

Health and Wellbeing Strategy Delivery Plan 2015-18

About this document

The Health and Wellbeing Strategy is the overarching strategy working to improve health outcomes for local people. The breadth of the Strategy is supported through an outcomes framework which will enable the Health and Wellbeing Board to monitor progress and success in the short, medium and long term.

The Delivery Plan focuses on the key milestones and actions that the Board wish to see implemented to support delivery of the priorities set out in the Strategy. The Delivery Plan is set out according to the responsibilities and reporting for each of the sub-groups. These are:

- Children and Maternity Sub-group
- Integrated Care Group
- Public Health Programmes Board
- Learning Disability Sub-group
- Mental Health Sub-group

Outcomes are shown for each of the life-course groupings with associated actions for 2015-16 and 2016-18. Not all the cells will be populated as they will not be relevant to the particular sub-group in question e.g. Life-stage: 'Older People' will not be populated in the Children and Maternity Subgroup. Some of the sub-groups and boards work across the whole life course, e.g. Mental Health, Learning Disability and Public Health.

Many milestones are already included in the strategies and action plans which support the joint Health and Wellbeing Strategy's delivery, and therefore the Plan has limited the number of key actions to focus on priorities and ensure that measurable targets are included. This document does not contain all the outcomes but those that are high level and require a partnership approach. The Plan has no 'new' financial resources to support its implementation but provides a focus for existing resources to be targeted at those key priorities that will have a significant impact on the health and wellbeing of the borough. Care City has also arisen as an innovation centre for Healthy Ageing that the borough has jointly funded and is optimistic that the delivery of the vision will support the local area to collaborate across sectors to secure improved health outcomes for the community by tackling cross system issues.

The Plan was written at a time of major evolution of our partner organisations and responsibilities in health and social care and therefore the Plan is now being revised as the partners have started to develop commissioning intention documents and strategies of their own. The updated Plan sets out key actions that the Board hopes these organisations will prioritise in 2015-18.

The delivery of the Plan relies on partner organisations aligning and collaborating, both in terms of financial and human resource, to maximise the health gain. Chairs of the sub-groups and related steering groups are responsible for overseeing delivery and escalating any performance issues to an appropriate member of the senior management team. The delivery plan will be reviewed on an annual basis by the respective subgroups.

Children and Maternity Subgroup

Priority	CARE AND SUPPORT							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome	Maintain the proportion of children seen by a health visitor within 14 days of birth at or above 95% year-on-year	Reduce unintentional injuries attendance by 0-14 year olds at A&E by 2018 – (there is no current plan for this – actions to be confirmed by September 2015)	Achieve a year-on-year increase in the percentage of first time mothers enrolled on the Family Nurse Partnership (FNP) Programme before 16 weeks, and 100% of mothers enrolled no later than 28 weeks - with the achievement of at least 75% enrolment per annum by 2018					

Children and Maternity Subgroup

Priority

CARE AND SUPPORT

Milestone Action for 2015-16

The Healthy Child Programme for 0-5 years will transfer from NHS England to the Council from October 2015

Service implementation planning and joint working across Barking and Dagenham Council and NHS Barking and Dagenham CCG will take place to support increased uptake of local health visitor services to 95% by December 2016

Develop a project to improve support to parents in primary care through integration of health visiting and children's centres by October 2016

At least 60% of first time mothers enrolled on the Family Nurse Partnership (FNP) Programme before 16 weeks, and 100% no later than 28 weeks

To support this outcome a FNP engagement plan will be developed by October 2015 and referral pathways will be refreshed by April 2016

Baby intervention pathways will be refreshed by April 2016 to ensure that young parents who do not meet the criteria for FNP will receive appropriate early intervention and support

Children and Maternity Subgroup

Priority	CARE AND SUPPORT							
Action for 2016-18	<p>Increase the proportion of children seen by a health visitor within 14 days of birth to 95% by 2018</p> <p>The development and delivery of an integrated model for the early life stages by March 2018 will be prioritised. This will deliver a universal preventative service, providing families with a programme of screening, immunisation, health and development reviews, supplemented by advice around health, wellbeing and parenting</p>		<p>At least 75% of eligible mothers to be enrolled in the FNP in 2018</p> <p>FNP to be incorporated into the integrated model for early years by March 2018</p> <p>Baby intervention services to be incorporated into the integrated model for early years by March 2018. Expected to increase caseload capacity by 95% by March 2018</p>					
Lead organisation	NHS England	CCG	NELFT					
Named lead	Kenny Gibson – Head of Early Years, NHS England	Sharon Morrow – Chief Operating Officer	<p>Gillian Mills – Borough Director , NELFT</p> <p>Toby Kinder – Group Manager, Early Intervention</p>					
Strategy / Steering Group	Health Protection Committee – Matthew Cole (Chair)		Family Nurse Partnership Board – Meena Kishinani (Chair)					

