

## Healthy Culture 2016/17 Action Plan

Version Control			
Version	Date	Change Details	Author
0.1	26.10.16	New template populated	Helene Denness
0.2	21.12.16	Reablement targets added Assistive technology - Missing target group added Version Control added	Uzmah Bhatti
0.3	Jan-Mar 2018	Based on advice from Christopher Curtis (CCG Head of planning, performance and QIPP) Reablement and DOTC baseline changed to actuals for 15/16, targets updated, actuals added and rag rated.  Baseline set for Financial hardship targets based on 2016 survey.  Review of plan due to changes in landscape over past 2 years affecting themes and outcomes  Theme 1 Action: “ <i>Work with HEE to create a sustainable workforce to support integration and community care</i> ” removed due no progress being planned at this stage at STP level.  Theme 1 Action: “ <i>Development of a shared outcomes framework to ensure that we are all working to improve citizen outcomes</i> ” removed as has now moved to STP footprint.  Voluntary Community Sector actions led by NCS Action: ‘ <i>Development of sector wide tracking system to help particularly smaller organisations monitor the number of referrals and track client progress</i> ’ removed as is not being taken forward at this time.	Uzmah Bhatti
0.4	September 2019	Dashboard updated	Uzmah Bhatti
0.5	May 2019	Lead partners updated, dashboard updated, plan content updated with additional comments	Uzmah Bhatti

Distribution			
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0.2	As above		
0.3	<b>Name</b>	<b>Job title</b>	<b>Healthy culture role</b>
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	Helene	Public Health Consultant (NCC)	Public Health Lead

	Denness		
	Uzmah Bhatti	Insight Specialist Public Health (NCC)	Coordinator
	Dave Miles	Assistive Technology Specialist (CCG)	Assistive technology lead
	Peter Morley	Commissioning Manager	Financial vulnerability lead
	Karla Banfield	Market and Business Partnership Manager (NCC)	LION lead
	Rachel Jenkins	Senior Project Manager – Health & Social Care Integration (CCG/NCC)	Self-Care Lead
	Ciara Stuart	Assistant Director Out of Hospital Care	Health & Social Care Integration
	Rebecca Cameron	Head of Membership Services (CVS) – replaces Maria Ward	VCS contribution to plan
	Steve Thorne	Communications & Marketing Manager (NCC)	Comms support to plan
	Gemma Poulter	Head of Integration (NCC)	Integration
	HWB Board		
0.5	<b>Name</b>	<b>Job title</b>	<b>Healthy culture role</b>
	Dr Marcus Bicknell	GP/HWB member	HWB sponsor
	Helene Denness	Public Health Consultant (NCC)	Public Health Lead
	Uzmah Bhatti	Public Health Insight Manager (NCC)	Coordinator
	Clare Gilbert	Commissioning Lead – Adults (NCC)	Assistive technology lead
	Peter Morley	Commissioning Manager	Financial vulnerability lead
	Karla Banfield	Market and Business Partnership Manager (NCC)	LION lead
	Natalie Dunn	Programme Manager, Prevention, Person and Community Centred Approaches Programme (CCG/ICS)	Self-Care Lead
	Ciara Stuart	Deputy Locality Director	Health & Social Care Integration
	Jules Seblin	NCVS	VCS contribution to plan
	Steve Thorne	Communications & Marketing Manager (NCC)	Comms support to plan
	Gemma Poulter	Head of Integration (NCC)	Integration
	HWB Board		

**Priority Action: Individuals and groups will have the confidence to make healthy life choices and access services at the right time to benefit their health and wellbeing**

