

2015-2016 Joint Commissioning Plan update v2

Swindon Health and Wellbeing Strategy		Joint Commissioning Intentions	Performance data 30.9.2015 (Bold = amber/red)	Progress update and mitigating action
Outcome	Priorities			
<i>Every child and young person in Swindon has a healthy start to life</i>	Improve the mental wellbeing of children and young people	High levels of compliance with all aspects of the core professional social work task	<ul style="list-style-type: none"> Number of children with a child protection plan 213 children Number of children in care - 268 	<u>Children in care</u>
	Reduce risky behaviours (e.g. Smoking, drinking) amongst our children and young people	Good quality interventions, ensuring no delay in reaching decisions about how best to safeguard and promote the welfare of children	<ul style="list-style-type: none"> Number of children in need - 1319 	Focus on providing placement stability through development and implementation of sufficiency strategy.
	Keep all children and young people safe	Ensuring that the right services are reaching the right children and families at the right time including support for Troubled Families	<ul style="list-style-type: none"> Number of children with a second or subsequent child protection plan – 22% (target 10 – 15%) 	Placement team co-locating with fostering team to improve placement searches
	Improve educational attainment of children and young people	High quality care planning, placement, permanence & pathway planning for children in care & care leavers,	<ul style="list-style-type: none"> Percentage of young people look after in a long term placement (long term stability – 66.1% , target over 70% 	Recruitment strategy has resulted in reducing number of agency social workers and managers
	Reduce the number of young people not in education, employment or training	Co-producing good outcomes with our service users and our communities, Commissioning of Healthy Child Programme widening role of health visitor and Family Nurse Partnership.	<ul style="list-style-type: none"> Percentage of children looked after with 3+ placements (short term stability) – 2.24% First time entrance to Youth Justice System 59 against a target of 60 Repeat offenders amongst young people 35.4% Breastfeeding rate 51%, Percentage of pre birth visits, 1 year check and 2 ½ year check completed by health visiting Antenatal visits: 63 (percentage not available so only count provided), 12-month review: 79% (by the age of 15 months), 2-2 ½ year review: 48, 52FTE health visitors recruited 	<u>Children in need and early help</u> The continued upturn in numbers of referrals to children’s social care continues and partner agencies must ensure their staff are applying the threshold criteria effectively and making full use of the Early Help Record & plan Early help task group to be established by LSCB to improve completion rate of early help records by all services and ensure that support is targeted in order to manage demand for Targeted approach in place with training and provision for the most vulnerable 0 – 2 year olds Commissioning for Quality and Innovation (CQUIN) 15/17 to support Transitions.