Children and Maternity Subgroup

Priority	CARE AND SUPPORT							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome	Improve the development of children in early years and introduce integrated reviews by 2018	Increase the number of referrals to specialist services where child sexual exploitation (CSE) risks have been identified – <i>to be confirmed following development of the local CSE problem profile by September 2015</i>	Ensure that children and young people are consulted with and engaged in service planning and commissioning across Children's Services on an annual basis	Increase the percentage of pregnant women treated for HIV in acute settings to 80% by 2018				Increase the percentage of children with social care assessments undertaken within 45 days to 80% by 2018.
Milestone Action for 2015-16	To identify speech, language and communication needs (SLCN) in children before they reach the age of 2 years using robust research methods by October 2016	Development of a local CSE problem profile by September 2015	Development of a joint LBBD/CCG plan for engaging young people in commissioning plans by April 2016	HIV awareness and testing training will be implemented for all midwives at Barking Hospital by April 2016				

Children and Maternity Subgroup

Priority	CARE AND SUPPORT								
Action for 2016-18	<p>To increase the percentage of children identified with SLCN achieving expected levels of communication for their age – to be confirmed by September 2015</p> <p>To increase the percentage of children who have attended local children's centres' play and communication services who achieve a good level of development in the Early Years Foundation Stage Profile – target to be confirmed by September 2015</p>	<p>Clear safeguarding pathways and training in place across all services and providers – monitor training uptake and completion levels annually. Problem profile is established By March 2016 and updated regularly</p>	<p>Evaluate the impact of the engagement activity by March 2018</p>	<p>Over 80% of pregnant women to be tested for HIV and referred into appropriate post-test services for treatment and counselling for those with a positive diagnosis</p>					<p>Increase the percentage of children with social care assessments undertaken within 45 days (80%)</p> <p>To achieve this outcome and ensure early identification of SEND children and young people, progress and improvements in health outcomes for children with special educational needs and disabilities will be monitored via the CMG on a quarterly basis</p> <p>Closer links will be established with adult social care and monitored to ensure that young people with educational and care needs have effective Transition Care Assessments</p>
Lead organisation	LBBB	LBBB	CCG/ LBBB	NHS England					LBBB/CCG

Children and Maternity Subgroup

Priority	CARE AND SUPPORT								
Named lead	Meena Kishinani - Divisional Director Strategic Commissioning and Safeguarding	Matthew Cole – Director of Public Health	Dr J John – CCG Patient Involvement Lead and LBBB lead	Joanne Murfitt - Head of Public Health, Health in the Justice System and Military Health					Joint Children's Commissioner
Strategy / Steering Group		Child Exploitation Committee - DCI Tony Kirk		Integrated Reproductive and Sexual Health Board – Erik Stein (Chair)					SEN Strategy Group – Jane Hargreaves (Chair)

Children and Maternity Subgroup

Priority	IMPROVEMENT AND INTEGRATION OF SERVICES							
Life stage	Pre-Birth & Early Years	Primary School	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome	To co-locate health visitors within GP practices and Children's Centres by 2018	More children receiving regular dental checks and improved oral health for under 5s by 2018	Decrease the under-18 year conception rate (per 1000) and percentage change against 1998 baseline by 50% by 2018	Increased percentage of mothers booked with maternity services by 13 th week of pregnancy (in light of new blood tests) by 2018				Improve health outcomes for looked after children, care leavers and youth offenders by 2018.

Children and Maternity Subgroup

Priority	IMPROVEMENT AND INTEGRATION OF SERVICES								
Milestone Action for 2015-16	<p>The Healthy Child Programme for 0-5 years will transfer from NHS England to the Council from October 2015</p> <p>Service implementation planning and joint working across the Council and the NHS will take place to support increased uptake of local health visitor services to 95% by March 2016</p>	<p>Oral health strategy to be developed and implemented by April 2016, supported by local oral health promotion campaigns</p>	<p>Conduct review of sexual health and contraceptive services currently in place for young people by July 2016, including mapping of access to emergency hormonal contraception (EHC) via primary care services and training for teachers and frontline staff</p> <p>Enhance condom distribution scheme (C-Card) delivery via pharmacies by October 2015</p>	<p>Move 1st booking to 11 weeks – to be taken forward by CCG in maternity provider commissioning intentions</p> <p>Primary care and children's centres' education programme to support awareness raising undertaken jointly by CCG and Children's Services</p> <p>Relevant LBBB commissioners to work with providers to deliver preparation for parenthood classes – via children's centre staff/health visitors/midwives</p>					