Headline measures / metrics	Metric/ KPI (inc. source and definition)		Baseline	Target and Actual Performance				Commentary	Update March 2019
			15/16	16/17	17/18	18/19	19/20		
1	Increase in effectiveness of reablement – proportion of >65 yr olds at home 91 days after discharge from hospital	Target		77.6%	79.0%	80.0%	TBC	With the exception of DTOC which is set by NHSE, Targets are developed each year as part of the BCF planning process based on performance.	The Transforming Homecare group that report in to the Home First Group are undertaking route cause analysis. This will inform recommended actions that are required to fully align the Reablement Teams. The Transforming Homecare Group will take forward these actions as short, mid and long-term work-streams.
		Actual	74.7%	75.5% <b>A</b>	88.7% <b>G</b>	92.3% Feb 19 <b>G</b>	Awaiting publication of BCF guidance		
2	Reduction in delayed transfers of care – number of delayed days aged 18+	Target		13,473	6,498	11,142	TBC	Awaiting publication of BCF guidance	 DTOC exception report.docx
		Actual	13546	14,232 <b>R</b>	15,342 <b>R</b>	13,156 Feb 19 <b>R</b>			
3	A decrease in the percentage of citizens who report, through the Citizen Survey, that they struggle to keep up with bills and credit commitments.	Target		26%	24%	22%	20%	Good progress towards target.	
		Actual	28% (2015)	20.2% <b>G</b>	24% <b>G</b>	20.7% <b>G</b>			
4	An increase in the percentage of citizens who report, through the Citizen Survey, that they know where to go for advice, help and support if they are experiencing financial	Target			64%	66%	68%	Not making progress towards target, performance has deteriorated.	
		Actual		62% (2016 baseline)	63.3% <b>A</b>	59.4% <b>R</b>			

	hardship.							
5	PHOF 1.01i– Children in low income families (all dependent children under 20)	Target		29.4	27.2	25.0	22.8	(Published on a 2 year delay) Locally agreed aspirations based on <a href="#">government approach to tackling poverty for this Parliament and up to 2020.</a>
		Actual	31.6%	33.6% R	28.5% R	29.2% R		

## Priority Groups

Older people, people with physical and/or learning disabilities, people with long-term conditions, mental health problems and/or dementia and those living in deprived households.

The Citizen Survey report identifies areas of the City that have the highest percentages of citizens 'struggling to keep up' financially (see table below). Locality based interventions will be focussed in the areas of the highest need.

Area/CDG	Wards	2015	2016	2017	2018	Change since 2015
1	Bulwell, Bulwell Forest	33.2	22.1	28.1	22.6	-10.6
2	Basford, Bestwood	27.9	18.5	26.5	17.6	-10.3
3	Aspley, Bilborough, Leen Valley	33.9	28.3	24.2	27.3	-6.6
4	Arboretum, Dunkirk and Lenton, Radford and Park	26.6	17.3	20.7	18.2	-8.4
5	Berridge, Sherwood	26.0	19.5	24.6	21.6	-5.0
6	Dales, Mapperley, St Ann's	29.0	17.2	30.1	27.5	-1.5
7	Wollaton East & Lenton Abbey, Wollaton West	12.5	20.3	16.7	10.1	-2.4
8	Bridge, Clifton North, Clifton South	22.3	20.1	17.3	15.3	-7.0

*Percentages of citizens 'struggling to keep up' financially*

Cohorts especially negatively affected by financial vulnerability include:

- Citizens with mental health issues
- Families
- Citizens with physical disabilities, sensory disability, learning disabilities and/or chronic illness
- Refugees and asylum seekers
- Elderly citizens
- Citizens with drug and alcohol misuse issues
- Young people
- Care leavers
- Citizens with experience of intimate partner abuse
- Job seekers and/or citizens in work and on low pay/in insecure employment
- Users of health and social care services
- Ex-offenders