Swindon Health and Wellbeing Strategy		Joint Commissioning Intentions	Performance data 30.9.2015 (Bold = amber/red)	Progress update and mitigating action
Outcome	Priorities			
<i>Adults and older people in Swindon are living healthier and more independent lives</i>	<p>Strengthen integrated working between health and social care</p> <p>Reduce the number of people suffering from long term conditions through the promotion of healthy lifestyle choices</p> <p>Promote independence and reduce the need for hospital services and long term care</p> <p>Ensure that carers needs are met</p>	<p>Moving towards steady state in terms of our hospital admission rate</p> <p>Focusing on key long term conditions thorough community navigator, advice and information</p> <p>Implementation of the Care Act, befriending and advocacy services</p> <p>Use of assistive technology to help people self-manage their condition</p> <p>Ensure support to carers , flexible support, improved assessment, and local support groups</p> <p>Primary prevention supporting Healthier Lifestyle choices</p>	<ul style="list-style-type: none"> Emergency admission rate increase/decrease (BCF measure) 6,187 against target of 6,169 baseline for 2014/15 Q2 6,386 4 Hour A & E target at 95% less than 95% for Q2 Admitted Patients treated within 18 weeks 91.4%, England average 87.6% Non-Admitted Patients treated within 18 weeks 93.7%, England average 95.0% Admission of older people over the age of 65 to residential and nursing care : BCF/ASCOF 2A(2)115 admissions(11 MH, 1 LD, 103 OP) equating to a rate of 356.75 per 100k. End of year target 371 admissions Admission of younger adults to residential and nursing care: ASCOF 2A(1):4 admissions, (3 MH & 1 PD) equating to a rate of 2.96 per 100k pop.. End of year target 4.45 Effectiveness of reablement services and reducing hospital length of stay BCF: Annual measure, end of year target 94% Percentage of people with a personal budget: ASCOF 1C 83.6% of eligible clients, end of year target 100% Reduction in delayed discharge due to social care: ASCOF 2C(2) Result 7.78 per 100k pop equates to 13 people August, end of year target 3.9 Delayed discharge BCF measure: 407 per 100k population , end of year target 872 	<p><u>Urgent care</u></p> <p>Proof of concept project for the Implementation of a rapid assessment unit with the aim to increase the numbers of people supported in the community, increase the numbers of people streamed to the urgent care centre</p> <p>SUCCESS centre offering additional GP services has halted rise in emergency admission. A&E target remains a challenge.</p> <p>CCG additional investment in Assistive Technology to support and enable more people living with a long term condition to self-manage their symptoms.</p> <p>CCG to focus on people being readmitted to hospital with alcohol related needs and target alcohol liaison team to support.</p> <p>Disease specific pathways to enhance urgent care needs to be delivered in a community setting (Diabetes and Parkinsons)</p> <p><u>Social care</u></p> <p>Additional £15k investment per week into hospital discharge services to reduce delays .</p> <p>Provision of nursing home beds continues and potentially driven up as patients are discharged with a higher level of medical needs. Capacity of domiciliary care remains an issue which has been mitigated through block contracts. Delayed discharge working group in place to improve process and ensure patients are place in the right provision</p> <p>Befriending service and home from</p>

Swindon Health and Wellbeing Strategy		Joint Commissioning Intentions	Performance data 30.9.2015 (Bold = amber/red)	Progress update and mitigating action
Outcome	Priorities			
			<ul style="list-style-type: none"> • August Completion of reviews of service users: Local 42.93% equates to 2264 clients reviewed. Sept target 35.5%, Y/End target 71%. • Social care service users score for quality of life: BCF/ASCOF 1A Client Survey Annual survey14/15 result 18.9 England average 19.1 • Social care users who say they find it easy to get information and advice: ASCOF 3D(1) Annual survey 74.3% ,England average 74.5% • Number of carers assessments completed : NI 135 51% completed, exceeding end of year target 35% • Adult care service users who have the amount of social contact they want: ASCOF 1(1) Annual survey 43.6%, England average 44.8 	<p>hospital commissioned to reduce isolation amongst older people</p> <p>Advice and information website live with over 600 adverts to encourage older people and carers to plan earlier. Online assessment due to go live in December 2015 thereby reducing improving completion rates and reviews.</p> <p>Learning disability service transitioned successfully back to Swindon Borough Council. Need for additional training has been identified for social workers.</p> <p>Development of policies and procedures for personal health budgets progressed by CCG</p>
<i>Improved health outcomes for disadvantaged and vulnerable communities</i>	<p>Ensure access to information and advice that supports choice and control</p> <p>Ensure people from disadvantaged groups receive good quality care for their physical health</p> <p>Local economic and social policies are developed to strive to narrow social inequalities rather than widen them</p> <p>Prevent early death and disease through healthier lifestyle choices, early detection and screening</p>	<p>Reducing the gap in life expectancy between our least and most deprived populations</p> <p>Targeting health promotion, healthy lifestyle and exercise programmes, smoking cessation, improved treatment for those with alcohol and substance misuse issues</p> <p>Increase uptake of immunisation and screening.</p>	<ul style="list-style-type: none"> • Mortality from cardiovascular disease in under 75 year olds • Mortality from cancer in under 75 year olds • Mortality from respiratory illness in under 75 year olds • Suicide Rate • Prevalence of HPV immunisation rate – 95% above target • Percentage of children aged 10/11 classed as obese – 19.6% • Primary DTaP/IPV/Hib: 97.9% • Primary MMR: 97.6% • Booster DTaP/IPV: 90.6% • Booster Hib/MenC: 96.5% • Booster MMR: 94.1% 	<p>Community navigator programme started in May 2015 and 130 patients being offered support by 12 navigators. First formal evaluation January 2016 to establish whether the intervention achieves a reducing in spent by health and social care</p> <p>Increase engagement with people living with Diabetes the most deprived and ethnic communities</p>