Children and Maternity Subgroup

IMPROVEMENT AND INTEGRATION OF SERVICES

Priority	IMPROVEMENT AND INTEGRATION OF SERVICES								
Action for 2016-18	100% of health visitors to be co-located in GP practices and Children's Centres by April 2018	Reduction to 1.2 decayed, missing, filled (DMF) teeth in children aged 5 years by April 2018	Reduce rate of teenage conception by 50% over next by end of 2018	80% of mothers booked in by 9 weeks year-on-year – Barking and Dagenham CCG to include in its commissioning intentions and to enter into negotiations to achieve this target with maternity providers					At least 95% of all vulnerable groups to have an annual health check encompassing physical, mental health, emotional health and health risk behaviours by 2018
Lead organisation	LBBB	LBBB	LBBB	CCG / LBBB				LBBB	
Named lead	Toby Kinder - Group Manager Early Intervention	Matthew Cole – Director of Public Health	Erik Stein Group Manager – Integrated Youth Services	Sharon Morrow – Chief Operating Officer				Meena Kishinani - Divisional Director Strategic Commissioning and Safeguarding	
Strategy / Steering Group	Children's Public Health Board – Helen Jenner (Chair)	Oral Health Strategy Group – Matthew Cole (Chair)	Integrated Reproductive and Sexual Health Board – Erik Stein (Chair)					Adult Safeguarding Board – Sarah Baker (Chair)	

Children and Maternity Subgroup

Priority	PREVENTION							
Life stage	Pre-Birth & Early Years	Primary School	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome	<p>Increase breastfeeding initiation prevalence to 75% by 2018</p> <p>Improve breastfeeding prevalence at 6-8 weeks to 60% by 2018</p>		<p><i>National level placeholder</i></p> <p>Local Authority to link with Public Health England to set a local target for smoking rates at 15 years (<i>review and move to prevalence</i>)</p>	<p>Increase the percentage of teenage mothers supported by the Family Nurse Partnership to >85% by 2018</p>				<p>Improve access to CAMHs for vulnerable children by 2018</p>
Milestone Action for 2015-16	<p>Work towards stage 1 of Baby Friendly Initiative Implementation by April 2016</p>		<p>The multi-agency smoking strategy will be refreshed and action plan developed by June 2016 to reduce smoking rates in 15 year-olds</p>	<p>>80% of expected visits made to teenage mothers by health visitors</p>				<p>Develop and implement joint children and adolescent mental health transformation plan by October 2016</p>

Children and Maternity Subgroup

Priority	PREVENTION							
Action for 2016-18	Develop a multi-borough breastfeeding strategy owned by the Children and Maternity Subgroup by April 2018 Increase the percentage of teenage mothers supported by Baby Intervention to breastfeed and stop smoking by 2018 – target to be confirmed by September 2015		Implement the action plan to reduce teenage smoking rates in line with agreed local smoking target – to be confirmed by September 2015	>85% of expected visits made to teenage mothers by March 2018				Implementation of the children and adolescent mental health transformation plan by March 2018
Lead organisation	BHRUT		LBBB	NELFT				LBBB/CCG
Named lead	Wendy Matthews - Director of Midwifery BHRUT		Consultant in Public Health	Gillian Mills – NELFT Toby Kinder – Group Manager, Early Intervention				Meena Kishinani - Divisional Director, Strategic Commissioning and Safeguarding
Strategy / Steering Group			Children's Public Health Board – Helen Jenner (Chair)	Family Nurse Partnership Board – Meena Kishinani (Chair)				

Children and Maternity Subgroup

Priority	PREVENTION							
Life stage	Pre-Birth & Early Years	Primary School	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome	Introduce the new 4 routine blood tests for metabolic conditions by 2018	Ensure that 100% of children have complete immunisation records by 2018		Decrease the number of pregnant women who are smoking in pregnancy through the implementation of BabyClear by 2018	Reduce the prevalence of sexually transmitted infections (STIs) by 2018 – target to be confirmed by September 2015			100% of young offenders to receive annual health check year-on-year
Milestone Action for 2015-16	Introduction of tests at 9 weeks booking by April 2016	Reach London levels for immunisation and then England levels by 2016. Target is 95%		Identify funding for Phase 2 of BabyClear to improve assessments (quality and output) and support midwives to deliver improved outcomes by March 2016	Ensure equitable access to contraception and STI testing in primary care and GUM clinics by October 2016			100% of young offenders to receive annual health check year-on-year Specific training support about health risk assessments to be put in place for Youth Offending Service (YOS) professionals by October 2016

