

Aim	Priority	Commitment – what we will actually do to deliver it	Measures of success	Accountable Officer	Deadline for completion	Progress November 2014 including outcome data
<i>Every child and young person in Swindon has a healthy start to life</i> Supporting and developing our young, families and carers to be healthy	Improve the health and wellbeing of children and young people	Implement evidenced based programmes to halt the rise in obesity among children under 11 Refresh Healthy Weight strategy so that evidenced based interventions are implemented	Reduce obesity at age 11 to the same level or less than the average for England, as measured by National Child measurement programme data (NCMP)	Acting Director Public Health (Cherry Jones) Fiona	March 2015	<p>The most recent NCMP data (published in December 2014 for school year 2013/14) shows that:</p> <ul style="list-style-type: none"> -obesity prevalence is down in both reception year and year 6 in Swindon compared with the previous year, with obesity reducing in reception year from 10.2% to 9.5% and from 19.5% to 17.5% in year 6. Neither of these differences is statistically significant. In England over the same period, obesity increased from 9.3% to 9.5% in reception year and from 18.9% to 19.1% in year 6. - the prevalence of overweight increased in Swindon over the past year from 13.5% to 14.7% in reception and 13.4% to 15.5% in year 6; this change is not statistically significant. In England over the same period, overweight was stable at 13.1% in reception year and 14.4% in year 6. - Adding both overweight and obesity together (called 'excess weight') the prevalence of excess weight in Swindon is 24.1% in reception year; 22.5% in England. In year 6 the prevalence was 33.1% for Swindon compared with 33.5% in England. Public health England do not publish tests of significance for excess weight data, however there appears to be no significant difference between the prevalence of excess weight in Swindon and England in reception year and year 6. <p>The Healthy Weight Strategy has been reviewed and adopted by CCG and SBC. The physical activity strategy is being refreshed.</p> <p>There are a range of initiatives in school to support children to eat well and move more, including active travel, healthy school meals national standards, food programmes such as the Food for Life partnership.</p> <p>The Alive 'n' Kicking programme launched July 2014 - open to five to 16-year-olds and gives advice and practical support on diet and physical activity, helping families to achieve and maintain a healthy weight. Both the child and family and adult weight management services were re-commissioned in 2014.</p> <p>A new national programme, commissioned by the DfE, aimed at increasing school meal uptake, is being developed in schools to improve diet. Swindon has been the first area in the country to start this programme with 6 schools signing up for the initial phase; more schools will be recruited if the programme gives positive outcomes.</p>
		Review care pathway and community based services	Reduce paediatric admissions for	Joint Commissioner	November 2014	2 re design Workshops completed with some actions. SUCCESS includes children's clinic which started operationally in October 2014.

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	Reduce the number of young people not in education, training and employment	for families to improve the health of children through JSNA bulleting and workshops	2014/15	Children's Health	March 2015	ED Attendances have increased slightly by 2.8% looking at YTD (Apr – Nov) figures compared with the same period last year (14/15: 9153, 13/14: 8905). Emergency admission rates have increased by 6.6% this year compared to last year (YTD, Apr – Nov), from 2075 in 13/14 to 2212 in 14/15. Strategic resilience Forum agreed task and Finish group to review paediatric support and nursing support for hospital admission avoidance
		Work with Great Western Hospital to implement recommendations in relation to CQC inspection	Implementation of CQC recommendation in relation to GWH,	Designated Nurse CCG		CQC action plan updated November 2014 and presented to LCSB 8.12.2014
	Reduce risky behaviours (e.g. Smoking, drinking) amongst our children and young people	Effective contract management of providers of child and adolescent mental health services with improved access for children in care	Achievement of targets set as part of CAMHs contract and increased access by children in care compared to 2013/14	Joint Commissioners Children's Health	March 2015	Review of services for children in care is underway. An audit of the Complex Case Consultation meetings is complete and an audit of all LAC cases is underway. A performance monitoring system agreed with a data sharing agreement being progressed in order to share LAC data and monitor whether LAC children are seen within 4 weeks.
		Partners to actively engage with unemployed 18-25 year olds, vulnerable families and disabled adults to increase their take up of sustainable employment.	Implement CQC and Ofsted inspection recommendations	Designated Nurse CCG		CQC action plan updated November 2014 and presented to LCSB 8.12.2014
		Partners to actively engage with unemployed 18-25 year olds, vulnerable families and disabled adults to increase their take up of sustainable employment.	Ensure the Employment and Apprenticeship Action Plan is implemented and target of 2349 apprenticeship starts achieved.	Head of Commissioning Economy and Attainment	March 2015	Reduction in Youth Unemployment for 18-24 year Olds. Youth unemployment for the year June 2013 – June 2014 was 5.3% compared to 16% the previous year and the percentage claiming Job Seekers Allowance (JSA) reduced to 3.9% in Sept 2014 compared to 6.7% the previous year. A range of approaches are Now in place to support 18-25 Year olds into employment. Action Plan for 18-25 year olds includes development of employer ambassadors, specific activities for 18 year olds including support from the voluntary sector, development of traineeships and the 'Ready for Work Academy' for those seeking work. Working with Uplands School to develop Supported Internships.
		Maximise the use of the Troubled Families Programme to focus opportunities for Job Centre Plus to improve the economic independence of families by increasing take up of sustainable employment or moving	Number of families where an adult sustains employment for six months	Commissioner Children and Families	March 2015 and quarterly	Target of 370 exceeded with 460 families worked with 31/12.2014. 68% of families successfully achieved one of the payment by result targets and therefore have successfully completed the programme. Swindon now part of early adopted of phase 2

