2023 and March 2024, 93 Kirklees-based pharmacies provided at least one New Medicine Service intervention, and 62 Kirklees-based pharmacies provided at least one flu vaccination. All pharmacies with a consultation room, which are the majority, are potentially able to provide the New Medicine, and

Flu Vaccination services. Not all pharmacies are required to offer these necessary services; nearby pharmacies offering these services are regarded as providing adequate local coverage.

Projections suggest the population of Kirklees will increase by 1.99% (+8,803 people) between 2020 and 2028. Over the three-year period 2025/6 – 2027/28, there are 5,359 new housing developments allocated or planned (sites of 25 or more dwellings). It is not envisaged that the increase in population or new housing will place an excessive additional burden on existing pharmaceutical services or needs for future provision.

In conclusion this PNA has not identified any gaps in the provision of pharmaceutical services or any needs for future provision that could not be met by existing providers.

2. Appendix A17: Consultation responses

A17.1 Introduction

Regulations require that a draft PNA is made available for consultation for a period of at least 60 days prior to publication of the final Assessment. The draft report was publicised through the following channels:

- Kirklees Council's web site and social media account
- Healthwatch contacts
- Local media channels via a press release
- Voluntary sector contacts and electronic bulletins.

A17.2 Consultation process

A short consultation survey was developed to capture views and comments. Consultation on this draft PNA commenced on 01 April 2025 and remained open until 30 May 2025. Key stakeholders consulted during this period included:

- the local pharmaceutical committee
- the local medical committee
- pharmacy and dispensing appliance contractors included in the pharmaceutical list for the area of the health and wellbeing board
- dispensing doctors included in the dispensing doctor list for the area of the health and wellbeing board, if any
- any pharmacy contractor that holds a local pharmaceutical services contract with premises that are in the health and wellbeing board's area
- Healthwatch, and any other patient, consumer, or community group in the area which the health and wellbeing board believes has an interest in the provision of pharmaceutical services
- any NHS trust or NHS foundation trust in the health and wellbeing board's area
- NHS England, and
- any neighbouring health and wellbeing board.

The above consultees were directed to Kirklees Council's website to access the document and consultation questionnaire.

All consultees were given the opportunity to respond via an online questionnaire. The questions were developed to capture views on current pharmaceutical provision, consider future potential changes, and identify if there are any current or potential future gaps in pharmaceutical services.

This section outlines the considerations and responses to the consultation. The consultation received a total of 4 responses: two from members of the public, one from a pharmacy chain, and one from the Local Authority. Note that feedback had already been incorporated into the draft PNA from members of the public and pharmacies, via surveys carried out in November-December 2024 (see Section 5.4 and Appendices A5 and A6).

A17.3 Summary of responses

Count of Yes/No responses to questions and associated comments:

Question	Yes	No	Comments
Has the purpose of the pharmaceutical needs assessment been explained?	4	0	
Does the PNA reflect the current provision of pharmaceutical services within your area?	2	2	'No' responses were from members of public. Comments provided: Continued poor availability of drugs We don't have enough in my area and many don't have stock of items. Many don't deliver for disabled people either.
Are there any gaps in service provision i.e. when, where and which services are available that have not been identified in the PNA?			One response from member of public: Not enough local pharmacies will be supported, leading to more issues in obtaining prescriptions
Does the draft PNA reflect the needs of your area's population?	2	2	'No' responses were from members of public. Comments provided: Not enough local pharmacies will be supported, leading to more issues in obtaining prescriptions
Has the PNA provided information to inform market entry decisions i.e. decisions on applications for new pharmacies and dispensing appliance contractor premises?	2	2	'No' responses were from members of public.
Has the PNA provided information to inform how pharmaceutical services may be commissioned in the future?	2	1	'No' response was from member of public.
Has the PNA provided enough information to inform future pharmaceutical services provision and plans for pharmacies and dispensing appliance contractors?	2	1	'No' response was from member of public.
Are there any pharmaceutical services that could be provided in the community pharmacy setting in the future that have not been highlighted? If yes, what are those services?			No comments received.
Do you agree with the conclusions of the pharmaceutical needs assessment?	2	1	'No' response was from member of public.

A17.4 Response to consultation feedback

The Health and Wellbeing Board acknowledges comments received in relation to quality and availability of pharmacy services but does not consider that any further amendments to the Pharmaceutical Needs Assessment are required. The reasoning for this decision is described below.

