

HEALTH AND WELLBEING BOARD – 25th February 2015

Title of paper:	Joint Health and Wellbeing Strategy 18 month progress report	
Director(s)/ Corporate Director(s):	Alison Michalska Corporate Director for Children & Adults Nottingham City Council Dr Chris Kenny, Director of Public Health Nottinghamshire County and Nottingham City. Dawn Smith, Chief Operating Officer, Nottingham City Clinical Commissioning Group.	Wards affected: All
Report author(s) and contact details:	John Wilcox, Public Health Manager, Nottingham City Council.	
Other colleagues who have provided input:	Alex Castle-Clarke, Strategy & Commissioning Officer, Crime & Drugs Partnership. Antony Dixon, Strategic Commissioning Manager, Nottingham City Council. Joanne Williams, Programme Manager for Adult Integrated Care, Nottingham City Clinical Commissioning Group. Sarah Quilty, Public Health Manager, Nottingham City Council. Liz Pierce, Public Health Manager, Nottingham City Council. Sharan Jones, Health and Wellbeing Manager, Nottingham City Council. Nicky Dawson, Priority Families Programme Coordinator, Nottingham City Council. Alison Challenger, Public Health Consultant, Nottingham City Council. Candida Brudenell, Strategic Director for Early Intervention, Nottingham City Council.	
Date of consultation with Portfolio Holder(s) (if relevant)	10th February 2015	
Relevant Council Plan Strategic Priority:		
Cutting unemployment by a quarter		<input type="checkbox"/>
Cut crime and anti-social behaviour		<input checked="" type="checkbox"/>
Ensure more school leavers get a job, training or further education than any other City		<input type="checkbox"/>
Your neighbourhood as clean as the City Centre		<input type="checkbox"/>
Help keep your energy bills down		<input type="checkbox"/>
Good access to public transport		<input type="checkbox"/>
Nottingham has a good mix of housing		<input type="checkbox"/>
Nottingham is a good place to do business, invest and create jobs		<input type="checkbox"/>
Nottingham offers a wide range of leisure activities, parks and sporting events		<input type="checkbox"/>
Support early intervention activities		<input checked="" type="checkbox"/>
Deliver effective, value for money services to our citizens		<input checked="" type="checkbox"/>
Relevant Health and Wellbeing Strategy Priority:		
Healthy Nottingham: Preventing alcohol misuse		<input checked="" type="checkbox"/>
Integrated care: Supporting older people		<input checked="" type="checkbox"/>
Early Intervention: Improving Mental Health		<input checked="" type="checkbox"/>
Changing culture and systems: Priority Families		<input checked="" type="checkbox"/>

Summary of issues (including benefits to citizens/service users and contribution to improving health & wellbeing and reducing inequalities):

- Progress on the delivery of the Nottingham City Joint Health and Wellbeing Strategy 18 months after it was endorsed by the Health and Wellbeing Board.
- Proposal for the additional of tobacco related harm to the strategy Healthy Nottingham Priority.
- Considerations for development of the next Health and Wellbeing Strategy.

Recommendation(s):

- | | |
|----------|---|
| 1 | To consider the reported progress on the delivery of the Joint Health and Wellbeing Strategy. |
| 2 | To note changes in the leadership of the strategy priorities. |
| 3 | To approve extending the “Healthy Nottingham” priority which currently focuses on: preventing alcohol misuse, to also focus on reducing smoking-related harm. |
| 4 | To delegate responsibility to the Commissioning Executive Group for the development of a timetable and process for reviewing the 2013-2016 strategy and the development of a new Health and Wellbeing Strategy from 2016. |

How will these recommendations champion mental health and wellbeing in line with the Health and Wellbeing Board aspiration to give equal value to mental health and physical health (‘parity of esteem’):

One of the Nottingham City Joint Health and Wellbeing Strategy priorities is to intervene earlier to increase the number of citizens with good mental health. This will be achieved through actions to improve early years experiences to prevent mental health problems in adulthood; and addressing mental health issues which are barriers to employment. This priority and actions also contribute to the city’s vision for mental health and wellbeing set out in the Wellness in Mind Strategy.

1. REASONS FOR RECOMMENDATIONS

1.1 To consider the reported progress on the delivery of the Joint Health and Wellbeing Strategy

There is a duty through the Health and Social Care Act 2012 on Local Authorities and Clinical Commissioning Groups to produce a Joint Health and Wellbeing Strategy. In Nottingham City, the statutory Health and Wellbeing Board has delegated responsibility to develop and oversee the Joint Health and Wellbeing Strategy, and is therefore the appointed body to oversee the delivery of the strategy.

The Board has receives reports on the overall strategy progress at approximately 6 monthly intervals, with more in-depth progress reports on specific priorities at other meeting dates.

The information provided in **Appendix 1** by officers working on strategy delivery, gives details of the progress and impact in relation to the strategy actions at approximately 18 months since the strategy was endorsed in June 2013. Actions are rated in the following manner:

RAG	Criteria
RED	Significant slippage or risk re: timescale, costs or benefits OR where slippage /risk is unlikely to be recoverable
AMBER	Some slippage re: time, costs or benefits but fully recoverable
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The Board may delegate further follow up of any actions to the Commissioning Executive Group.

A summary of the headlines achievements in delivering the strategy to date are presented in the **Background section**.