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		closer to work	Number of families where an adult or young person reduces anti social behaviour or youth crime Reach 370 families			
		Track and offer support to young people who are vulnerable including those at risk of NEET, children in care and care leavers, children who are disabled and those at risk of offending to enable them to achieve their educational potential Develop a Pathway to enable routes to employment for Children in Care and Care Leavers which will include opportunities to gain the skills and experience required and progression into Apprenticeships. Develop a learning and development programme for all staff working with Children in Care and Care Leavers to ensure a common understanding of all post 16 learning and training opportunities and routes to work.	Targets related to national and regional NEET indicators By 2015: 100% of 16/17 year olds and 95% of 18 year olds in learning Reaching Participation Age targets for all young people <ul style="list-style-type: none"> 100% of 16/17 year olds in Learning by 2015 95% of 18 year olds in Learning or Work by 2015 Not Knowns < 2% 	Head of Commissioning Economy and Attainment	March 2015	October 2014 figures show that the proportion of 16-17 year-olds (academic ages) in learning activities in Swindon was 89.9% (4597 young people), slightly lower than last year's figures of 88.3%). Official figures show Swindon which is higher than the national average (85%) f. The proportion of 16-17 year-olds (academic ages) in Unknown activities in Swindon is 7.4% (378young people), slightly lower than last year's figures of 7.8% , and this compares to national average of 10.8% The proportion of 16-18 year-olds (academic ages) that is NEET in Swindon is 4.8% (320 young people), lower than last year's figures of 5%, and this compares to national average of 4.6%. This year, the focus is on improving the number of 17 year olds in learning and 18 year olds in learning and work. Action plans have now been finalised. The Action Plan to improve Routes to Employment for children in care and care leavers is now in place. Staff workshops have been planned in Jaunary and February 2014 to ensure teams have a better understanding of their role and to raise awareness of post 16 learning and training opporutnieis.
		Commence development of preventing re-offending – focusing on early	Reduction in first time entrants to the Youth justice System who	Head of Children and Families	March 2015	The local target is to maintain low numbers of FTEs to less than 44 per quarter. Against this figure there were 59 First Time Entrants, i.e. well below target. (Including 9 Youth Conditional Cautions). In addition to

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		<p>interventions and development of the integrated offender management scheme</p> <p>Work with Criminal Justice Partners to increase the use of Restorative Justice, in YOT, Neighbourhood Justice Panels, Police Community Resolutions and new prevention disposals (Cautions and Conditional Cautions)</p>	<p>are at risk if offending or involvement in anti-social behaviour. 2013/14 there were 174 FTEs.</p> <p>Reduction in the number of young people re-offending; to be 2.5 percentage points better than the National Average of (35%). Outturn 2013/14 was 34%</p> <p>Reduction in the number of further offences committed by those that do go on to re-offend; to be better than the National average of 2.87 offences. Outturn 2013/14 was 0.95.</p> <p>Reduction in the number of young people entering custody; of all young people sentenced, less than 5% go into custody. Outturn 2013/14 was 3.0%.</p> <p>Increase in victim engagement with Restorative Justice in youth related crime and a high satisfaction rate for those affected by crime who have engaged in</p>	Service Manager YOT		<p>this 1st and 2nd quarter's stats include 58 Youth Cautions and 85 Community Resolutions.</p> <p>The reduction is due to increased use of community resolutions and proactive work by yot with young people. Introduction within Yot of 'rapid English' programme to divert young people and increase level of qualifications in English</p> <p>Re-offending number available annually</p>