Table 4 in Section 7 of the report summarises the provision of pharmaceutical services by Electoral Ward. None of the 23 Wards in Kirklees is identified as having a gap in provision of services, based on an analysis of geographical gaps in location of premises (Section 7.2), geographical gaps in the provision of services (Section 7.3), and gaps in the times at which, or days on which, services are provided (Section 7.4).

Results from local surveys (Section 5.4) show that most residents feel able to visit their pharmacy of choice when needed (including those people with a disability), with only a small proportion of respondents finding it difficult.

In relation to proximity and accessibility, distance-selling pharmacies can be accessed without the need for residents to travel. Across Kirklees, 11.6% of items were dispensed from distance-selling pharmacies between April 2023 and March 2024. For non-distance-selling pharmacies, the delivery of medicines is not an NHS service, therefore not a pharmaceutical service and not within scope for the PNA. Travel times to pharmacies with extended opening hours may be longer in some rural parts of Kirklees, but these areas are more sparsely populated, and residents here are more likely to have access to a vehicle.

Although one respondent did not feel that the PNA provided information to inform how pharmaceutical services may be commissioned in the future, the legislation and process is described in Sections 1 and 2 of the report. In addition, population projections (Section 3.2 and Appendix A8) and planned housing developments (Section 3.7) were utilised in consideration of current provision in relation to future demand.

A17.5 Summary conclusions

Kirklees Health and Wellbeing Board is pleased to note the majority of responses to the consultation were positive. Following the consultation period, the PNA was revised accordingly and submitted to the Health and Wellbeing Board for final approval. The published PNA will be valid for three years from 22 September 2025 to 21 September 2028, when an updated PNA will be produced.

3. Appendix A18: Changes in pharmacy provision between draft and final documents

The following changes to pharmacy provision came into effect after the draft document was released for consultation and before the final document was presented for approval to the Health and Wellbeing Board (between March and July 2025).

A18.1 Pharmacy closures

Effective from 07 April 2025, two closely located pharmacies were consolidated onto a single site, resulting in the closure of the pharmacy at 8 Market Place, Birstall, Batley, WF17 9EL. The consolidation was onto the site at 1 Bond Street, Birstall, Batley, WF17 9EX, and was not deemed to create a gap in pharmacy provision. The closed pharmacy location is excluded from Figure 28a-c (Appendix A19).

A18.2 Changes to supplementary hours

Changes to supplementary hours are shown in the table below; these hours have also been amended in Table 9 in Appendix A11.

Ward	Pharmacy	Postcode	Previous hours	New hours	Effective date
Dewsbury East	Dewsbury Health Centre Pharmacy	WF13 1HN	Mon–Fri: 08:00 -19:00, Sat: 09:00 - 14:00	Mon–Fri: 08:00 - 19:00; Sat: 09:00 - 16:00	01/05/25
Dewsbury West	Westtown Pharmacy	WF13 2QQ	Mon–Fri: 09:00 - 13:00, 14:00 - 18:00	Mon–Fri: 09:00 - 18:00	01/05/25
Newsome	Park View Pharmacy	HD1 5PS	Mon–Fri: 09:00 - 13:20, 13:40 - 18:00; Sat & Sun: 10:00 - 16:00	Mon–Fri: 09:00 - 13:20, 13:40-18:00	01/07/25
Newsome	Tesco Pharmacy	HD1 1RW	Mon–Fri: 08:00 - 20:00; Sat: 08:00 -13:00, 14:00 -20:00; Sun: 10:00 - 16:00	Mon–Sat: 09:00 - 13:00,14:00-19:00; Sun: 10:00 - 16:00	27/05/25

In summary: one pharmacy is no longer open on weekends (Park View Pharmacy, Newsome Ward); one pharmacy has reduced its opening hours by three hours per day, Monday to Friday, and by two hours on Saturday (Tesco Pharmacy, Newsome Ward); and two pharmacies have increased their opening hours (Dewsbury Health Centre Pharmacy, Dewsbury East, by two hours on Saturday, and Westtown Pharmacy, Dewsbury West, by one hour per day, Monday to Friday).

A18.3 Consideration of changes between draft and final documents

A review of service provision by Electoral Ward (Section 6) shows that although some of the above changes represent reductions in opening hours, no gaps in service provision have been created.

The above changes are reflected in the Executive Summary, the overall Kirklees pharmacy summary (Table 3, Section 5), relevant Ward tables (Section 6), the summary of provision by Ward

(Table 4, Section 7), the community pharmacy opening hours table (Table 9, Appendix 11) and the summary of pharmacy service provision (Table 10, Appendix 12).