Children and Maternity Subgroup

Priority	PREVENTION							
Action for 2016-18	Meet Government 95% target for introduction of blood tests by April 2018	Ensure that 100% of children have complete immunisation records by October 2018 Primary care improvement plan to be developed with Clinical Lead		Reduce Smoking Status at Time of Delivery (SATOD) rate to 15% by October 2018	Introduce training programme for schools to support effective PHSE by September 2016 Increase the numbers testing for STIs and reduce prevalence England and then London levels – target to be confirmed by September 2015			
Lead organisation	BHRUT NHS England	LBBB		BHRUT	LBBB			LBBB
Named lead	Wendy Matthews - Director of Midwifery Joanne Murfitt - Head of Public Health, Health in the Justice System and Military Health	Jo Murfitt - Head of Public Health, Health in the Justice System and Military Health		Wendy Matthews - Director of Midwifery	Erik Stein - Group Manager, Integrated Youth Services			Erik Stein - Group Manager, Integrated Youth Services

Children and Maternity Subgroup

Priority

PREVENTION

Strategy /
Steering
Group

Health Protection
Committee –
Matthew Cole
(Chair)

Tobacco
Alliance –
Matthew Cole
(Chair)

Integrated
Reproductive
and Sexual
Health Board –
Erik Stein
(Chair)

Youth Offending Service Chief
Officers Group – Anne Bristow
(Chair)

Integrated Care Group

Priority	CARE AND SUPPORT							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome				Increase the uptake of seasonal flu vaccination amongst pregnant women by 60% by 2018.	Repeat multi-agency risk assessment conference MARAC caseload management - T(target to be confirmed by September 2015	Increase percentage of adults using direct payments to 75% by 2018	Increase early diagnosis and identification of at-risk older people in primary care and reduce unnecessary admission to hospital –Target to be confirmed September 2015	Increase the number of vulnerable adults identified by the annual Warm Homes, Healthy People programme and referred to the appropriate support services and advice during the winter period by 2018
Milestone Action for 2015-16				GP practices to ensure that pregnant registrants are aware of the need to receive seasonal flu vaccination year-on-year. Uptake to be monitored on an annual basis via Public Health	Ensure 20% of frontline staff have attended multi-agency domestic violence and violence against women and girls training by April 2016		Undertake deep dive to understand what is driving emergency admissions in Barking and Dagenham by October 2016	A further 2,100 licence applications (total would be 10,500) to be received and 4,000 premises to be brought be compliant in 2015/16

Integrated Care Group

Priority	CARE AND SUPPORT							
Action for 2016-18				Increase flu vaccination coverage to 60% by March 2018	Ensure caseloads are at optimum levels and do not exceed national guidelines and have a minimum level of repeat referrals year-on-year	Increase percentage of adults using direct payments to 75% by October 2018	Secure funding for continuation of Frailty Academy model by April 2018 Implement actions related to deep dive – with a particular focus on 65+ age group	Recognising the problems of this particular sector of housing, the Borough introduced a mandatory licensing scheme in September 2014 requiring all landlords operating in the borough to be licensed by the Council to ensure they are fit and proper to run rental accommodation and supply decent accommodation. The scheme will run for 5 years
Lead organisation				NHS England	LBBD , CCG NHS England	LBBD	Integrated Care Sub Group	CVS/LBBD Council
Named lead				Joanne Murfitt - Head of Public Health, Health in the Justice System and Military Health	Karen Proudfoot – Group Manager Community Safety & Offender Management	Mark Tyson - Group Manager, Adult Commissioning	Sharon Morrow - Chief Operating Officer	Tom Williams/Neil Pearce – Housing Strategy and Partnership Officer
Strategy / Steering Group					Early Help Committee – Damien Cole (Chair)			

Integrated Care Group

Priority	PREVENTION							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome					Increase the number of smoking quitters under 30 years of age by 2018 (<i>to be confirmed - review target and move to prevalence</i>)	Increase the percentage of adults cycling or walking to work by 5% year-on-year	Increase the percentage of over 65 year olds protected through seasonal flu immunisation by to 75% by 2018	Reduce excess mortality rate of older and at-risk adults people in extreme temperatures by 2018 – target to be confirmed by September 2015
Milestone Action for 2015-16					Action plan for targeted promotional work with high-risk smoking populations and routine and manual (R&M) groups to be developed by April 2016	Active transport survey conducted and cycling - strategy to be developed across the partnership by June 2016 Develop and implement promotional campaign by October 2016	Develop local pathway to improve uptake through partnership by June 2016	Ensure that all local older people and at-risk adults receive correct, clear, consistent, useful and actionable advice and information from the local organisations they come into contact with year-on-year
Action for 2016-18					Reduce the numbers of R&M workers who smoke by 5% by March 2018	Determine how many LBBD workers cycle and walk and increase by 5% year-on-year	75% of over 65 year olds protected by March 2018	Evaluate the effectiveness of the winter warmth payments scheme locally by June 2018
Lead organisation					LBBD	LBBD	NHS England	NHS England