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments	Update March 2019
			16/17	17/18	18/19	19/20			
<b>Theme 1: Services will work better together through the continued integration of health and social care that is designed around the citizen, personalised and coordinated in collaboration with individuals, carers and families.</b>									
Implementation and development of a Making Every Contact Count (MECC) programme across partner organisations to enable identification, brief advice and referral (inc. healthy lifestyles and self-care).	Agree strategy and identify named link workers in sectors outside of health and social care such as fire and rescue, police, third sector organisations including VAPN and CYPN and develop processes to incorporate self-care actions into care planning.  Resources identified and in place.  Training delivered to relevant staff and programme begins.	Strategy in place and increased involvement from relevant agencies in multi-disciplinary team process.	✓ G					MECC included in STP workforce development enabling workstream delivery plans.  STP footprint MECC delivery plan under development. Anticipated sign off during Q2 18/19.	Need to establish new lead and update
		Delivery plan signed-off.		✓ A					
		Increase in number of contacts to lifestyles services from agencies identified.			✓	✓			
Multi-disciplinary teams will include mental health support.	Development of training programme for identified staff.  Implementation of support	Citizens experience well-coordinated care from a team who are aware of each other's interventions.	✓ G				CCG Ciara Stuart	Primary Care Mental Health Service was decommissioned following a decision of the HWBSC in February 2019.  A review of all Primary Care Mental Health Services is underway and will be complete by September 19.  PCNs and City ICP will provide a new opportunity to integrate physical and mental health. Mental Health focused PCN meeting scheduled; this will task each PCN will reviewing the need in their area and identifying service development	20-25% of all IAPT referrals in Greater Nottingham are people with a LTC, and this is growing month on month.
		Citizens only tell their story once.		✓ G	✓	✓			
		Care plan will include actions for physical and mental health where appropriate.	✓ G	✓ G	✓	✓			

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							<p>opportunities.</p> <p>Link worker model which will be funded via the PCN DES will include a mental health element. Joint work being undertaken across health and social care to develop a model with PCNs.</p> <p>LTC Psychological therapies pilot has concluded. Access for LTC patients is now available via normal IAPT pathways.</p>		
Continue to implement fully integrated reablement and urgent non- elective H&S care services to enable citizens to be as independent as possible.	A reablement service offering the right level of care support and appropriate clinical interventions is accessible to citizens when they need it.	70% of citizens will increase their (activities of daily living) ADL outcome measure score on exit from the service.	✓ G				Yet to agree a standard care plan to roll out, however MH is part of the MDT core team so will be considered in the care planning process	As above, the Transforming Homecare group that report in to the Home First Group are undertaking route cause analysis. This will inform recommended actions that are required to fully align the Reablement Teams. The Transforming Home Care Group will take forward these actions as short, mid and long-term work-streams.	
	Teams will be relocated with joint operational processes in place.	All 'supported' transfers of care from NUH will access reablement (unless there is a recorded reason for exclusion).	✓ G	✓ G	✓	✓			
	Access to the service will be through the community triage hub only to ensure appropriate utilisation of the service.	Alliance agreement in place to support service delivery through the Joint venture.	✓ A						