Maps in Appendix 19 have been amended to reflect the pharmacy consolidation described above. All other maps in this document were created from the initial data extract (prior to consultation) and have not been amended.

KIRKLEES HEALTH & WELLBEING BOARD	
MEETING DATE: 07 August 2025	
TITLE OF PAPER: Kirklees Joint Strategic Assessment (KJSA) update	
1. Purpose of paper	To provide an update to the Board on the Kirklees Joint Strategic Assessment (KJSA).
2. Background	<p>The Health and Social Care Act (2012) requires the Health and Wellbeing Board, working through local authorities and Integrated Care Systems, to produce a Joint Strategic Needs Assessment (JSNA) of the health and well-being of their local community. In February 2015 the Board endorsed a rebranding of our JSNA to the KJSA and a new approach to its development - an ongoing process focussed on both needs and assets which outlines medium and longer-term challenges for the district. Subsequent papers have updated the Board on the progress of the KJSA, including the development and continuous improvement of the KJSA website.</p> <p>In 2020-22, it was necessary to de-prioritise KJSA updates to focus on providing data and analytical support for the local COVID-19 response. As a result, it was not possible to maintain the previous update schedule for KJSA sections.</p> <p>In 2022-23, a new steering group was convened to plan and oversee a relaunch of the KJSA to meet the longer-term demands on this product. New section content, written by topic experts, is now being published within a new web site structure, with the aim of updating all sections before the end of 2025.</p> <p>A presentation will be delivered in the meeting, to include details of the new site structure, section progress status, and estimated completion dates for those sections not yet published.</p>
3. Proposal	KJSA section content will continue to be published until all sections are updated. The steering group will then develop an updating schedule to ensure content is maintained in a timely manner.
4. Financial Implications	None
5. Sign off	Rachel Spencer-Henshall, Deputy Chief Executive and Executive Director for Public Health and Corporate Resources
6. Next Steps	The KJSA will continue to be updated in line with the plan outlined here and in the presentation.
7. Recommendations	

Continued support for the KJSA from the Board, including its promotion and use in informing commissioning and prioritisation decisions.

8. Contact Officer

Owen Richardson, Data & Insight Enablement Lead for Public Health, Kirklees Council
Owen.richardson@kirklees.gov.uk; 01484 221000

KIRKLEES HEALTH & WELLBEING BOARD	
MEETING DATE:	7 August 2025
TITLE OF PAPER:	Partnership Framework review
1. Purpose of paper	<ul style="list-style-type: none"> The PowerPoint presentation sets out the background to the current Partnership Framework, establishes that Council officers are currently conducting a review, and poses a series of questions about the Framework for the Board’s consideration. The presentation is a supporting document, with the aim of prompting feedback, suggestions, and debate about the current Partnership Framework and how it might be improved, ensuring the Board has a significant influence on the review.
2. Background	<ul style="list-style-type: none"> The Partnership Framework is the collective name for our shared Vision, eight Shared Outcomes, and four Partnership Strategies. The Framework has guided partnership work across the borough and has been agreed by the Council and partners. As Board members know, the Shared Outcomes and Partnership Strategies form an integral part of the Joint Health and Wellbeing Strategy. Some of the Framework is up to 10 years old, so we are now reviewing it. We are running similar sessions at a selection of strategic-level partnership boards over summer 2025 before finalising and agreeing any changes to the Framework by March 2026.
3. Proposal	<ul style="list-style-type: none"> We want the Board to help shape our review of the Partnership Framework by: <ul style="list-style-type: none"> providing feedback and suggestions during the 7 August discussion. submitting any further feedback via email by 5 September to policy@kirklees.gov.uk. seeking a 1-to-1 discussion with lead officers if any individual or organisation would like to have a more detailed discussion.
4. Financial Implications	<ul style="list-style-type: none"> No direct financial or resource implications beyond business-as-usual officer time.
5. Sign off	<ul style="list-style-type: none"> The approach to the review has been endorsed by the Executive Leadership Team.
6. Next Steps	<ul style="list-style-type: none"> Lead officers will engage with a range of partnership boards and others over the summer. Initial findings will be presented to Partnership Executive and Picture of Kirklees in autumn. Final refreshed Partnership Framework planned to be adopted in early 2026.
7. Recommendations	<p>It is recommended that the Board provides feedback on the Partnership Framework review.</p>
8. Contact Officer	<p>Tom Whitehead, Policy and Partnerships Officer, tom.whitehead@kirklees.gov.uk</p>

