Cabinet Members Report to Council

June 2026

Councillor – Jo Rust cabinet member for People and Communities
For the period - 16th March 2026 – 15th June

Progress on Portfolio Matters. –

Creating Communities

I attended the opening of our new library building on March 16th, which is a fantastic facility. The opening saw large numbers of visitors and the facility and what it offers will really bring our communities together.

I attended an update on the piece of work led by the police which has been named RISE. This work has been going on for some time and partners are now in the build phase where the criminal elements have significantly reduced and been held that way and now there's a stronger focus on the community cohesion as the community have been given the space to breath and thrive. There is ongoing work to identify assets which include people who can lead in their community and there has been a recognition event held. There's a 4 p plan – Pursue, protect, prevent and prepare. There are plans to take on a community engager to help progress the work in the area. It must be noted that the crime level in North Lynn only equates to 5% overall and at its highest was 8%.

We've received several Pride in Place presentations and learnt that it will be community led with a focus on strengthening social capital in neighbourhoods. And where healthy lives are supported, linking strongly with the work being undertaken on Marmot.

I was pleased to attend the 40th anniversary of Careline. One of the members of staff, Tracey, had been with the team since the outset. It's a real success story and helps to maintain communities by allowing people to stay in their own homes as they get older. It also provides friends and relatives with certainty to know their loved one is safe.

Food for thought has been running successfully from the training kitchen at the new library and I have observed some real friendships building up as people are coming together on a weekly basis to cook and share food. It's such a successful series that it's included in our economic strategy.

Partnerships with Health

I met with the new managing director of the QEH, Michelle Arrowsmith and heard from her the work which is being undertaken to turn the hospital around but how this would take time and that sustainable change was needed.

Skills

Our council has a raising attainment budget which was established as it was recognised that our area had lower than average attainment levels. Boost is a skills programme that was initially funded through the Towns Fund and was used as a test bed that NCC have since rolled out all over the county. We have a skills group that includes RAF Marham, the QEH, JCP and other partners.. We have very low levels of GCSE passes and previously it's been explained away as being because we have high levels of disadvantage. This explanation has been rightly challenged. We work in collaboration with local schools and the college and have led on a number of projects to increase attainment, such as Grow Your Own. We have identified some inequality in some of the Norwich based projects, such as schools receiving exactly the same amount of funding to send pupils to a careers fair held in Norwich, despite students from our area having much further to travel. A skills advisor would significantly improve the focus on skills and training. We want to see an increase in the number of students doing T levels, but take up is low as neither parents nor employers understand them fully. The skills team are project based and now boost is being supported by Connect to work, which provides a soft handover to young people moving up who might be at risk of unemployment. Connect to work support a wide range of cases, but it's all work focussed on getting people into employment especially those who experience illness. Connect to work are based at the Discovery Centre.

Further information about the programme can be found here - Connect to Work to support more than 4,000 people facing barriers to employment - Norfolk County Council
But in the west we have one of the lowest referral rates to Connect to Work.
I attended the school's collaboration meetings at the College of West Anglia where we heard that the ICB co-ordinator post had been awarded to CoWA. This 2-year post will work to recruit work experience to health. Meaningful work experience is now a must. The aspiration is that aged between years 7 – 9 will be provided work experience opportunities in each of the priority growth areas so by year 10 the student can understand a career pathway.
We hear dhow some schools have a real challenge with careers offers and there are plans to set up a career portal. There's a programme called Ontrack plus which is a NEET indicator and can be seen from year 7 not just years 10 and 11, meaning steps can be taken early on to try to prevent a young person not being in education, employment or training. Feeback so far is good, with potential NEET students being identified. Before the end of term there'll be a careers and parents webinair to help increase understanding of what is available to young people. The 3 biggest challenges are employer engagement, school engagement and tightening up with work experience offer. We then had an in-depth presentation from TechEd who are based in Norwich but work across schools and local authorities all over the UK. They offer Tech Youth which is for those aged between 11-18 to spark interest in technology and encourage uptake of digital and computing qualifications at age 14-16 and particularly for those from a poorer background. Our council is planning to fund a programme working with them which will culminate in a hackathon at the corn exchange where students will build tech solutions to healthcare challenges. With the building of a new QEH which will use high level tech this should place us in a strong position to supply locally based individuals to work and operate the IT and tech there. All this is done to raise

attainment in our young people and provide decent training leading to good jobs and employment.

Housing and Homelessness

Our council has been the largest recipient in Norfolk of Local Authority Housing Fund money**.** This is a demonstration of our ability to deliver and to utilise housing commissioned by our own companies. It was gratifying to learn that our housing team had been nominated for a national award because of their delivery. While they weren't' successful in winning the award, the nomination was a great recognition of the excellent work that they do to overcome homelessness and deliver affordable, decent home that make such a big difference to the lives of our residents. Regarding homelessness we perform well at prevention when compared to other districts and the number of rough sleepers on a single night is consistently at 3. Some refuse offers of assistance. Those in nightly paid accommodation used to sit at around 30 but is now down to 10. We are continuing to reduce our need for nightly paid and our intention is to get it to zero.