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Children's Public Health and Early Help Integration for 0-19 year olds.	Development of an Integrated service specification.	The functions of the Health Visiting Service, Family Nurse Partnership, School Nursing Services, Breastfeeding Peer Supporters, the Children's Nutrition Team and the Early Help Service have been incorporated into integrated teams.	✓ G				NCC Helene Denness  Chris Wallbanks	The milestones have been met and a preferred provider for the Children's Public Health Service has been appointed. This new service will commence in April as planned. PH services listed have been integrated within the contract awarded, BUT, the integration with our Early Help Service will evolve over the next 2 years. This process will be overseen and Governed by a Joint Executive Group.	The integration process is well underway with 4 work streams established to progress key elements of the Transformation Plan. These include 'Places', to progress the co-location of staff within the 8 CDGs; 'Practice', to progress more consistent and integrated ways of working; 'People', to build on the joint training programme and 'Performance', to establish a shared outcomes framework and indicator set
	Pathway of services and interventions agreed with partners.				✓				
	Procurement of integrated service by April 2018.				✓				
	Delivery of integrated service.				✓	✓			
<b>Theme 2: Individuals and groups will have confidence to make healthy life choices and access services at the right time to benefit their health and wellbeing.</b>									
Rollout of the self-care approach across the city based on the model and learning from the Bulwell & Bulwell Forest Self-Care Pilot.	Complete evaluation of pilot to inform roll-out.	Evaluation report and recommendations published	✓ G				CCG/ICS  Natalie Dunn  Ciara Suart	Evaluation completed mid 2016. Social prescribing now rolled out citywide. Changes made to model – moved from telephoned based signposting service to face-to-face health coaching. Patient activation measure licences (PAM) being released from NHSE Feb18 to enable more quantitative evaluation as well as case studies. Self-Care directory incorporated into LION. Self-care planning tool for lion to go live summer 2018 (enable users to develop individual self-care plans)  Currently targeting COPD patients linked in with community led support hubs	Investment in Link Worker model via the Primary Care Network DES. Work taking place across health, social care and the voluntary sector to identify a model for Nottingham City.  Review of current social prescribing service has been completed and will inform wider pathway work  CCG review of 'Self Help Nottingham' underway  Community asset mapping at PCN level underway.
	Establish strategy for city-wide roll-out defining which of the following elements will be used and where: • Social Prescribing • Community Navigators • Web-based Self-Care Directory • Self-Care hubs to access directory • Community clinics  Agreement and sign-up of partners to rollout	Strategy agreed absorbed into STP priority 1.		✓ G					
		Delivery plan in place – roll out completed.		✓ G					
		Expand to Greater Nottingham self-care model.			✓	✓			
		Increase use of social prescribing in targeted areas, increase in use of self-care hubs and directory			✓	✓			



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	plan Implementation	Implement Self-assessment tool (online or app) available to enable citizens to identify areas of their lifestyle that could benefit from adopting self-care practices.			✓			(Linda Sellers). Promoting through via LION.	Self-care app for COPD being rolled out across the City
Deliver an annual Be Self-Care Aware campaign across Nottingham City to promote the national Self-Care week.	Awareness raising and information materials agreed and produced in accessible formats.	Increased citizen awareness and understanding of self-care.	✓ G	✓ G	✓	✓	CCG/ICS Natalie Dunn	2016- Partnership with LAEO – Notts TV presence and leaflets	ICS Self Care Planning Group established to coordinate 2018 activities. Support included: •Shared events calendar •Helping organisations advertise self-care events •Social media campaign •Promotion of LION •Stakeholder event  The first City specific Task & Finish group for social prescribing took place in April '19 and a follow up is scheduled for 8/5/19 to further review current services and explore future referral pathways, reporting mechanisms, structure and governance.
	Calendar of community events established to provide information, advice and support and encourage self-care. Link with other campaigns throughout year and incorporate SC messages	self-care is contributing to citizens leading a healthier lifestyle.  Self-care is contributing to citizens managing long term conditions.			✓ G	✓	✓	Ciara Stuart	
Provision of an up-to-date web based directory of activity that is the "citizen	Web based directory is developed which is accessible including printed versions, audio, translated, easy read etc.	Web based directory in place and accessed regularly.	✓	✓	✓	✓	NCC Karla Banfield	askLiON is being embedded in to the Community Led Pathway (better lives, better outcomes) and will be used by the workforce to connect citizens to activities and services within their locality. A wellbeing	