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			Restorative Justice YOT engagement target is to be > 25% engagement. Outturn for 2013/14 was 56%.			
		Ensure we have the appropriate support for young people at risk of sexual exploitation with plans for identification, protection and support in place	Completion of audit and implementation plan	Head of Safeguarding	March 2015	<p>Wiltshire Police are piloting a process whereby subject to the following criteria, young people missing or absent will be mentioned at the Swindon Multi Agency Risk Panel meetings.</p> <ul style="list-style-type: none"> Each month identify children who have been missing / absent for three or more occasions within 90 days. Review and update missing persons from previous month to report on further episodes. <p>The identity of the missing children will be circulated on the MARP agenda a week prior to the meeting which will enable professionals to review and clarify any concerns. MARP will be evaluated in 2014 to assure partners of effectiveness and quality of care planning for young people.</p> <p>Six warrants were executed across Wiltshire and all six were resulted in arrests for making, possessing and distributing indecent images of children. All six had no previous convictions of sexual offences and all have been released on bail. Two children have been safeguarded. Three offenders were from the arrested from the Swindon area. Extensive media coverage on social media and through various press outlets reinforced the positive outcomes in this area.</p> <p>A literature review into CSE was completed in November 2014 and</p>
		Work holistically with families identified as meeting the Troubled Families criteria using evidence informed practice to reach 370 'Troubled Families' so that we strengthen families and protect children	<p>Cost benefit analysis across all troubled families demonstrates savings achieved</p> <p>Local and national evaluation findings demonstrate increased achievement of outcomes and workforce reform.</p>	Commissioner Children and Families	March 2015	<p>Target of 370 exceeded with 384 families worked with 31/10.2014. 65% of families successfully achieved one of the payment by result targets and therefore have successfully completed the programme. Swindon now part of early adopted of phase 2</p> <p>National outcomes tool being completed with results in 2015</p>

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	Work with schools, early years and colleges to narrow the gap in attainment in young people receiving free school meals, children in care and their peers	<p>Join up services for children and families including linking children's centres and increasing the number of family nurses (Family Nurse Partnership) and Health Visitors</p> <p>Midwives, health visitors, children's centres and early years providers share information to identify families that need most support and promote benefits of healthy lifestyles and breastfeeding which support attachment and reduce the risk of obesity</p> <p>Work with children's centres to improve the numbers of vulnerable families registered and attending</p> <p>Implementation of findings from service re-design workshops on paediatric services</p>	<p>Number of Family Nurses in post on 31st March</p> <p>Family Nurse Partnership achieves 90% of Family Nurse Partnership specific targets</p> <p>Skilled and competent Health Visiting Workforce increases by 50%</p> <p>Progress against measures in Healthy Child Programme implementation plan</p> <p>Number of EHRP completed by children's centres and % involvement in social care plans</p>	Joint Commissioner Children' Health/programme Manager Public health	<p>March 2015</p> <p>March 2015</p>	<p>Continued positive delivery of family Nurse Partnership. The Family Nurse Partnership, (FNP) has been established for 4 years. 220 clients have been enrolled on the Programme, and the FNP is currently working with 94 families. 33 first time mothers enrolled in 2012/13 and 83 young mothers graduated because their child had reached their second birthday. The FNP is having a significant impact on protecting children and improving outcomes for children in the safeguarding arena. The therapeutic relationship between family and nurse provides the foundation for acquiring information and knowledge to inform assessment of risks and protective factors within families. The nurses are able to identify and act on concerns early. The team have strong links with social care, other partners and the named nurse for child protection which promotes a culture of information sharing and opportunities for discussing concerns, seeking advice and sharing good practice. The majority of FNP outcomes are achieved in line or better than national average</p> <p>Health visiting recruitment in place with 48FTE health visitors in post in October 2014</p> <p>The Early Help Record will always lead to a plan being created for the child. The plan may be delivered in a number of ways depending on its complexity. In quarter 2 2014/15 there were 61 plans completed. This compares to 65 initial TACs in the same period in the previous year. There were 93 plans completed in quarter 1 of 2014/15. 159 reviews were completed in quarter 2 2014/15, compared with 217 in quarter 1. There will always be a lull in early help activity in quarter 2 due to the school summer holidays</p> <p>The percentage of vulnerable children in Children's centres has improved. The main improvement to 60% has been within the Super cluster.</p> <p>Paediatric admissions have not reduced in quarter 1 and 2. This is monitored to determine impact of SUCCESS clinic. There has been a large increase 59% of young people admitted to hospital due to self harm. This could be a recording issue and is being investigated</p>