Kirklees Partnership Framework Review

Summer 2025

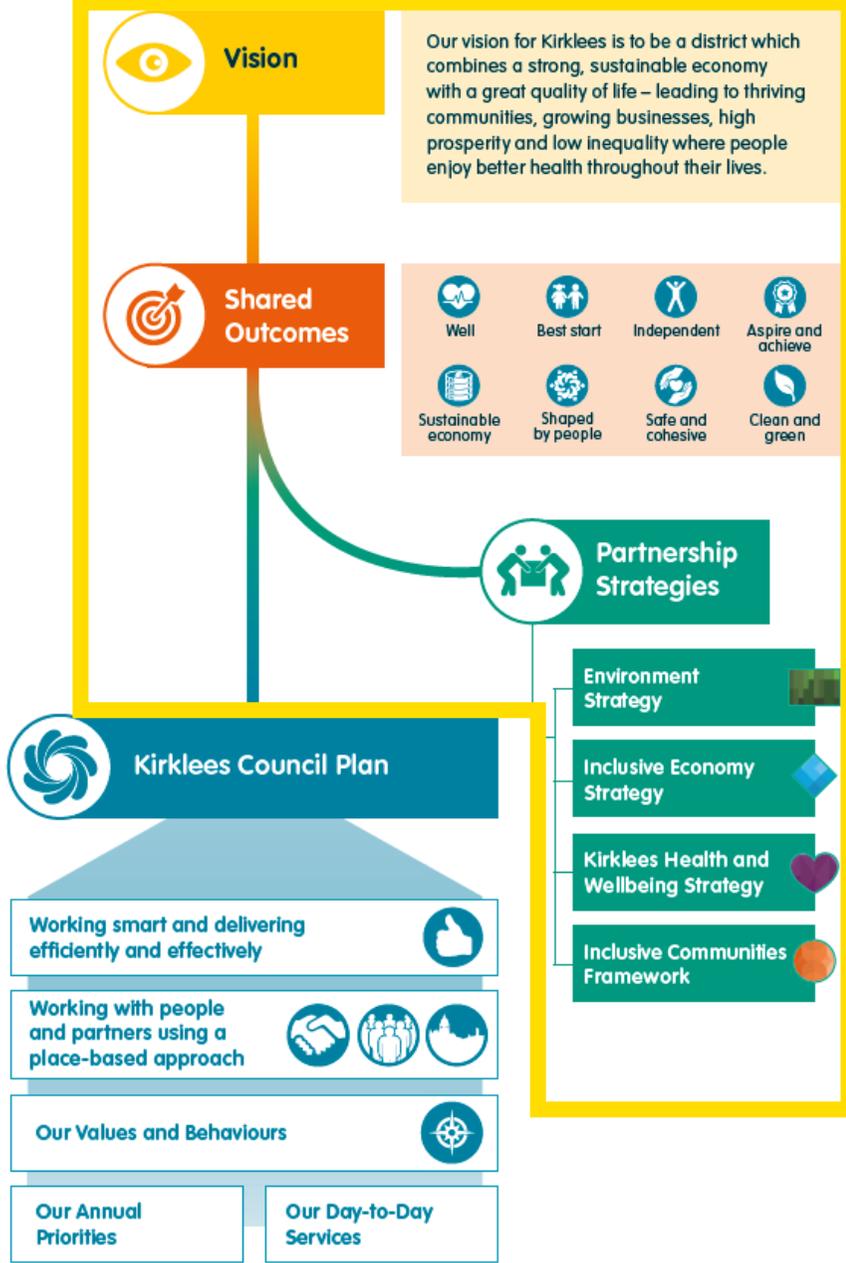


What is the Partnership Framework?

The Partnership Framework consists of:

- Vision
- Shared Outcomes
- Partnership Strategies

- Sets out a high-level framework for collaboration and communicating about how we work together.
- Primarily about collaboration between organisations (bilaterally and through partnership groups or programmes).
- Every organisation has a role and impact on the vision, outcomes, and strategies.



How is the Partnership Framework used?

- Elements of the current Partnership Framework are used in areas of our collective work. For example, the Shared Outcomes are embedded in the Health & Wellbeing Strategy.
- The Framework helps to structure some strategic partnership conversations and demonstrates to external stakeholders (including funders) that we have a shared direction.
- But want the review to consider how we can make the Framework more useful for partners and ultimately to give it more purpose and meaning for us all.

Why now?