Integrated Care Group

Priority	PREVENTION							
Named lead					Andy Knight - Group Manager Community, Sport and Arts	Gloria Mills – Active Transport Lead	Kenny Gibson – Head of Early Years and Immunisation	
Strategy / Steering Group					Tobacco Alliance – Matthew Cole (Chair)		Health Protection Committee – Matthew Cole (Chair)	Affordable Warmth Steering Group – Neil Pearce (Chair)

Public Health Programmes Board

Priority	CARE AND SUPPORT							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome			Increase the proportion of young people testing for Chlamydia to London level by 2018	Reduce rate of teenage conceptions by 50% from '98 baseline for > 16 year olds by December 2018				Reduce the number of people claiming health-related benefits by 25% by 2018
Milestone Action for 2015-16			Increase Chlamydia screening coverage to 35% by October 2016	Review teenage pregnancy strategy and develop an action plan by April 2016				Implement mental health and back to work initiative. Reassessments of 100% on health related benefits by October 2016
Action for 2016-18			Increase diagnosis rate to London rate by March 2018	Decrease rate from 6.9% to 5.5% over 5 years				Reduce the number of people claiming health-related benefits by 25% by 2018
Lead organisation			LBBD	LBBD				LBBD
Named lead			Head of Public Health Commissioning	Head of Public Health Commissioning				Terry Regan - Group Manager Employment

Public Health Programmes Board

Priority

CARE AND SUPPORT

Strategy /
Steering
Group

Integrated
Reproductive and
Sexual Health
Board –Erik Stein
(Chair)

Integrated
Reproductive
and Sexual
Health Board –
Erik Stein
(Chair)

Public Health Programmes Board

Priority	CARE AND SUPPORT							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome		Maintain the percentage of children measured under the National Child Measurement Programme (NCMP) at Reception and Year 6 at 95% year-on-year	Increase uptake of human papilloma virus (HPV) vaccination to 95% by 2018		Reduction in prevalence of adult obesity from baseline by 2018	Increase the number of adults participating in regular physical activity year-on-year	Increase number of adults participating in regular physical activity year-on-year	Increase the number of adults participating in regular physical activity by 2018

Public Health Programmes Board

Priority

CARE AND SUPPORT

Milestone Action for 2015-16

Increase the percentage of children measured under the NCMP at Reception and Year 6 year-on-year to 95%

To achieve this Public Health and Children's Services will jointly review the local delivery of the NCMP and referral pathways to weight management services for obese and overweight children by April 2016. The review will support the commissioning of effective healthy lifestyle programmes promoting healthier eating and physical activities in schools and the community, which will be targeted where appropriate

Improve quality and choice of healthy eating options in schools through curriculum and catering responsibilities

Commissioning of new HPV vaccines with training and governance support for staff by April 2016

Develop and implement adult obesity strategy by April 2016

Develop an outcomes-based service specification to monitor the effectiveness and impact of public-health funded adult weight management programmes by October 2015

Increase engagement in commissioned adult weight management (Momenta) and exercise on referral programmes.

Reduce obesity levels to 20% and overweight and obesity to 55% by October 2016

Develop adult obesity strategy

Increase the number of adults taking part in regular physical activity interventions to 50% by October 2016

100% of older people have access to the Leisure Pass Scheme by October 2016

80% people with disabilities and those on low incomes are participating in regular physical activities by October 2016

Public Health Programmes Board

Priority

CARE AND SUPPORT

Action for 2016-18

Maintain the percentage of children measured at Reception and Year 6 at 95% year-on-year

Decrease the prevalence of obesity and over weight in Reception and Year 6 - by 23% in Reception; and 42% in Year 6 by 2018

This will be supported by the commissioning and delivery of the recommended components for the effective delivery of the 5–19 Healthy Child Programme – including prevention and early intervention; safeguarding; health development reviews; screening and immunisation programmes and support for parents in 2016-18.

Other child-centred initiatives such as the GET ACTIVE physical activity programme will be commissioned to support increased engagement of children in physical activity interventions in line with identified need by March 2018.