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hub”.		The number of unique hits increase year-on-year.	Establish baseline (Mar17)	Target				wheel is being developed to help citizens, carers and the workforce access the information easily on askLiON and develop a person centred care plan that includes community connections alongside more traditional services and activities. askLiON is currently undergoing a refresh for the look and feel. The what's on facility is currently being developed so that users can access activities more easily.		
				10k	20k	30k				
				Actual						
				41k G	61k G					
Encourage providers, citizens and workforce to populate, rate and use the online directory.	Use of Google analytics will show usage by citizens from different demographic groups establishing equitable access.	700 adult social care providers are signed up to the directory by 19/20	Establish baseline	Target				These targets are no longer representative of the directory. Work has been happening to include more diverse and interesting content and ensure that the site is more engaging for the user. Therefore, the numbers look different.  In total there are 2,328 services on the site.		
				500	600	700				
				Actual						
	500 G	600 G								
	Target									
	500 health care providers are signed up to the directory by 19/20	The majority of providers will be registered within 2 years.		500 health care providers are signed up to the directory by 19/20	300	400	500			
					Actual					
					303 G	463 G				
	Target									
800 number of other providers of services signed up to directory by 19/20	Additional providers will come in to the market but there will be some net movement.	800 number of other providers of services signed up to directory by 19/20	600	700	800					
			Actual							
			1600 G	1363 G						
Target										
Provide accurate and up to date information to enable citizens to self-manage a range of	Establishment and promotion of the directory	Percentage of citizens stating that as a result of the information they were empowered to manage their situation better by 19/20.	Establish Baseline	Target				Establishing the baseline, new survey will be sent to measure the differences.		
				Actual						
Percentage of			Target							

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needs and empowering them with healthy choices.		providers reporting high level of satisfaction of services							
		Percentage of the workforce reporting that LION offered up to date, and satisfactory advice to citizens.							
Establish Nottingham Health & Care Point (NCHP - an integrated citizen triage function to support access to appropriate services).	A metric is developed and piloted that identifies and records service 'hand-offs' (callers being transferred between services).	% of calls answered	✓ G	✓ G			NCC Gemma Poulter	New telephone number and H&SC advisors at NCHP– went live Jan17. Handed over to NCC mid-2017 and no complaints received since January 2017. Service receiving compliments. Bulk of calls received from professionals in partner agencies asking for telephone numbers for voluntary sector organisations	Fully integrated “community front door” has been fully operational for over 18 months.
		Citizens only need to describe the issue once and receive the right support at the right time having their needs met at first contact							
Expand the use of assistive technology to support proactive care.	Increase in referrals for assistive technology services for priority groups:- <ul style="list-style-type: none"> <li>To prevent a hospital admission / support a timely discharge;</li> <li>To prevent / delay residential care admissions;</li> <li>Adults with long term conditions;</li> <li>Adults with dementia;</li> <li>Adults with learning</li> </ul>	There is a sustained increase in the number of citizens who have received support through AT to live independently.	Target				NCC/ CCG Clare Gilbert	Due to budgetary pressures 2018 onwards focus to shift to prioritise citizens in receipt of SC package/services to continue to be supported through services. Citizens not in receipt of such services will need to self-fund to receive the service. This aligns provision with other LAs.	Use of Assistive Technology on a routine basis to help maximise independence & support comprehensive Care Act assessments & reviews in place in Adult Social Care. Additionally, pilot underway of use of new technological solutions to enable citizens with age related frailty & cognitive difficulties to mitigate some of the risks associated with living independently in their own homes.
		There is an increase in the satisfaction ratings from citizens and their carers who use assistive technology.	8071	9571	11071	12571			
			Actual						
			8300	9677	10216 (Q1)				
			Target						
			85%	87%	89%	90%			
			Actual						
			91%	93%	92%				