- The forthcoming multiyear funding agreement presents an opportunity for a strategic overhaul.
- Certain key strategies require reassessment—such as Health and Wellbeing.
- A significant portion of the content is outdated, with some agreements dating back nearly a decade.
- This is a period of transition for the council and its partners, including NHS ICB and WYCA, both of which are subject to national policy changes. Even more important to work effectively together.
- A theme of the recent Local Government Association Corporate Peer Challenge was a desire from partners to work more closely and strategically with the council, and for the Council to pivot towards a ‘longer-term horizon’.
- Current Partnership Framework is underused.

Engagement plan

Current Partnership Framework

Planned Partnership Framework Review



- **Vision** sets a long-term and aspirational view for the future; agreed 10 years ago.
- **Shared Outcomes** provide descriptions of the thematic success we want to see; mostly agreed around 8 years ago.
- **Partnership Strategies** – partnership-led strategic plans, seeking to affect positive change in their thematic area. Often include work towards Shared Outcomes. Agreed at different moments.

- Until now, the Framework has been published primarily in the annual Council Plan.

Phase One – June to August 2025 Gathering views internally and from partners

Seeking reflections on the current Framework from partners; with opportunity to provide further feedback by email or 1-1 conversations by request.

Phase Two – August 2025 to March 2026 Finalising and agreeing a revised Framework

Using material gathered over summer, designing and seeking further feedback to finalise a revised Framework, with final engagement through the Picture of Kirklees. Adoption of the Framework by March 2026.

Today's discussion

- Our **starting assumption**: the Partnership Framework and its elements are not fundamentally problematic, but we should reflect on whether it should be iterated to address the current context and challenges raised (on the 'Why now?' slide)
- During today's discussion, we want to begin to understand your **view of the current Framework** and gather ideas about **how the Framework could be changed and improved**.
- Do not feel you must provide a full reaction today – you can email [**policy@kirklees.gov.uk**](mailto:policy@kirklees.gov.uk) with any feedback or ideas you have.
- If requested, we can also arrange 1-1 chats to discuss feedback on an individual basis.
- Deadline date for receiving feedback: **5 September 2025**