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			<p>% of vulnerable families attending children's centres from reach area</p> <p>Reduction in paediatric admissions for 2013/14</p>			
		<p>Make the most of appropriate technology to provide information where it is most needed and in a way which allows our communities and partners to contribute to and support the key messages of parenting and healthy lifestyles through inclusive advice services and community support</p> <p>Implement advice and information service directory in place for local offer</p> <p>Self assessment for adult social care linked to My Care My Support</p> <p>Financial self assessment rules simplified and implemented in line with Care Bill requirements</p>	<p>Increase in self sustaining community based groups</p> <p>Advice and information directory in place</p> <p>Self assessment in place</p>	<p>Acting Director Public Health/ Head of Commissioning Children & Adults</p> <p>Joint Commissioner Children's Health</p> <p>Head of Commissioning Children and Adults</p>	<p>November 2014</p> <p>September 2014</p> <p>February 2015</p>	<p>My Care My Support went live in May 2014 with the Advice and Information service live at Sanford House from July 2014. The Local offer of advice and information for families went live online in September 2014.</p> <p>A self assessment tool for adult social care service users has been purchased and the project team established in October 2014.</p> <p>Financial rules have been tested and are due to be finalised by end of December 2014</p>
	Keep all children and young people safe	Provide statutory services for vulnerable families,	Child Protection systems are assessed as good by	Head of Children and Families	March 2015	Ofsted assessment of child protection services was 'required improvement' in May 2014.

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		<p>children and young people so that they provide help early and prevent crises</p> <p>Delivery of Strengthening Families Programme, Phase Two</p> <p>Reduce overall operating costs in Children and Families for 2015/16</p> <ul style="list-style-type: none"> Transform approaches to Care and Placements Transform ICS/ICT ensuring business processes are efficient and effective Restructure services to increase resilience and/or reduce costs 	<p>Ofsted</p> <p>Ofsted and CQC action plans fully implemented</p> <p>All service KPIs are performing at a level comparable to national/statistical neighbours</p>			<p>Action plans for Ofsted and CQC have been agreed and are monitored through LSCB and a task and finish group within health, Children and Adult Overview and scrutiny</p> <p>Strengthening Families programme has commenced and work streams implemented including restructure of social work teams which will be completed by January 2015</p> <p>60% increase in referrals to children's social care between April – November 2014 compared to the same period in the previous year. Increase in children in need. 87% of referrals progress to assessment. 29% re-referral rate. 204 children with a child protection plan in November 2014, reduced from 241 in August 241. 1</p>
		Implementation of safeguarding requirements across all providers from Ofsted and CQC inspections	All providers are compliant in meeting standards and expectations set by CQC and Ofsted	Head of Children & Families and Head of Commissioning Children & Adults	April 2015	Action plans for Ofsted and CQC have been agreed and are monitored through LSCB and a task and finish group within health, Children and Adult Overview and scrutiny
		<p>Review and re-commission our placements from independent providers of residential and foster care to achieve increased value for money, increased choice and improved outcomes for looked after children</p> <ul style="list-style-type: none"> Build on the foster care training, recruitment and support programme. 	<ul style="list-style-type: none"> Implement Actions identified in Children in Care and Care Leavers Strategy Delivery Plan, to Corporate Parenting Board July 2014 	Head of Children and families and Community Health	March 2015	<p>Action plan with workshops for commissioners and delivery of children's placements commenced in July and October 2014. Further training for social work staff in completed in October 2014. Actions allocated to improve process</p> <p>Foster carer recruitment programme</p> <p>Therapeutic carers</p> <p>240 children in care as of November 2014, 78% have been in a stable long term placement</p>

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		<ul style="list-style-type: none"> Develop therapeutic and remand foster care in line with the Care and Placements workstream of the Strengthening Families programme Provide joint leadership through education, health and care professionals to develop an effective response to the need for transformed provision for 0-25 year olds with learning difficulties and disabilities (<i>see 2.1 above</i>) Review placements and contracts for placements Continue to be part of SW consortium of foster care placements 		Head of Education Strategic Commissioner Children & Families		<p>SEND programme established. Milestones for September 2014 achieved. EHCP format agreed. New programme structure agreed</p> <p>Review of placements contracts completed, provider meetings held October 2014</p>
		<p>Train staff within the children's workforce to help families to develop their ability and skills in parenting so children are protected and live in stable families.</p> <p>Ensure our workforce is prepared and trained to deliver a child centred approach which starts with 'what people can do for themselves, what they need help with and what</p>	<p>Children's Workforce Strategy reviewed by Children and Families Senior Management Team (SMT) in April 2014 and agreed priorities going forward for 14- 15 based on CQC and Ofsted recommendations.</p> <p>Workforce Strategy Delivery Plan based on these to be completed June 14.</p>	Principal Officer Health and Wellbeing (Louise Campion)	Annual Report to Workforce Development Board and Quality and Performance Group June 2014	<p>Workforce development programme implemented</p> <p>Workforce development is proceeding according to the plan. There is a full programme published on the SBC intranet and courses for the wider workforce are published on Swindonschoolsonline. We also send information directly to partners when relevant. The aspects of the plan linked to Ofsted and CQC recommendations are in progress.</p>