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	<p>disabilities.</p> <ul style="list-style-type: none"> <li>Disabled young people</li> </ul> <p>High levels of user/carer satisfaction evidenced by evaluation.</p>							There has been continued growth in the number of citizens supported and reporting they are satisfied with the service. 7,300 citizens currently have equipment with a further 3,600 having been supported. This is partly due to the growth in citizens self-funding equipment and service where not meeting the funded service eligibility.	
<b>Theme 3: Citizens will have knowledge of opportunities to live healthy lives and of services available within communities</b>									
Production of joined-up communications with Nottingham City CCG and the VCS via VAPN and CYPN on the integrated care agenda		Successful delivery of shared messages through local channels.	✓ G	✓ G	✓	✓	NCC James Blount	<p>Being done at STP level. Official comms protocol drawn up and agreed to ensure consistent messages from partners. Monthly meeting to manage this. VCS not yet involved.</p> <p>E.g. recent winter pressures campaign</p>	
Promote campaigns on Healthy Lifestyles and Mental Wellbeing.	Delivery of campaigns to give citizens knowledge and tools to make the right decisions to have a healthy culture.	Successful delivery of campaigns through local channels	✓ G	✓ G	✓	✓		National campaigns and local activity aligned to relevant HWS areas. E.g. Time to Talk, Mental Health Weeks, Sexual Health Campaigns,	
Clear and consistent messages.	Agree key messages and key lines-to-take with the Health and Wellbeing Board	Clear, signed-off agreed messages on all aspects of health and wellbeing	✓ G	✓ G	✓	✓		Monthly HWB e-newsletter with over 5.5k subscribers	

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	Key spokespeople identified to speak on topics related to health and wellbeing.	Spokespeople identified	✓ G	✓ G	✓	✓		Clearly identified designated spokespeople in STP comms protocol	
Signposting to relevant help, advice and support.	Ensure there is clear information on public website and through leaflets and social media including in easy read formats.	Easy access to information for children, adults and older people	✓ G	✓ G	✓	✓		Social media activity e.g. 'My Nottingham' followed by over 100k people on Twitter	
Communities will work together to challenge stigma around mental health, disability and other protected characteristics.	Participation in national campaigns and initiatives such as <i>Time to Change</i> .	Time to Change (TTC) campaign takes place on an annual basis	✓ G	✓ G	✓	✓	NCC Equalities Team	Organisational TTC pledge signed by Cllr Norris to reduce MH stigma. NCC secured funding to become regional hub for TTC.	
	Equalities team to lead on 3 priority groups (BME, disabled and LGBT) targeted in communities.	HWB members support weeks of action led by equalities team.	✓ G	✓ G	✓	✓			LGBT - Supporting the CCG to carry out research around Mental Health within the LGBT community of Nottingham. International Day against Homophobia, biphobia and transphobia community event. Partnership with Notts County football Club to eradicate homophobia, biphobia and transphobia with sport. LGBT external Consultative and Scrutiny Board.
								Disability - Milestones as follows: Disability Involvement Group meets quarterly; Consultation with representatives from local disability groups about NCC policies and developments;	

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								Celebration of Disability History Month.	
Communities will work together to develop a healthy, inclusive culture that is adapting to the needs of different citizens.	Nottingham works towards identifying opportunities where actions will also contribute to Dementia Friendly, Age Friendly, Autism Friendly etc status	Nottingham develops a reputation as a healthy, inclusive community	✓ A	✓ A	✓	✓	NCC Sharan Jones/ Helene Denness	<ul style="list-style-type: none"> <li>➤ Nottingham holds WHO Age Friendly status.</li> <li>➤ An annual Ageing Well Day is held in the Old Market Square.</li> <li>➤ 'Age Friendly' monthly bulletin via 'Stayconnected' with a reach of &gt;5k citizens</li> <li>➤ 'Take a Seat' is available at over 300 locations across the city.</li> <li>➤ National Autism Friendly status cost requirement cannot be met, however, local autism friendly initiatives such as co-production/social movement and champion models being aligned to new Autism strategy.</li> <li>➤ Nottingham City Council is working towards Dementia Friendly City status.</li> <li>➤ The city's Cultural Partnership has prioritised health and wellbeing and a sub-group has been formed.</li> <li>➤ A loneliness forum is being held to explore how arts, culture and creative activities can increase social wellbeing.</li> </ul>	
	Nottingham runs annual Michael Varnam awards to recognise and encourage community based empowerment and change		✓ G	✓ G	✓	✓			
	Establish Dementia Friendly City Status by 2020					✓			
<b>Theme 4: We will reduce the harmful effect of debt and financial difficulty on health and wellbeing</b>									
Develop a Financial Resilience Strategy and Action Plan	Identify key stakeholders including, NCC, CCG and VCS representatives, to be part of the group to		✓ G	✓ A	✓ A	✓	NCC Peter Morley	An action plan has been established and is overseen by Nottingham's multi-agency Financial Resilience Partnership.	Recent work to review the commissioning of advice services for people facing financial difficulty has again highlighted