2. To note changes in the leadership of the strategy priorities.

There have been changes in the leadership for the strategy priorities since the strategy was agreed by the board in June 2013. The current leadership is as presented below:

HWB strategy Theme	Preventing alcohol misuse	Integrated care: Supporting older people	Early Intervention: improving mental health	Changing culture and systems: Priority Families
Accountable Board member	Chris Kenny, Director of Public Health, NCC.	Dawn Smith, Chief Operating Officer, CCG.	Chris Kenny, Director of Public Health, NCC.	Alison Michalska, Corporate Director of Children and Families, NCC.
Lead Officers	Christine Oliver Head of Service Finance and Commissioning Nottingham City Crime & Drugs Partnership. Alison Challenger, Public Health Consultant, NCC.	Maria Principe, Director of Primary Care Development and Performance, CCG. Helen Jones, Director, Adult Social Care Assessment, NCC.	Children – Lynne McNiven, Public Health Consultant, NCC.	Tajinder Madahar Head of Service Extensive and Specialist Services, NCC. Nicky Dawson Priority Families Programme Coordinator, NCC.
Other Related Strategies	CDP City Alcohol Strategy 2012-2015 Nottingham Plan	Vulnerable Adults Plan Clinical Commissioning Group Strategy	Children and Young People's Plan Wellness in Mind Mental Health and Wellbeing Strategy Nottingham Plan	CDP Partnership Plan 2014/15. Nottingham Plan. Children and Young People's Plan, CDP City Alcohol Strategy 2012-2015. Partnership Drug Strategy. Police & Crime Commissioner Plan. Ending Gang and Youth Violence Strategy.
Delivery plan	Alcohol Strategy action plans	Integrated Care Programme workstreams	Behavioural, Emotional and or Mental Health Pathway Action Plan Wellness in Mind Implementation Plan	Priority Families Programme Plan
Coordinating group	Alcohol Strategy Group	Integrated Care Board	Behavioural, Emotional and or Mental Health Pathway Steering Group Mental Health and Wellbeing Steering Group	Priority Families Leadership Group

3. To approve extending the “Healthy Nottingham” priority which currently focuses on: preventing alcohol misuse, to also focus on reducing tobacco-related harm.

Adult smoking rates in England have continued to fall from 27% in 2000 to 18% in 2014. However, smoking rates in Nottingham remain at the England levels from 2003, (26% of adults smoked in the 2014 Citizen Survey down from 39% in 2008). Smoking remains the greatest cause of preventable ill health and death in the city, and is a significant driver of poverty and the cost of health and social care in the city.

The city has a proven history in tobacco control which was recently supported by the city council signing the Local Authority Declaration on Tobacco Control. The city has a Strategic Tobacco Control Group (STCG) which is comprised of representatives from some, Health and Wellbeing Board members. The STCG is developing a new tobacco control strategy for the city which will be brought to the Board in due course.

By including reducing tobacco related harm in the strategy now, the Board will increase the emphasis on this important agenda now, and enable a strengthening of the city's approach.

It is proposed that the Health and Wellbeing Strategy adopt the Nottingham Plan target to reduce smoking prevalence to 20% by 2020 and that proposals for additional Health and Wellbeing Strategy actions be brought to the next board meeting.

4. To delegate responsibility to the Commissioning Executive Group for the development of a timetable and process for reviewing the 2013-2016 strategy and the development of a new Health and Wellbeing Strategy from 2016.

The 2013-2016 Health and Wellbeing Strategy that was endorsed on the 26th June 2013 is now half way through its 3 year cycle. It is therefore prudent to plan a timetable for reviewing the current strategy, and develop and propose and consult on a revised strategic framework and priorities from 2016. It is therefore proposed that the board delegate the responsibility to undertake this work to the Commissioning Executive Group which will report back to the board at each stage of the process.

2. BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

In June 2013 the Board endorsed its Joint Health and Wellbeing Strategy for 2013-2016. The strategy sets out 4 priority health and wellbeing issues for Nottingham which the board will deliver on:

- **Healthy Nottingham: Preventing alcohol misuse**
- **Integrated care: Supporting older people**
- **Early Intervention: Improving Mental Health**
- **Changing culture and systems: Priority Families**

Headlines Achievements at 18 months

Healthy Nottingham: Preventing alcohol misuse

Supporting Older People

- Service specifications for integrated urgent care and reablement provision developed and discussions proceeding regarding joint venture agreement
- Initial evaluation of programme reported many areas of strength and suggested improvements in governance
- Review of programme structure and governance complete and new structure implemented to expedite progress of workstreams
- Nottingham's BCF Plan rated as in the top 3 for the country

Early Intervention: Improving Mental Health

Improving early years experiences to prevent mental health problems in adulthood

- The children and young people's behavioural, emotional or mental health needs pathway (BEMH) was launched on December 15th 2014.
- The BEMH pathway Team is supporting the implementation and provides training and support for universal services, is part of the single point of access for children and young people with behavioural, emotional or mental health needs and where appropriate will provide direct support to children and young people.
- To date (19/1/2015) 52 referrals have been received through the Single Point of Access for the service, of those 35 have been for ASD/ADHD assessment.
- For more information please go to [Pathway for Children and Young People with Behavioural, Emotional or Mental Health Needs](#)

Mental health and employment

- The Nottingham Fit for Work Service has supported 700 clients up to December 2014 of which 51% had mental health problems in 2014-15.
- A multi-faceted mental health literacy programme has been developed, which ranges from population level awareness to individual behaviour change as well as up skilling non mental health professionals.
- Integrated links have been established with the Department of Work and Pensions (DWP) to focus on developing more opportunities for unpaid work experience.
- Nottingham has committed to support the Time to Change initiative which will focus on reducing stigma.