Increase uptake to 95% by October 2018

Reduce excess weight among adults in LBBD to London levels (57.3%) by March 2018

Target to be confirmed by September 2015

Target to be confirmed by September 2015

Target to be confirmed by September 2015

Lead organisation

LBBD

NHS England

LBBD

LBBD

LBBD

LBBD

Public Health Programmes Board

Priority	CARE AND SUPPORT							
Named lead		<p>Matthew Cole – Director Public Health</p> <p>Maureen Lowes – Catering Services Manager Children and Young People</p>	<p>Joanne Murfitt - Head of Public Health, Health in the Justice System and Military Health</p>		<p>Consultant in Public Health</p> <p>Andy Knight – Group Manager Community Sport and Arts</p>	<p>Consultant in Public Health</p> <p>Andy Knight – Group Manager Community Sport and Arts</p>	<p>Andy Knight - Group Manager Community, Sport and Arts</p>	<p>Andy Knight - Group Manager Community, Sport and Arts</p>
Strategy / Steering Group		<p>Children’s Public Health Board – Helen Jenner (Chair)</p>	<p>Children’s Public Health Board – Helen Jenner (Chair)</p>					

Public Health Programmes Board

IMPROVEMENT AND INTEGRATION OF SERVICES

Priority	IMPROVEMENT AND INTEGRATION OF SERVICES							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome	Increase breastfeeding prevalence at 6-8 week check to 65% by 2018	Increase percentage of 5-11 year olds participating in 2 hours or more of physical education by 2018		Reduce number of domestic violence cases among pregnant women – target to be confirmed by September 2016	Reduce rate of hospital admissions per 100,000 to annual rate in Year 1 and Peer group in Year 2 by 2018	Increase uptake of NHS Health Checks to 75% by 2018	Enable those at end of life to die where they want	Increase the percentage of successful completion of drug treatment (opiate and non-opiate users) by 2018
Milestone Action for 2015-16	Introduce individually tailored breastfeeding plans through peer support and buddies by April 2016	Increase the number of referrals to GET ACTIVE and outcomes measured follow development of outcomes-based service specification by October 2015 Continued support for schools working through Healthy Schools London Award Programme in 2015/16		Develop a campaign for reducing domestic violence among pregnant women implemented by March 2016	Hospital audit to be implemented by December 2016	Implementation of point of care testing by GPs and pharmacies by March 2016 Increase uptake to 50% of 40 – 74 year olds by October 2016	Joint Executive Management Committee (JEMC) to consider and agree commissioning strategy for end of life care (EOLC) by October 2016	
Action for 2016-18	Increase breastfeeding prevalence at 6-8 week check to 65% by October 2018	Target to be confirmed by September 2015		Reduction in the number of cases of domestic violence – target to be confirmed by September 2015		Increase uptake to 75% of 40 – 74 year olds by October 2018. Ensure 100% of carers in cohort receive check by March 2018	Increase the number of deaths outside hospital – JEMC to agree aspiration by April 2016	To be confirmed once national targets for Health Premium published by September 2015

Public Health Programmes Board

IMPROVEMENT AND INTEGRATION OF SERVICES

Priority	IMPROVEMENT AND INTEGRATION OF SERVICES							
Lead organisation	NHS England	LBBB		LBBB	LBBB	LBBB	CCG / LBBB	LBBB
Named lead	Joanne Murfitt Head of Public Health, Health in the Justice System and Military Health	Nigel Sagar - Senior Adviser – School Improvement		Karen Proudfoot – Group Manager Community Safety & Offender Management	Karen Proudfoot – Group Manager Community Safety & Offender Management	Consultant in Public Health	Sharon Morrow – Chief Operating Officer	Sonia Drozd - Drugs Strategy Manager
Strategy / Steering Group		Children’s Public Health Board – Helen Jenner (Chair)		Domestic and Sexual Violence Strategic Group – Matthew Cole (Chair)				Substance Misuse Strategy Board