I attended a housing development steering group meeting where we learnt more about the properties being delivered directly through the council and our partners Lovells. This work includes a social value element which looks at jobs and the promotion of local skills and employment and healthier lives. Our homes are built to the Future Homes Standards which ensures new homes are energy efficient, low-carbon, and cheaper to run. We also have a policy on adaptable and accessible homes which states that 40% of new homes must be built to meet requirement M4(2) of Part M of the Building Regulations: Category 2 for accessible and adaptable dwellings. This will mean that old age or illness won't necessitate a house move, as the property can be adapted to meet needs. Our council also requires that a minimum of 5% of affordable housing contributions (new dwellings) on major housing developments to accord with Category M4(3) and be wheelchair adaptable.

Housing Standards
Waiting to assess the impact of the Renter's Rights Act.

Beat Your Bills
None attended

Community Transport
I continue to work with West Norfolk Community Transport as one of our local travel suppliers. It's recognised that transport is one of the key drivers to economic growth. WNCT are responsive to the needs of our community and have been actively working to overcome barriers felt from NCC. The organisation are trying to establish a route to the QEH which will meet the needs of the staff who work there and the shifts that they do. The charitable arm of the company are a significant partner when it comes to overcoming social isolation and loneliness .

Assets of Community Value and Bus Shelters

We are currently waiting for UKPN (UK Power Network) to disconnection the electricity to the remaining bus shelters with three left to do. They aim to have these completed by the end of July, once done we will schedule in the shelter removals/installations. So nice new bus shelters to encourage our residents to use public transport.
I attended LGA training on what it means to be a town councillor. This is relevant to assets of community value as potentially some of our assets could move to a town council should this be progressed. Time will tell.

Healthier Lives strategy
I attended a meeting with Active Norfolk and Alive Leisure. Our relationship with Active Norfolk enables us to meet targets to encourage healthier and active lifestyles for our residents. Encouraging our residents to become physically active is the way that we help them live longer in good health.

There have been three health and wellbeing partnership meetings since my last report, although a health and wellbeing board meeting at Norfolk County Council has been cancelled as there is currently no councillor appointed to chair the meeting at that level. We heard a presentation from the food for thought team about the success of the academy which is being delivered at Greenpark Academy for students there and then at St Michaels School in South Lynn. At the end of the series of sessions pupils take part in a graduation ceremony which their parents attend to celebrate their achievements. We learnt that there is a mental health hub which will be located at Chatterton House. We have requested that we hold a joint meeting with our Breckland Counterparts. At the Health and wellbeing partnership held in June we received a presentation about the crisis resilient fund which has replaced the household support fund. It's well worth making yourself familiar with this fund as your residents may need to be referred.
https://www.norfolk.gov.uk/article/39493/Crisis-and-Resilience-Fund

The fund will run until 2029 and provides longer term certainty in respect of funding. There is a shift in national expectations and a move from blanket support to targeted needs tested support prioritising the poorest households, offering longer term, wrap around services. We want to build on what worked well with the household support fund and increase capacity and join things up better. If you're over 16, live in Norfolk and able too show that you're in financial hardship and claiming benefits or working but on a low income with minimal disposable incomes then you could be eligible. It can be used for Food, energy, heating, oil and LPG, water, clothing such as uniforms, warm winter clothes, essential kitchen appliances, essential transport related costs and digital connectivity. The list is not exhaustive, but illustrative. There is also a heating oil crisis fund, which for some of our rural residents, could be a vital lifeline.

I attended the LGA Independent Health and Wellbeing meeting where we spoke about early prevention to avoid costly treatment later on. We are cognisant of the potential for this to cost shunt from the NHS to local authorities. Good housing with green, open spaces and community centres were given significant importance because of the role they play in keeping

residents healthy and happy. Mental Health was a subject for discussion noting that minority groups suffer worse mental health because they have more risk and access to fewer services. Work is underway to sustain MH literacy at work and to boost families and communities knowledge about MH through a programme called Future Minds Neighbourhood. The intention is to embed MH in all policies approach and introduce a MH commissioner to go alongside the children's commissioner and DA commissioner. The new MH Act, which will be implemented over the next 10 years will give more choice and autonomy and treat the person as an individual. The act exists to treat people against their will, but seeks to address the inequalities within it. For example, you can write an advanced choice document which means you can choose who your nominated person is rather than it automatically being your spouse or parent. Section 3 can see people with autism or learning difficulties without a co-occurring MH condition, being detained for longer periods of time. This will no longer happen. There will be greater access to 1st tier MH tribunals If you're in the criminal justice system you'll have faster transfers to care in hospital when this is needed. This will be welcome news to residents who experience poor MH.