Priority Families

- 1200 families engaged and having improved outcomes across crime/anti-social behaviour, school attendance and worklessness.
- Phase 1 of the national programme completed at 100% of target six months early, selected as 'early starters' for phase 2.
- Wider programme activity to effect a change of culture is progressing to plan.

3. OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

No other options were considered.

4. FINANCIAL IMPLICATIONS (INCLUDING VALUE FOR MONEY/VAT)

Healthy Nottingham: Preventing alcohol misuse

- The programme is majority funded through the Nottingham City Council Public Health Grant. The programme is subject the general pressure on the Public Health budget and on the budget provision to universal and targeted services generally. There are no additional pressures to bring to the boards attention.

Integrated care: Supporting older people

- The programme is funded through the Better Care Fund which reports to the Health and Wellbeing Board and the Commissioning Executive Group. There are no additional pressures to bring to the boards attention.

Early Intervention: Improving Mental Health

Improving early years experiences to prevent mental health problems in adulthood

- NHS Nottingham City Clinical Commissioning Group in conjunction with partners has implemented a 2 year pilot Children and Young People's Behavioural, Emotional or Mental Health (BEMH) Needs pathway. This is supported by funding from NHS Nottingham City Clinical Commissioning Group. There are no additional pressures to bring to the boards attention.

Mental health and employment

- Funding for 2015/16 for the Fit For Work Service is being identified and agreed between Nottingham City Council and Nottingham City Clinical Commissioning Group. By quarter 2 2015/16 an assessment of the national fit for work service 'health and work service' to identify any local gaps in provision will be undertaken and longer term commissioning intentions will be agreed between the CCG and the council.
- There is non-recurrent public health funding allocated for the Fit for Work programme for 2015/16. This has allowed for a review of the service to be completed and ensure the Nottingham work fits seamlessly with the newly developed national programme.

Changing culture and systems: Priority Families

- Savings targets of £633k for 2013-15 were set against edge of care placements costs budget relief. Targets were exceeded with net budget relief from 1st September 2013 to 27th January 2015 £1,495,299.
- National targets were met for phase 1 netting full grant funding of £4.5m.
- An updated version of the new national costs savings calculator has been released and will be in full national use by July 2015. Signed off as fiscal by Treasury this will provide cashable savings figures and Social Return on Investment.

5. RISK MANAGEMENT ISSUES (INCLUDING LEGAL IMPLICATIONS AND CRIME AND DISORDER ACT IMPLICATIONS)

Alcohol misuse

- Budgetary pressures on the City Council and partners will continue to present a risk to the delivery of universal and targeted services.
- The government has resiled on its intention to introduce minimum unit pricing (MUP) for alcohol in this Parliament. The continued availability and relatively low cost of alcohol is likely to present an abiding risk to local efforts to reduce harmful citizen consumption.
- Lack of engagement from super markets in the Super Strength Free campaign continues to be hampered by a lack of engagement by super markets.

Integrated care: Supporting older people

- Inequity identified in regard to access for citizens who only meet the one of the service components within the aligned service e.g. those registered with a Nottingham City GP but resident out of the city boundary or those resident in the City but registered with an out of area GP practice.
- There is a risk that there is a lack of available estates with the appropriate infrastructure to support co-location for the Care Delivery Groups and the independence pathway, resulting in difficulty in multi-disciplinary working.
- All risks are managed through the Integrated Care Programme Board.

Early Intervention: Improving Mental Health

Mental health and employment

- By quarter 2 2015/16 an assessment of the national fit for work service 'health and work service' will be completed to identify any local gaps in provision. Dependant on the outcome of the review a decision will be taken regarding longer term commissioning intentions for a support to work service will be agreed between Nottingham City CCG and Nottingham City Council. This could be considered as a risk to the future provision of a Nottingham service in the future.

Improving early years experiences to prevent mental health problems in adulthood

- The main risks in the implementation of the BEMH pathway are maintaining engagement and continuity of services through the implementation period. Mitigating actions for this change management are managed through the Behavioural, Emotional and or Mental Health Pathway Steering Group.

Changing culture and systems: Priority Families

- The risk register for the Priority Families programme is managed through the Programme Leadership and Partnership Board. There are no risks to escalate to the Health and Wellbeing Board at this point.

6. EQUALITY IMPACT ASSESSMENT

Has the equality impact been assessed?

Not needed (report does not contain proposals or financial decisions)

No

Yes – (as part of strategy development)

Due regard should be given to the equality implications identified in the EIA.

7. LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

None.

8. PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

Nottingham City Joint Health and Wellbeing Strategy 2013-2016

Joint Health and Wellbeing Strategy 12 month progress report

Nottingham City Joint Health and Wellbeing Strategy 18 month progress report

Appendix 1 Progress tables

Healthy Nottingham: Preventing alcohol misuse

	What We Will Do	RAG	Progress and Impact
Headline Outcome	We will reduce the proportion of adults who drink at harmful levels by a third	AMBER	<ul style="list-style-type: none"> Since 2012 adults drinking at harmful levels has reduced from 12% to 9% (25% reduction) according to the Nottingham Citizen's Survey. It has fallen by more than 50% (19% to 9%) since 2009.
Secondary Outcomes	Reduced alcohol-related anti-social behavior including street drinking		<ul style="list-style-type: none"> This data is collected by Community Protection and analysis detailing progress against this outcome will be available in due course.
	Fewer adults binge drinking	GREEN	<ul style="list-style-type: none"> There has been a downward trend in binge drinking as measured through the Citizen Survey from 24% in 2012, to 23% in 2013 and 19% in 2014.
	Lower rates of alcohol-attributable crime	AMBER	<ul style="list-style-type: none"> Alcohol attributable crime has risen by 3% according to the initial findings of the CDP Substance Misuse Needs Assessment in the previous 12 months. This however is against an increase in all offending (up 6.2% YTD) and is in part driven by the changes to crime recording rules nationally, especially for violence,
	Fewer alcohol-related deaths	AMBER	<ul style="list-style-type: none"> The latest published data is for 2012 when the alcohol-related mortality rate was 80.9 per 100,000 population for males and 33.4 per 100,000 population for females. These rates are higher, but not statistically significantly higher than the England rates.
Key Actions	A complete ban on street drinking across the city	GREEN	<ul style="list-style-type: none"> Following consultation and engagement the expansion of the Designated Public Place Orders (DPPOs) was ratified by Full Council in January and came into force in March 2014. The establishment of a city-wide street drinking ban through the DPPO represents a piece of best practice for the city and a national first. The work led by Community Protection will also place the city in a strong position with regard to the effective use of the new anti-social behaviour tools and powers due to come into effect in October. Community Protection has also advised the Home Office on the development of these.
	Ensure that the recovery of those in treatment is supported by addressing wider factors associated with dependency, including housing and	GREEN	<ul style="list-style-type: none"> To further support domestic violence survivors with alcohol treatment needs work is being undertaken to ensure that information sharing arrangements are in place between alcohol treatment providers and processes to support medium and higher-risk abuse survivors such as the

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	What We Will Do	RAG	Progress and Impact
	social care needs, employability, family support needs and domestic violence		Multi-Agency Risk Assessment Conference (MARAC), Multi-Agency Public Protection Arrangements (MAPPA,) Domestic Abuse Referral Team (DART) and City Domestic Abuse Panel (CDAP).
	Support families, and their carers, to reduce their drinking, and join up referral between alcohol health promotion, treatment and aftercare services	GREEN	<ul style="list-style-type: none"> The Crime & Drugs Partnership commissions the Explore Family service which is provided by Lifeline in partnership with the Children's Society. The service provides support to children, adults and whole families that are affected by someone else's substance misuse. The ongoing process of service review for Explore Family, alongside the review of the city's treatment systems for substance misuse seeks to ensure that referrals into the service are maximised appropriately. This is to be achieved through the continuous development and improvement of the pathway to ensure as seamless a treatment journey as possible.
	Raise awareness of the risk of excessive alcohol consumption among students through targeted health promotion work	GREEN	<ul style="list-style-type: none"> The Last Orders services undertakes wide ranging engagement with students on the risks of alcohol misuse and provides an intensive programme of engagement at induction weeks and other events.
	Provide universal, good quality drug and alcohol education and deliver effective harm reduction messages to children & young people	AMBER	<ul style="list-style-type: none"> Nottingham currently employs the DrugAware scheme to schools in the city which delivers drugs and alcohol education to children and young people in an educational setting. An evaluation has been completed. Of 103 primary and secondary schools in Nottingham 74 currently deliver the DrugAware scheme. Work between NCC Children and Families department and the CDP is underway to ensure take-up of the service across all of the city's schools. In April 2014 DrugAware was awarded a PSHE Quality Mark. Additional investment is being sought through a bid to the Police Innovation fund in order to get all schools to reach the DrugAware standard this year. Scoping work is underway regarding a consolidated package of interventions for schools encompassing substance misuse, sexual health, gangs and police.
	Support professionals working with citizens to identify harmful levels of drinking and signpost to and support a healthier approach to alcohol	GREEN	<ul style="list-style-type: none"> The commissioned Last Orders Service has delivered alcohol awareness and Identification and Brief Advice (IBA) training across a range of professional disciplines including police officers, PCSOs and CPOs, dentists, social workers, magistrates, Street Pastors, Complex Care staff