Public Health Programmes Board

Priority	PREVENTION							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome	Increase the number of adults and children participating in cooking skills courses year-on-year	Reduction in numbers of school children taking up smoking by 2018	Reduction in numbers of school children taking up smoking by 2018	Reduction in the number of pregnant women smoking at time of delivery (SATOD) by 2018	Percentage reduction in smoking prevalence over the three year period from 2009/10 baseline by 2018	Percentage reduction in prevalence of adult obesity from baseline by 2018	Increase percentage of bereaved people signposted to appropriate bereavement support services - to be confirmed by September 2015	Increase in the number of adults participating in regular physical activity by 2018 – to be confirmed by September 2015
Milestone Action for 2015-16	Programme of cooking skills classes developed and implemented by April 2016	Social marketing campaign developed and implemented by April 2016	Social marketing campaign developed and implemented by April 2016	Implementation of the BabyClear programme in 2015	Social marketing campaign to be developed and implemented	Establish common/core nutritional standards for all commissioned services from 2015	Establishment of bereavement support services – commissioning approach to be confirmed by JEMC by March 2016	Widening access to physical activities through new and upgraded facilities by October 2018
Action for 2016-18	Deliver a minimum of 10 courses per annum by 2018	Target to be confirmed by September 2016 Roll out new smoke free policy guidance for schools	Target to be confirmed Roll out new smoke free policy guidance for schools Embed effective drug, alcohol and tobacco education in PHSE in schools	Undertake audit and reduce SATOD to > 10% by March 2018	Reduce smoking levels to 25% by October 2018	Reduce levels of obesity to London levels by October 2018	95% of bereaved people signposted to appropriate services by April 2018	Target to be confirmed by September 2016 Increase specialist leisure provision for those with SEND – to be agreed by March 2016
Lead organisation	LBBB	LBBB	LBBB	BHRUT	LBBB	LBBB	CCG / LBBB	LBBB

Public Health Programmes Board

Priority	PREVENTION							
Named lead	Paul Starkey – Health Improvement Advanced Practitioner	Matthew Cole – Director of Public Health	Jo Caswell - Health and Personal Development Advisor	Wendy Matthews - Director of Midwifery	Andy Knight - Group Manager Community, Sport and Arts	Consultant in Public Health	Sharon Morrow – Chief Operating Officer	Andy Knight Group Manager Community, Sport and Arts
Strategy / Steering Group		Children’s Public Health Board – Helen Jenner (Chair)	Tobacco Alliance – Matthew Cole (Chair)	Tobacco Alliance – Matthew Cole (Chair)	Tobacco Alliance – Matthew Cole (Chair)			

Learning Disability Subgroup

Priority	CARE AND SUPPORT							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome	100% of children with a learning disability under 5 years have an annual check and health plan by 2018	Improve health outcomes for children with special educational needs and disabilities				100% of people living with a learning disability are suitably housed by 2018		
Milestone Action for 2015-16	Children with complex care needs assessed and given appropriate care	To be confirmed by September 2015				Development of a learning disabilities accommodation strategy for 2016-20 (completion date to be confirmed by September 2015)		
Action for 2016-18	100% of children with a learning disability under 5 years have an annual check and health plan by October 2018	To be confirmed by September 2015						
Lead organisation	LBBB	LBBB				LBBB		

Learning Disability Subgroup

Priority	CARE AND SUPPORT							
Named lead	Meena Kishinani - Divisional Director Strategic Commissioning and Safeguarding	Meena Kishinani - Divisional Director Strategic Commissioning and Safeguarding				James Goddard – Group Manager – Housing Strategy		
Strategy / Steering Group	SEN Strategy Group – Jane Hargreaves (Chair)	SEN Strategy Group – Jane Hargreaves (Chair)						

Learning Disability Subgroup

Priority	IMPROVEMENT AND INTEGRATION OF SERVICES							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome						Develop opportunities for children and young people and their families to access personal budgets to support their move to independence		
Milestone Action for 2015-16						Implementation of Care Act within service planning and delivery by December 2015		
Action for 2016-18						Implementation of the Think Autism 15 priority challenges for action by October 2018; Ensure 100% people with autistic spectrum disorders with assessed eligible needs for care and support have personal budgets by April 2018		
Lead organisation						LBBB		
Named lead						Learning Disabilities Partnership Board - Chair		

Learning Disability Subgroup

Priority	PREVENTION							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome			Increase percentage of looked after children with a learning disability with annual health check and personal health plan to 95% by 2018		Increase percentage of adults with learning disability with annual health check and personal plan to 95% by 2018			
Milestone Action for 2015-16			Clear communication with staff about the role of health checks and health plans, supported by training and provider performance indicators – reviewed by April 2016		Clear communication with staff about the role of health checks and health plans, supported by training and provider performance indicators – reviewed by April 2016			
Action for 2016-18			95% looked after children with a learning disability with annual health check and personal health plan by October 2018		95% adults with learning disability with annual health check and personal plan by October 2018			

Learning Disability Subgroup

Priority	PREVENTION							
Lead organisation			CCG		LBBB			
Named lead			Sharon Morrow – Chief Operating Officer		Learning Disabilities Partnership Board - Chair			
Strategy / Steering Group			SEN Strategy Group – Jane Hargreaves (Chair)					