Swindon Health and Wellbeing Strategy		Joint Commissioning Intentions	Performance data 30.9.2015 (Bold = amber/red)	Progress update and mitigating action
Outcome	Priorities			
<i>Improved mental health, wellbeing and resilience for all</i>	<p>Develop effective pathways for people with mental health problems</p> <p>Increase the opportunities for people with mental health problems to access support services and community facilities aimed at promoting recovery (e.g. education, debt management, housing, leisure services, health promotion)</p> <p>Promote positive mental health and recognise that mental health is everyone's business</p> <p>Reduce the stigma and discrimination associated with mental ill health</p>	<p>Increasing investment in mental health and reviewing our model of care for learning disability</p> <p>Improved transition services</p> <p>Implement Special Educational Needs reforms, including Local Offer and education, health and care Plan</p> <p>Improve access to mental health services for all children and those children in care and ensure whole family working</p>	<ul style="list-style-type: none"> Emotional wellbeing of looked after children (strength and difficulties questionnaire) annual data CAMHS waiting times: referral to assessment within 4 weeks (G) Education Health and Care plans in place for all new assessments of SEN. Local Offer Website in place. POET survey in place to evaluate impact of SEND reforms. 	<p>Young people's mental health needs assessment completed and strategy drafted. The recommendations and priorities were included in the Mental health Transformation Plan submitted to NHS England in October 2015. Plan approved and funding released which is targeted at Eating disorder, early intervention and support for target groups including looked after children and those who experienced abuse and neglect</p> <p>Complex Case Consultation for CamHs – dates are offered within 4 weeks for consultation from point of request. Professionals with the family are offered a case consultation by the multi-disciplinary team for all children looked after who are referred for a service. This is to enable a speedy response either for fuller mental health assessment or to signpost to a more appropriate service. We have approx. 54 LAC cases open in CAMHS approximately 18% of total caseload.</p> <p><u>Adult mental health</u> Crisis response within 4 hours to GP referrals to Swindon Intensive Services. Great Western Hospital Mental Health Liaison assessment following self-harm. Inter-agency working with CRI</p> <p>Waiting list for dementia diagnosis reduced to 8 weeks</p>
<i>Creation of</i>	Build on the strengths of local communities,	Workforce strategy, responding to the	<ul style="list-style-type: none"> Of the 42 maintained schools in Swindon 	Health and Social care workforce

Swindon Health and Wellbeing Strategy		Joint Commissioning Intentions	Performance data 30.9.2015 (Bold = amber/red)	Progress update and mitigating action
Outcome	Priorities			
<i>sustainable environments in which communities can flourish</i>	<p>including the local voluntary sector, to enhance social cohesion, and promote social inclusion of marginalised groups and individuals.</p> <p>Work with our local communities to develop creating solutions for local issues</p> <p>Ensure that housing and development strategies for new and existing communities identify the health and wellbeing impacts for residents in the short and long term</p> <p>Promote the use of green, open spaces and activities such as walking and cycling</p> <p>Maintain effective public transport and transport networks which ensure access to services and activities and encourage permeability within communities</p>	<p>economic downturn, building sustainable communities</p> <p>Reducing NEETs and increasing the number of young people participating in learning post 16 (in particular children in care and care leavers)</p> <p>Commissioning Strategy for supported housing, review of sheltered housing schemes and placement strategy for children with complex needs and those at risk of sexual exploitation</p>	<p>80% are judged to be Good or Outstanding (excluding 1 new school that has not had an Ofsted Inspection).</p> <ul style="list-style-type: none"> NEET as at June 2015 (Academic Ages of 16, 17 and 18) – 476 (6.4%), previous year 466 (6.3%) 	<p>group focus established through provider forum of Health & Wellbeing Board and Strategic resilience Group.</p> <p>Entry into employment strategy focus on improving access to training and employment for care leavers and young people with learning disabilities</p> <p>Review of supported housing provision in place with identification of which schemes need to be remodelled. Plans drawn up for accommodation for learning disabled young people, first units delayed until September 2016 with further units in 2017</p>