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	What We Will Do	RAG	Progress and Impact
	consumption		<p>and pharmacists. In 2012/13 807 individuals were trained in IBA alongside a further 839 professionals trained in alcohol awareness. This level of delivery has been sustained into 2013/14.</p> <ul style="list-style-type: none"> The recommissioning of the city's alcohol treatment model from September 2014 will provide an opportunity to develop an enhanced understanding of how the model interacts with neighbouring treatment models for criminal justice clients, young people and for those in drug treatment. This process may realise efficiencies as well as provide opportunities for more streamlined treatment journeys.
	Extend to neighbourhoods the successful schemes which encourage responsible drinking and enforcement, so that alcohol-related harm is reduced across the whole city, such as the introduction of the voluntary "super strength free" code for off-licences	GREEN	<ul style="list-style-type: none"> Currently the Super Strength Free (SSF) campaign to reduce the sale of beers, lagers and ciders over 5.5% volume had signed up 80% of city centre venues. The programme is now being expanded to all of the city's neighbourhoods with the aim of addressing the nuisance, cost and harm represented by the use of cheap strong alcohol. A SSF condition is being sought by Community Protection on all new alcohol license applications in the city.
	Work towards a net reduction in the number of licensed premises and off-licences	AMBER	<ul style="list-style-type: none"> The management of alcohol sales plays an important part in the delivery of alcohol related strategy and management. Strategic leads for licensing are currently considering how best to manage the city's Cumulative Impact Policy (saturation zone) with regard to managing the number and concentration of licensed premises while accommodating the city's Time and Place Plan. This is to include the expansion of the city centre saturation zone east and west to protect the Sneinton Market area and Castle district.
	Support national campaigns to tackle alcohol misuse, such as introducing a minimum unit price for alcohol	GREEN	<ul style="list-style-type: none"> The Police and Crime Commissioner on behalf of the Crime & Drugs Partnership Board wrote in 2013 to the Prime Minister expressing the disappointment of local partners that minimum unit pricing would not be implemented in England and Wales further to the government's National Alcohol Strategy. Partners have consistently demonstrated their support for this proposed approach through consultation with central government. Nottingham and Nottinghamshire were successful in joining the one-year Home Office led Local Alcohol Action Area (LAAA) programme in March 2014. The scheme has provided support to a range of initiatives in the city

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	What We Will Do	RAG	Progress and Impact
			<p>including the Ending Alcohol Harm communications campaign.</p> <ul style="list-style-type: none"> • In 2014 Nottingham was awarded 'Mentor Status' for alcohol by the Home Office reflecting the best practice delivered in the city and allowing other areas to benefit from local insight. • Through the LAAA programme and in support of the Ending Alcohol Harm communications plan Nottingham and Nottinghamshire were granted the unique opportunity to work with Drinkaware to develop behaviour change communications and on the ground interventions. While still in evaluation initial results are highly promising. • Nottingham is working with PHE and the Home Office to develop the use of 'health as a licensing objective' for Cumulative Impact Policies.

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Supporting Older People Priority

	What We Will Do	RAG	Progress and Impact
Headline Outcome	More elderly citizens will report that their quality of life has improved as a result of integrated health and care services	AMBER	<ul style="list-style-type: none"> Survey forms to establish baseline distributed – baseline to be set by April Initial external evaluation of programme has indicated that it is producing positive examples of joined-up approaches and new ways of working and is making an impact with practitioners reporting it's making a difference both to their roles and to citizen care
Secondary Outcomes	The number of older citizens remaining independent after hospital admission will increase	GREEN	<ul style="list-style-type: none"> Significant upturn in performance reported in 14/15 from baseline target. Health data still to be assimilated. Further stretch target for re-ablement to be set
	Develop community health services with social care support based on geographically proximate GP associations	GREEN	<ul style="list-style-type: none"> Care Delivery Groups operational across the City (8 areas). MDT working within CDG's established and review of Specialist Services and how fit with CDG's complete. Next stage will be embedding good practice across all CDG's, improving risk stratification and increasing focus on early intervention
Key Actions	Provide better information about services and how to contact them so that citizens know what health and social care choices are available locally and who to contact when they need help	AMBER	<ul style="list-style-type: none"> Now being refocused to take account of Care Act information and advice requirements – Information and Advice Strategy in development due for completion April 15 – commissioning activity to follow Self Care work stream of Integrated Adult Care programme refocused – self care strategy to be developed by April 15 with links to Care Act I&A workstream
	Develop a process to identify individuals who will benefit from earlier intervention as well as those requiring support from health and social care services, building on risk stratification, risk registers and data held by relevant agencies	GREEN	<ul style="list-style-type: none"> New LA performance framework in place with RAG rating – this is published for residential care and other service types are being considered for publication Dashboard being developed to collate all performance data in one place across all partner organisations – it is proposed once this is piloted that a summary version will be published

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	What We Will Do	RAG	Progress and Impact
	Support citizens maintain their independence and manage their own care through the creation of effective networks with community, housing and health support services	AMBER	<ul style="list-style-type: none"> • Enablement Gateway promoting self care in the community for 180 citizens per month • Self Care work stream of Integrated Adult Care programme refocused – self care strategy to be developed by April 15 with links to Care Act I&A workstream
	Ensure that there is a single person responsible for coordinating the care of citizens with complex needs	GREEN	<ul style="list-style-type: none"> • Care coordinators in post within each CDG to better coordinate care of complex clients.
	Restructure and skill up our workforce so that health and social care services work better together to deliver the right care at the right time	GREEN	<ul style="list-style-type: none"> • Connecting Care newsletter distributed across the health and social care workforce detailing developments in the Integrated Adult Care Programme • Core Knowledge Standard for workforce agreed and being embedded in service specifications • Current focus of activity is training workforce regarding Care Act requirements
	Develop a range of transparent quality measures appropriate to the service being delivered and publish the results so that citizens know what standards of service that they can expect and how this is improving	AMBER	<ul style="list-style-type: none"> • New LA performance framework in place with RAG rating – this is published for residential care and other service types are being considered for publication • Dashboard being developed to collate all performance data in one place across all partner organisations – it is proposed once this is piloted that a summary version will be published
	Increase the number of people signing up to the Nottingham Circle and develop other provision to address social isolation and loneliness	GREEN	<ul style="list-style-type: none"> • A further 89 citizens joined Circle in Qtr 3 of 14/15 – the service is still disproportionately focused on Bulwell. • 6 'Looking After Each Other' pilot projects launched in Nov 14 and on track for implementation by 31st March 15
	Integrated assessment and reablement services	GREEN	<ul style="list-style-type: none"> • Service specifications for fully integrated re-ablement and urgent care services drafted and out for consultation. Discussions re joint venture arrangement for integrated services commenced. Target completion date now June 15. Capacity improvements across integrated services
	Putting more technology into people's homes to support them and their carers	GREEN	<ul style="list-style-type: none"> • This year's total to date stands at 545 against a target of 335 for the year 2014 -15 • BCF target established of 6000 installations by end 15/16
	Creation of a telephone number for citizens requiring both health and	GREEN	<ul style="list-style-type: none"> • Single Access Point Model and vision now approved. • Revised go live date of July 2015 established due to complexity of change