Mental Health Subgroup

IMPROVEMENT AND INTEGRATION OF SERVICES

Priority								
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome			Commission high quality mental health services across the life-course that emphasise recovery and linked to joint CAMH transformation plan (as per Future in Mind) by 2018		Assessment for new diagnoses at outset of treatment particularly focussed on diabetes (to be confirmed by September 2015)	Increase numbers accessing Psychological Therapy services year on year	Increase percentage of adults with severe mental illness with physical health check by 2018 <i>(Placeholder: target to be confirmed following discussion as part of mental health delivery plan and agreement of financial and commissioning implications)</i>	90% of GP practices to establish depression registers by 2018

Mental Health Subgroup

IMPROVEMENT AND INTEGRATION OF SERVICES

Priority

Milestone
Action for
2015-16

Develop joint mental health strategy and review recovery pathway by October 2016

Develop plan to deliver new standard for Early Intervention in Psychosis by October 2016

Clinical lead to develop approach to enable practices to review mental health needs as part of long-term condition reviews by October 2016

75% of people referred to the Improved Access to Psychological Therapies (IAPT) programme will be treated within 6 weeks of referral, and 95% will be treated within 18 weeks of referral

15% of people referred to IAPT service will be treated within 6 weeks of referrals and 98% will be treated within 18 weeks of referral

15% of people with relevant conditions will be able to access IAPT services

IAPT services will demonstrate a 50% recovery rate

Care pathways and data collection process set up for physical health assessment in mental health patient settings by October 2016
(Placeholder: target to be confirmed following discussion as part of mental health delivery plan and agreement of financial and commissioning implications)

Development of new pathways for primary and community care by October 2016

Mental Health Subgroup

IMPROVEMENT AND INTEGRATION OF SERVICES

Priority	IMPROVEMENT AND INTEGRATION OF SERVICES							
Action for 2016-18			Implement commissioning actions arising from joint mental health strategy by October 2017	By April 2016, more than 50% of people (all age groups) experiencing a first episode of psychosis will be treated with a NICE approved care package within two weeks of referral		Increase the proportion of patients from BME backgrounds who access IAPT services by March 2018 - target to be confirmed following next round of contract negotiations)	Undertake annual patient reviews for all adults with severe mental illness by March 2018 – these may have financial commissioning implications which would need to be understood and can't be agreed at this stage Suggest – action to be discussed as part of MH delivery plan	Patients with a new diagnosis of depression need regular review and a care plan (thresholds 45-80%) by April 2018 To be confirmed by September 2015
Lead organisation			CCG/LBBD		CCG	CCG	NELFT	CCG
Named lead			Sharon Morrow - Chief Operating Officer Mark Tyson - Group Manager Adult Commissioning		Sharon Morrow – Chief Operating Officer	Sharon Morrow – Chief Operating Officer	Gill Mills, NELFT	Sharon Morrow – Chief Operating Officer
Strategy / Steering Group								

Mental Health Subgroup

Priority	PREVENTION							
Life stage	Pre-Birth & Early Years	Primary School Age	Adolescence	Maternity	Early Adulthood	Established Adulthood	Older People	Vulnerable and Minority Groups
Measurable outcome			Development of a suicide prevention action plan by 2016	Implement strategy to support prevention of post-natal depression by 2018	Improved early diagnosis of depression / anxiety in diabetic patients by 2018	Raise awareness of the response of health and social care staff to mental illness across the system year-on-year	Raise awareness of pathway to support older people get Cognitive Stimulation Therapy (CST) by 2018	Develop new approaches to help people with mental health problems who are unemployed move into work and support them whilst they are out of work by 2018
Milestone Action for 2015-16			Undertake a local suicide audit by April 2016	Training for health workers in order for them to spot early signs of PND % with PND scores > 12 % implemented by October 2016	Develop a plan to identify anxiety and depression in people with long term conditions by October 2016	All mental health first aiders expected to be trained by October 2015	Increase numbers of older people able to access CST – target to be confirmed by September 2015	Establishment and implementation of a peer support programme by June 2016
Action for 2016-18			Implement findings from local suicide audit via action plan from May 2016	95% of women who have a miscarriage, stillbirth or death of a baby to have extra support by October 2018	Implementation of action plan by June 2017	Establish a learning network that is able to self organise that is linked to staff continuous professional development (CPD) by October 2017		Evaluation of the peer support programme in 2018
Lead organisation			Mental Health Sub Group	BHRUT	CCG	Mental Health Sub Group	LBBB	LBBB

Mental Health Subgroup

Priority	PREVENTION							
Named lead			Gill Mills (Borough Director, NELFT) - Chair	Wendy Matthews - Director of Midwifery	Sharon Morrow – Chief Operating Officer	Gill Mills (Borough Director, NELFT) - Chair	Mark Tyson - Group Manager Adult Commissioning	Mark Tyson - Group Manager Adult Commissioning
Strategy / Steering Group								