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	drive the creation of the strategy	There will be a coherent and joined up strategy and action plan in place to improve financial resilience in Nottingham City. This will have been signed off by and be governed via the Health and Wellbeing Board.						opportunities to strengthen the City's response to tackle financial difficulty and over-indebtedness.  The Council is exploring the options for a new programme of work to make sure that key actions to help reduce poverty and financial difficulty are delivered. The participation of partner organisations (across sectors) able to have an impact in reducing financial difficulty is to be sought as part of this work.	
	Commitment and resources secured to progress the development of the plan		✓ G	✓ A	✓ A				
	Priorities for action identified with SMART actions for implementation		✓ G	✓ G	✓ G				
	Partners signed up to plan. Strategy and plan are dynamic and responsive to priority needs and issues arising from communities and the local financial resilience groups		✓ G	✓ A	✓ A	✓			
Implement a shared approach to accessing and assessing for financial vulnerability for advice services in Nottingham.	Develop shared assessment approach with providers	Citizens and professionals report that they know how to access financial resilience services across the City and that there is a consistent approach from services to assessing and dealing with citizens' need.	✓ G	✓ G	✓ G		Workshops held around 'asking the right questions', 'actioning the right triage', 'identification of wider issues', 'appropriate assessment and signposting'  Some of the previously secured Transformation Challenge Funding will now be used to transform services to mitigate the impact of funding cuts.  Analysis will be undertaken between March and June 2018 to understand if the shared telephone number is still viable in light of funding reductions	New approaches to allow for shared access arrangements and the provision of a clearer 'front door' to advice services are being considered through a commissioning review currently in progress. The aims of this work are to ensure that more people experiencing (or at risk of) financial difficulty are able to access assistance and that more people receive support sooner before their problems worsen. Plans for a new approach are expected by Autumn 2019 for implementation	
	Roll out shared assessment methodology across advice services in Nottingham		✓ G	✓ G	✓ G				
	All providers using shared assessment process principles standardised quality, processes and positive outcomes for citizens across advice services in Nottingham		✓ G	✓ A	✓ A				
	Analysis work to scope the feasibility,		✓ R	✓ R	✓ A				

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			16/17	17/18	18/19	19/20			
	practicality , potential benefits and timescales of implementing a shared telephone number and access arrangements for advice services in Nottingham.							from Spring 2020	
Introduce new approaches to help prevent or intervene sooner against financial difficulty	Develop and agree proposals to use Transformation Challenge Fund and reinvestment monies to reduce the occurrence and/or severity of financial difficulty. Examples (to be agreed) include: <ul style="list-style-type: none"> <li>• Training for frontline staff (e.g. from health services, social care, support for families and VCS) to aid earlier detection and support</li> <li>• Preventative courses or other advice / information for citizens at risk</li> <li>• Locating advisors within other services including VCS</li> </ul>	Evaluation indicates that people have been helped to avoid the occurrence or escalation of financial difficulty through access to preventative advice and support	✓ R	✓ R	✓ A		To be funded via Transformation Challenge Award – being re-evaluated considering the current financial situation.	Activities to intervene to prevent financial difficulty are being considered for inclusion in the new programme of work to tackle poverty and financial difficulty in the City	
Develop locality based	Groups will be supported to identify	Increased successful activity in locality		✓ A	✓ A		Consider Area survey to be conducted via Area	There is still evidence of different take up of advice	



Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments	Update March 2019
			16/17	17/18	18/19	19/20			
services e.g advice centres/surgeries in communities to serve specific local needs	opportunities to:	areas with higher need evidence through the annual report.					<p>Teams/Councillors to measure perceived impact.</p> <p>Switch to Universal Credit is currently on pause.</p> <p>Five groups have been set up in locality areas: Aspley, St Ann's, Sneinton, Bulwell, Meadows. Some of these have been incorporated into local employment and skills forums. There is a varying degree of continuing engagement across these groups. There have been challenges in maintaining some of these due to a lack of financial support or administrative resources.</p> <p>Local area committees have had presentations aimed at sharing learning about local financial vulnerability issues.</p> <p>There has been a successful bid for funding from Awards for All (Lottery). This is to carry out detailed interviews with people who have experienced financial difficulty. This is in order to better understand financial and debt problems in localities and to tailor services to better meet need.</p>	services across areas of the City with similar levels of deprivation. A current review of advice services is considering opportunities to address this disparity to encourage fairer access according to need. Plans for a new approach are expected by Autumn 2019 for implementation from Spring 2020.	
	<ul style="list-style-type: none"> <li>• Increase uptake of debt and advice services</li> <li>• Increase citizen income</li> <li>• Increase awareness of affordable credit</li> <li>• Increase financial capability education</li> <li>• Support citizens to save</li> <li>• Mitigate the impact of the switch to Universal Credit</li> <li>• Support the cohorts of citizens most at risk of financial vulnerability.</li> </ul>	Fairer access to assistance in line with need across the City							
<b>Voluntary and Community Sector Actions led by NCVS</b>									
VCS organisations will have an understanding of the self-	Development of regular training to ensure that VCS are kept informed	Via the VAPN and CYPPN organisations will receive up to date information on the agenda and regular	✓ G				NCVS Rebecca Cameron	Self-care & integrated care agendas information regularly shared with the networks.. An IPC specific event is planned for 22/3/18. Organisations	Funding for the networks from the council and CCG came to an end last March so naturally there has been a decrease in the
	Delivery of Training for VCS on MECC and			✓ G	✓	✓			

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care agenda and how they can contribute to the integrated care agenda.	self-care	information to inform contribution to the integration / self-care agenda.					have been encouraged to use LiON for their own services and to find out about local services for their clients. The Nottingham and Nottinghamshire self-care website has also been widely promoted.	health based work we would have completed previously  VAPN and CYPN agenda items on the ICS and social prescribing. NCVS continues to represent the networks at a wide range of ICS meetings. VCS is kept informed via network meetings (bi-monthly) and email updates (fortnightly). Following feedback regarding concerns about the NHS England agenda to push social prescribing out a VCSE position statement on social prescribing has been written following 2 months of consultation. NCVS has undertaken considerable work since September to ensure the VCS has a voice in the development of the ICS and Community Centred Approaches specifically.  NCVS is a core group member participating in the Building Health Partnerships project which is focused on DTOC, specifically people going home with dementia. We are hoping to engage 25 organisations across Greater Notts.	
	Links established to community navigators project and community clinics.			✓ G					
VCS organisations will be aware of where they can find out about local services.	Promotion of the self-care Nottingham website, NCVS database and the proposed Nottingham City Council city wide directory.	VCS organisations are aware of local services and are directing citizens to the appropriate service.	✓	✓ G	✓	✓			
VCS Organisations will refer to local services, such as lifestyles services in partnership with clients.	VCS organisations will work with local services to implement measures to enable them to track the progress of clients referred to other services.	Tracking shows sustained increase in referrals from VCS to local services. Access to these services enables citizens to make positive changes to their lifestyle.		✓ G	✓	✓			

Action	Milestone	Success measure	Year to be achieved and progress RAG rating				Lead	Comments	Update March 2019
			16/17	17/18	18/19	19/20			
								Not aware of who the community navigators are or where the community clinics are based.	