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	What We Will Do	RAG	Progress and Impact
	social care support		required

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Early Intervention: Improving Mental Health

Improving early years experiences to prevent mental health problems in adulthood

	What We Will Do	RAG	Progress and Impact
Headline Outcome	We will increase the proportion of children referred for specialist Community Paediatrician assessment due to behavioural problems who have been offered access to earlier parenting intervention	GREEN	<ul style="list-style-type: none"> Nottingham City pathway for children and young people with Behavioural, Emotional and or Mental Health (CYP BEH) needs was launched on December 15th 2014. The CYP BEH Team is supporting the pathway and provides training and support for universal services, is part of the single point of access for children and young people with behavioural, emotional or mental health needs and where appropriate will provide direct support to children and young people. To date (19/1/2015) 52 referrals have been received through the Single Point of Access for the service, of those 35 have been for ASD/ADHD assessment. For more information please go to Pathway for Children and Young People with Behavioural, Emotional or Mental Health Needs
Secondary Outcomes	The number of parents and carers who feel well equipped to have a positive influence on their children's' behaviour will increase	AMBER	<ul style="list-style-type: none"> This is in progress and will be measured through the behavioural emotional health and mental health pathway by Quarter 4 2014/15. Parents are being recruited to take part in structured parenting programmes which will commence in February 2015.
	The number of children and families affected by behavioural problems will decrease.	AMBER	<ul style="list-style-type: none"> A measure of increased numbers of referrals to the emotional health and wellbeing pathway will act as a proxy reducing currently unmet need. Baseline will be established through the numbers of referrals coming through the emotional health and wellbeing pathway and their associated outcomes.
	The number of children going on to develop mental health problems in adulthood will decrease	AMBER	<ul style="list-style-type: none"> Baseline numbers of children transitioning to adult services will be established by the end Quarter 4 of 2014 / 2015 This is a long term outcome, however we will endeavour to measure this through a reduction of young people transitioning into adult mental health services. This will however not pick up number of adults accessing services in adulthood who previously access CAMHS.

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	What We Will Do	RAG	Progress and Impact
		AMBER	<ul style="list-style-type: none"> Baselines numbers of children being referred into the Community Paediatrician Service.
Key Actions	We will ensure appropriate pathways are in place to enable children with behaviour problems are able to receive specific help earlier	GREEN	<p>The CYP BEH pathway and team will undertake the following:</p> <ul style="list-style-type: none"> undertaking initial assessments to determine the needs of the child or young person referred into the service; referring to the most appropriate services dependant on the need of the child or young person; determining where further assessment is required; undertaking pre-assessment work that may be required prior to a specialist clinical assessment; delivering parenting programmes which will include: <ul style="list-style-type: none"> Solihull group programmes for parents or carers of children age 7-11 years and 12-18 years; Early Bird programme for parents of pre-school children diagnosed with ASD; The New Forest Programme for parents or carers of pre-school children; delivering one to one work with children, young people, parents or carers using evidence based strategies that are recommended by NICE including: <ul style="list-style-type: none"> Solihull approach; solution focussed therapy; psycho education; cognitive behavioural therapy; behaviour management. They may also provide support to gain clarity on the appropriate course of treatment for a child or young person. Some children and young people will be supported to access further or specialist medical assessment and will receive support following a medical diagnosis
	Providing tailored parenting programmes for citizens whose	GREEN	See above

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	What We Will Do	RAG	Progress and Impact
	children at age 0-5 are at highest risk of developing conduct disorders		
	Commissioning health and wellbeing services jointly for children to ensure resources are deployed efficiently and services work together to give children the best start in life. Including undertaking two joint commissioning reviews in 2013/14 covering all services for children age 0-5 and 6-19	AMBER	The Nottingham Child Development Review (CDR) was initiated in 2013 and is seeking to realise the Children and Young People's Plan vision for babies, children, young people and families, taking into account the requirements of the Healthy Child Programme and the Early Years Foundation Stage. The CDR aims to develop an integrated and evidence-based offer of prevention and early intervention services and approaches that will support optimum health, social and educational outcomes for pregnant women, babies, children and young people and their families in Nottingham City.
	Work with partners to ensure parents and carers of children involved in parenting interventions are offered the opportunity to access help to improve their literacy and numeracy skills and signpost to advisors for debt management, benefits maximisation, housing, and other related services	AMBER	The Big Lottery 'Small Steps Big Changes' programme will be providing parenting programmes for all families in the 4 affected wards. Parents will be recruited as peer mentors and this is a key development of the programme in order to provide an universal approach to parenting. The recommendations from the CDR will support and roll out city wide parenting programmes and support to families through Children Centre provision