I attended an event in London called delivering devolution and health equity which Sir Michael Marmot was present. It was a very interesting round table event where we discussed the ways that local authorities were working to increase health equity. I was proud to speak about the work that our council alongside partner agencies, were doing. We heard how health inequality has a £5 billion cost to the economy so it is vital that we work to overcome this. We heard about the changes which will happen due to the devolution act and how it will put a statutory duty for Strategic authorities to consider health improvement and health inequalities. We considered whether devolution could help reduce health inequalities in England. It was agreed that there needed to be an embedding health in all policies approach. It feels like there are a lot of "embedding" in all policy approaches being expected. We also discussed a special development strategy to improve health through planning policy. I've previously written how NHS and healthcare play a relatively small part in keeping us healthy.so there's a need to change the narrative and place greater focus on preventative work and the wider determinants of health. The importance of good data was discussed as this can help prove that the measures we're implementing are making a difference. We need to take action that will stop the need to pull people out of the river. Sadly, our healthy life expectancy is actually falling, and we have greater levels of poverty that both Poland and Slovenia. And despite the two-child cap being lifted we still have 4.5 million children growing up in poverty. The following day I attended a Local Government East online round table titled health innovation in deprived areas which covered a number of various matters such as Neibourhood health service which will see the reorganisation of services around defined local population (30 to 50K) with key features. We must adopt a population health management approach which calls for local knowledge about your population and knowledge of where interventions are most needed. Population health management was once again referred to as were neighbourhood health centres with a colocation of services. It's expected that the new mental health hub I previously mentioned will include a colocation of

services. There was also a discussion around mobile health stations which more easily enable people to get basic health checks like blood pressure, heart rate and heart age etc, carried out. They also ask questions about levels pf physical activity and alcohol intake. They can be based in the community, in workplaces, at centres which support homeless people These are very useful for people who struggle to see a GP, such as homeless people. Currently these machines don't send the data on to a registered GP. These machines were also referred to at the June health and wellbeing partnership meeting and we have one in Tesco Hardwick with another being commissioned. We heard how many of the complexities experienced by the public are down to our own systems and how they've been set up or how they have evolved. There was acknowledgement that we need to use data and be target driven. As you can see, health and driving forward change has been a major focus since March. I saw Sir Michael Marmot the following day at the shared Place and Health and Wellbeing Partnership meeting where becoming a Marmot place was the focus of the afternoon.

Youth

I attended one of the regular YAB meetings and learnt that going forward the new library would be used as a venue. Young people are concerned about environmental issues and Mental Health. They young people had enjoyed aa residential to Brighton. They gave an update on their disability campaign, which is gaining a lot of attention, seeing them attend an all party parliamentary group meeting on play.

Safeguarding

We need to make a start on Safeguarding training as this is a statutory responsibility. We also have a pilot around section 11 programme which is a statutory audit around the children's act. Previously it was a written report but this year it'll be a shorter written return followed by a face to face with staff. Last year we were seen as an exemplar, but due to a lack of training, that might not be the case this year. We would all benefit from EDI training.
Our white ribbon has approved our action plan on a conditional basis pending further discussions. Overall, they have highly commended our approach. This is very gratifying to hear as I know how hard officers have worked on it. We plan to introduce a whole action plan for safeguarding and white ribbon.

Customer relations and CIC

The CIC team continue to deliver excellent services for our residents and transform the way that they work to become more focused on customer service. The team are responsive and make changes necessary to deliver services more efficiently for our residents. The team won Team of the Year, which was well deserved. The team have recently had a change of lead, with Laura Walters taking on the role previously held by Jo Hillard, who has gone to IT for a 2-year secondment. 67% of calls are now dealt with by Nova, the AI addition. The average time to answer web chat is just 26 seconds and there is a customer satisfaction rate of 93% which is higher than target. 17041 calls were dealt with over the last 2 months. A scanner system has now been implemented so that customers don't have to leave their documents if they don't want to.

Forthcoming Activities and Developments.

Clean Air Day
KLAC
Behaviour Change training
Cabinet Briefing
Armed forces flag raising
Cabinet sifting
Launch of BIPC at Library
Food for Thought
LGA Neighbourhood Health and Mental Health

Meetings Attended and Meetings Scheduled

Portfolio briefings – Health and Wellbeing
Portfolio Briefings – CIC
Portfolio Briefing - Housing
Full Council
Health and wellbeing partnership meetings (monthly)
E&C
Alive, Active Norfolk and KLWNBC catch up
Freebridge briefing
Housing Developments steering group
Joint Group Meetings
Cabinet/special cabinet/cabinet sifting/Cabinet Briefings
Food for Thought at the new library
Homelessness and housing delivery briefing
LGA Independent Health and Wellbeing meeting
KLAC
Adaptive Sport Hub launch
West Norfolk Community Transport meeting
Joint Place and Health and Wellbeing meeting
Leisure facilities meeting
LGA training - various
Planning Training
West Norfolk Community Transport
Raising Skills and Aspirations
CIL Briefing
Values and Behaviours briefing
Active Norfolk
QEH management meeting
PMO briefing.
Transformation Board
Homes and Health Briefing
Budget Scrutiny Training
Scrutiny Training
LGR briefing
YAB meeting
Housing delivery strategy meeting
Carer's Voice
QEH briefing

Workshop performance of Call me John Schools Collaboration meeting ELT/Cabinet away day Guildhall briefings Carers Voice KES 40 years of careline Licensing AGM