The Partnership Framework

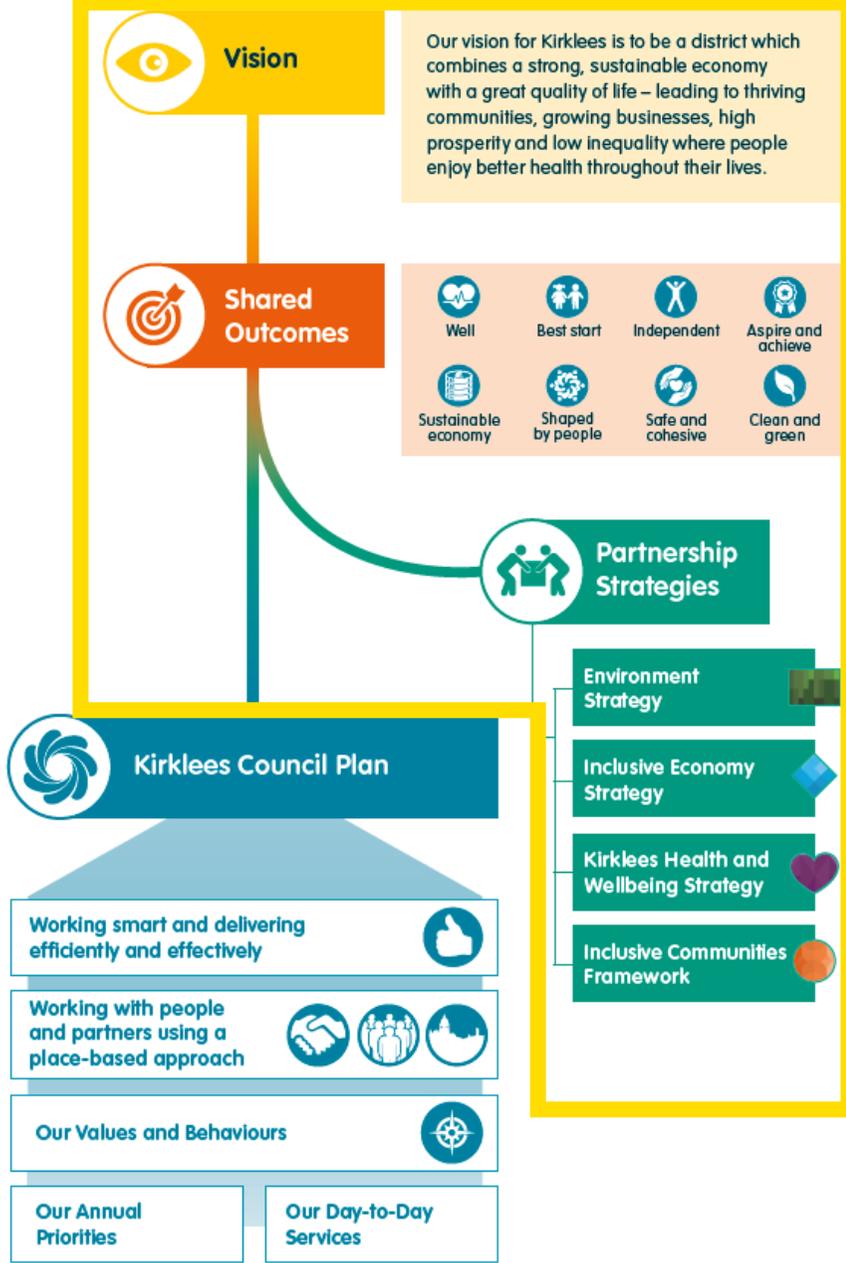


What is the Partnership Framework?

The Partnership Framework consists of:

- Vision
- Shared Outcomes
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- Sets out a high-level framework for collaboration and communicating about how we work together.
- Primarily about collaboration between organisations (bilaterally and through partnership groups or programmes).
- Every organisation has a role and impact on the vision, outcomes, and strategies.



Detail of the existing Partnership Framework

- **Vision** – a long-term and aspirational vision for the future of the borough. Describes what we want to see. Agreed by the council and partners around 10 years ago.
- **Shared Outcomes** – descriptions of the success we want to see under certain themes. Cover most aspects of life in Kirklees. Agreed around 8 years ago, except Shared by People, which was agreed around 3 years ago.
- **Partnership Strategies** – partnership-led strategic plans, seeking to affect positive change in their thematic area. Often include work towards Shared Outcomes. Agreed at different moments.

Until now, the Framework has been published primarily in the annual Council Plan. ►

From 2026, we are proposing to publish it as a short separate partnership-owned document.

General and Vision

Current Vision: “For Kirklees to be a district that combines a strong, sustainable economy with a great quality of life - leading to thriving communities, growing businesses, high prosperity and low inequality where people enjoy better health throughout their lives.”

Questions for discussion:

- **Overall**, what does the Partnership Framework mean to you?
- How could it be more helpful?
- Is the vision **relevant**?
- What would you change?
- Would you add a **timeframe**, e.g. Vision 2035 or 2040?

Shared Outcomes

Current Shared Outcomes:



Example of an Outcome in more detail:



Sustainable economy

Kirklees has sustainable economic growth and provides good employment for and with communities and businesses.

Our shared day-to-day focus

- More and better-quality jobs in Kirklees.
- Create the environment to enable major regeneration activity to support economic resilience and greater inward investment into the district.
- People have access to an appealing cultural offer and vibrant town centres.

Tracking our shared impact:

- disposable income per household (£)
- start-up businesses/businesses exporting
- productivity per hour worked (£) - Gross Value Added (GVA)
- median earnings.

Questions for discussion:

- Is eight outcomes **too many**? What does the alternative look like?
- At the moment, there is a Council-only 'Efficient and Effective' outcome. Is it worth having an **Efficient and Effective Shared Outcome**? What opportunities are there for us to work together on corporate transformation?
- How can we **strengthen the purpose** of the Outcomes? For example, agree short **action plans** or **areas of focus** in limited number of areas of mutual interest to drive activity?

Partnership Strategies

Current Key Partnership Strategies:



Questions for discussion:

- Are there **gaps in our strategic coordination**? Are there things we should be focusing on collectively that we're not?
- Where are we already **good at strategic coordination** and where do we **need to strengthen it**?
- What could the **alternative** look like to listing four Partnership Strategies here?

Thank you and next steps

- Thank you for your input today.
- We are doing further engagement with partnership boards over the summer. Where requested, we are also offering 1-1 discussions to provide further opportunities to discuss and receive feedback.
- Initial findings presented to Partnership Executive and Picture of Kirklees in Autumn. Final refreshed Partnership Framework adopted in early 2026.
- Please send any follow up feedback (or requests for 1-1 conversations) to policy@kirklees.gov.uk

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