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Mental health and employment

	What We Will Do	RAG	Progress and Impact
Headline Outcome	We will support 1,100 people over the next 3 years to remain in work or begin working, through enabling them to be in work where previously their health was a barrier to employment, including a focus on supporting people with mental health problems	AMBER	<p>Following the national trend, unemployment in the city has begun to reduce and the numbers in receipt of Jobseekers Allowance have fallen. However the number of long-term unemployed claiming Employment Support Allowance is not following this trend.</p> <p>The Nottingham Fit for Work Service has been commissioned since April 2013 to provide access to joined up support to help people gain and maintain employment.</p> <ul style="list-style-type: none"> The total number of clients supported up to December 2014 was 700 (334 'in work' clients and 266 'out of work' clients). 83% of those individuals who have accessed the service in 2014-15 have a long term condition. The proportion of those with mental health problems has increased to 51% in 2014-15 (up 4% on 2013-14).
Secondary Outcomes	Increase the proportion of people living with diagnosed mental health conditions who are in employment	AMBER	<ul style="list-style-type: none"> The National Outcomes Frameworks (Public Health, NHS and Social Care) prioritise employment for people with mental health problems. The three Outcomes Frameworks report indicators that are different making it difficult to define and identify the need. As part of the work to support Wellness in Mind, the Nottingham Mental Health and Wellbeing Strategy a Nottingham dashboard is in development to build a better picture of needs in this area, based on this range of indicators Unemployment of those with mental health problems will be a large part of the focus of the health and employment partnership group.
	Improve the quality of jobs that people with mental health problems are able to access	RED	<ul style="list-style-type: none"> Further action to support this outcome will be considered by the health and employment partnership group.

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	What We Will Do	RAG	Progress and Impact
	Ensure that people with mental health problems have access to joined up support to help them in gaining and maintaining employment	GREEN	<ul style="list-style-type: none"> The Fit for Work Service provides access to joined up support to help people gain and maintain employment.
Key Actions	Promote openness and awareness regarding mental health problems and how to maximise health and wellbeing amongst employers and the general population	GREEN	<ul style="list-style-type: none"> A multi-faceted mental health literacy programme has been developed, which ranges from population level awareness to individual behaviour change as well as up skilling non mental health professionals. The implementation of this programme which will be launched in May 2015 will raise awareness of mental health problems and the importance of early identification and intervention.
	Work with the voluntary sector to allow people to get the mental health benefits of being in work in other ways than through paid employment alone	GREEN	<ul style="list-style-type: none"> Integrated links have been established with the Department of Work and Pensions (DWP) to focus on developing more opportunities for unpaid work experience. Partnership action has seen the development of the Looking After Each Other initiative which aims to build stronger communities where volunteering and looking after each other is the norm rather than the exception. The NCVS is taking a proactive approach to building capacity of vulnerable groups. The Nottingham Fit for Work service signposts to volunteering opportunities.
	Work with communities, schools and colleges to help encourage an understanding and willingness to discuss mental health illness to reduce stigma.	GREEN	<ul style="list-style-type: none"> A multi-faceted mental health literacy programme which includes the 5 ways to Wellbeing is being developed. Nottingham City Council has committed to support the Time to Change initiative which will focus on reducing stigma. Locality based mental health workshops are being held across the city. A health promotion specialist has been appointed to lead on the emotional health of schoolchildren.
	Consider ways in which Nottingham City Council can be an exemplar employer by ensuring that policies to support employees with mental health problems are translated to their	AMBER	<p>Nottingham City Council has committed to the Local Authority Mental Health Challenge and has appointed the portfolio holder for adults and health as their mental health champion, to take a proactive lead in improving mental health and wellbeing in the city. Initiatives include</p> <ul style="list-style-type: none"> Twice monthly wellbeing clinics providing mental health advice and support

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	What We Will Do	RAG	Progress and Impact
	experience 'on the ground'.		<ul style="list-style-type: none"> have been introduced for employees. The Employee Assistance Programme offers confidential counselling and CBT is included in offer. Stress management practice workshops are offered for managers. Resilience sessions are held for all colleagues. Mental health awareness is regularly promoted for colleagues. Participation in the annual Time to Talk day.
	Provide support to employers of all sizes to adapt their business to provide support for individual employees, flexible ways of working to maximise mental wellbeing and allow staff to remain in work and promote employee wellbeing to reduce the impact of mental health problems.	AMBER	<ul style="list-style-type: none"> This will be supported by the mental health literacy and training programme. The wellbeing clinics providing employee mental health guidance and support run through Occupational Health at Nottingham City Council will be promoted to other employers.
	Providing programmes to help at least 300 citizens on Jobseekers Allowance return to work where health has been a barrier.	GREEN	<ul style="list-style-type: none"> Fit for Work has engaged a total number of 266 'out of work' patients.
	Providing programmes to help at least 800 citizens manage their health condition so that they can remain in work.	AMBER	<ul style="list-style-type: none"> Fit for Work engaged a total number of 334 'in work' patients supported. This number is likely to increase due to an anticipated increase in referrals through the national Fit for Work service being introduced in Nottingham from summer 2015.

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Changing culture and systems: Priority Families Priority

	What We Will Do	RAG	Progress and Impact
Headline Outcome	We will engage 1200 targeted families with the Priority Families programme. By 2016 at least 800 of these will have seen improvements in their school attendance rates, levels of anti-social behaviour and youth offending and/or worklessness.	GREEN	<ul style="list-style-type: none"> 1200 targeted families have been engaged. All 1200 have seen improvements in school attendance rates, levels of anti-social behaviour and youth offending and/or worklessness. This 100% success rate was achieved six months early and has enabled Nottingham to be 'early starters' for phase 2 of the national programme. The new target for phase 2 of the national programme is 3,870 families to be supported between 2015 and 2020. The target number of families for 2015/16 is 890 or 23%.
Secondary Outcomes	<p>We will also aim to achieve the following outcomes: Support at least 800 of the 1,200 families engaged to achieve either [A] or [B] or both:</p> <p>[A]</p> <ul style="list-style-type: none"> All children; fewer than three fixed exclusions and less than 15% unauthorised absence in last three terms A 60% reduction in anti-social behaviour across the family in the last six months Under 18 offending to have reduced by at least 33% in last six months Progress to work for one adult not working e.g. volunteered for work programmes in last six months <p>[B]</p> <ul style="list-style-type: none"> At least one adult moved off out-of-work benefits into continuous employment in the last six months. 	GREEN	<ul style="list-style-type: none"> 1,169 families of 1200 achieved attendance/exclusion <u>and</u> crime/ASB improved outcomes 31 families of 1200 achieved continuous employment, and 95 families made significant progress towards work (NB measured by families not individuals. A family may contain more than one unemployed adult). As figures are at 100% for the national targets families that have improved since figures were submitted in October 14 cannot be added to the national statistics. However, open cases still being supported on 1st January 15 can be counted towards early starter targets (194 families to be engaged with Priority Families by 31st March 15).

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	What We Will Do	RAG	Progress and Impact
	Selecting the initial group of families according to the Government criteria	GREEN	<ul style="list-style-type: none"> Action completed
	Providing a lead professional or Family Partnership Worker to be accountable for the relationship with each family The 'worker' will have the support of all agencies involved with the family and will have strong supervision	GREEN	<ul style="list-style-type: none"> 368 Partnership staff trained to date. Case holding staff are delivering the model Roll out ongoing
	Undertaking a whole family assessment for each family, supported by a Whole Family Plan. More specialist assessments will be provided to support the plan where needed	GREEN	<ul style="list-style-type: none"> Workers completing whole family assessments and plans on a secure partnership online web platform. Other specialist assessments can be up loaded in to the assessment area. The web platform is just receiving it's third update to enable the next phase of work and is an interim solution until the new council divisional IT provision is in place (2016) that includes partnership access in the specification.
	Support the workforce to deliver culture and practice change in line with this work	GREEN	<ul style="list-style-type: none"> Engagement and change plans are in place and on track. Elements of activity include for example 16 partnership accredited practitioners as change champions, 6 months mentoring for each trained worker to embed change, quarterly practitioners good practice seminars, managers briefings, stakeholder events, workshops, Priority Families delivery packs, website, newsletters and a new DVD. Change activity will be ongoing through phase 2 of the programme to mainstream agreed elements into business as usual.
	Develop a single interagency database of families who are involved with the following programmes and services, to ensure appropriate support is provided: Ending gang and youth violence (EGYV)	GREEN/AMBER	<ul style="list-style-type: none"> Progressing but pace is being dictated by broader central government activity around data protection and enabling access to missing datasets and also by timeliness of local agreements. Family Intervention Project and YOT families already match Priority Families criteria and are part of the Troubled Families 'list'. EGYV families have only been a match to local criteria not to national indicators for phase 1 – however they <i>are</i> now a match for phase 2 new criteria around gangs and violence so will be captured on the list. The Troubled Families list is being refreshed to include these families

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	What We Will Do	RAG	Progress and Impact
	Family Intervention Project Youth Offending Team Priority Families		<p>and also families meeting a range of new criteria for example Domestic Abuse, Health and Well-Being and Children who need help.</p> <ul style="list-style-type: none"> • Government has introduced new information sharing protocols to enable wider access to health and employment/benefits data and locally information sharing protocols are in progress. • The Troubled Families list will be the biggest matched list we are able to create within the limits of the current national agreements, Acts and data protection requirements under law. • A target national outcome is to support information sharing hubs and practice so work will continue to support development of a partnership database – see bullet point 2 under the section above ‘undertaking a whole family assessment...’ for detail in respect of divisional work.
Rolling out to social care	Edge of Care Hub	GREEN/AMBER	<ul style="list-style-type: none"> • Work to widen successful approaches across social care has commenced and is being overseen by the Priority Families Leadership Group. This has been ‘slipped’ to ensure alignment with broader divisional restructuring. • Since commencing 16 months ago the Hub has supported 35 families, 94 children of which 63 were at the edge of care proceedings, and to March 15 will deliver total budget relief of £1,495,299.
Progress nationally	Annual Face to Face Progress check with DCLG	GREEN	<ul style="list-style-type: none"> • Following the annual check in August 14 Priority Families reached 100% on all targets at the end of September; so ranked joint 1st nationally. • DCLG may visit early starter areas for an interim face to face progress check but are currently focused on areas who are unlikely to reach the 75% of target threshold by April 15.

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