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		choices they want to make in the way that they receive help'. We recognise that our workforce is critical to this success and will actively encourage and support their development. We will deliver a range of core training as identified through the Children's Workforce Development Plan.	Delivery plan will be monitored on a quarterly basis by SMT.			
	Children, young people and their families are active and empowered through the delivery of the education, health and care plan	<p>Provide joint leadership through education, health and care professionals to develop an effective response to the need for transformed provision for 0-25 year olds with learning difficulties and disabilities</p> <p>Review and improve transition arrangements for young people with a disability/learning disability</p>	<ul style="list-style-type: none"> By 2014, combined Education, Health and Care Plan in place for all students meeting the requirements of the legislation Clear and accessible offer to parents in place by 2015 Clear mechanism in place to ensure that parents shape the offer and drive the plan Meet 100% of SEN statements within statutory timeframes. Through commissioning meet the needs of all young people through effective placements delivered on time and within budget 	Head of Education Services	March 2015	<p>SEND programme established. Milestones for September 2014 achieved. EHCP format agreed. New programme structure agreed including overarching strategic board and 3 work streams covering Organisational and cultural change, Participation and Engagement and Deliverables.</p> <p>SEND Champions are embedding change throughout the workforce.</p> <p>Transition programme for children from statement to EHCP operational.</p> <p>Local offer in place and process agreed for updating this lead by parents and young people.</p> <p>Research is underway to strengthen understanding of the trends in demand for specialist provision for children with SEND, potential future trajectory and associated cost implications.</p> <p>Targeted Workforce development plans in place including a series of workshops with post 16 providers.</p> <p>Joint steering group with Parent Advisory group established September 2014</p>

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			<ul style="list-style-type: none"> Clear transition process in place 			
Adults and older people in Swindon are living healthier and more independent lives	Strengthen integrated working between health and social care Ensure that carers needs are met	<p>Implement adult change programme across all work streams and meet agreed milestones</p> <p>Continue to promote carers breaks through work with carers centre, training and social care</p> <p>Establish and implement Learning Disability workstream so that reviews for people in residential care are completed and cohort is identified who could be supported locally</p>	<p>Achieve savings in adult social care of for 2014/15 by reducing the cost and number of ongoing care packages for older people, those with mental illness and those with physical/learning disability</p> <p>Increase in take up of short term breaks by carers</p> <p>Ensure carers are offered an assessment by social care staff as part of the service user assessment and/or review</p> <p>Complete all agreed reviews for people with a learning disability in residential placements by October 2014</p>	Head of Commissioning Children and Adults	March 2015	<p>Adult social care underspend of £850k reported in October 2014. Transition work stream in place but review completion slower than anticipated.</p> <p>Exception panel for complex cases and residential care admission reinstated November 2014 Redsearch commissioned into LD and older people November 2014</p> <p>Workshop held with carers and carers Steering Group established to lead implementation of care act. Annual atarget is 30% of carer reviews completed. End of September 2014 result was 13%</p> <p>There has been delay in completion of all relevant reviews and these will not be completed by end of October but now end of march 2015. SEQOL has completed 181 LD reviews as of end of September 2014 out of approximately 500 service users</p>
	More people feel in control at times of crisis, are protected from abuse and family breakdown and more resilient and more able to regain their independence	<p>Develop the capacity and confidence of our workforce so that it seeks at the outset to build on individual resilience and skills by working with people to find solutions</p> <p>Staff across the adults and</p>	Increase in the number of people trained in coaching, brief intervention and motivational interviewing	Work stream Adult advice and information and work force development	January 2015	<p>Training has focused on personalisation with 2 sessions and a further 3 sessions for AWP care Act training with a further 3 sessions.</p> <p>Under the new definition 71% ad a personal budget end of September 2014 but still very low figures for AWP with 16%</p>

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		<p>health work force are trained and skilled in developing person centred plans and promoting self care and prevention</p> <p>Develop measurable outcome based support plans with care providers and develop independent support planning</p> <p>Implement upgrade of SWIFT and self assessment on line</p>	<p>Increase in the number of adults with a personal budget to 70%</p> <p>Upgrade completed</p>			<p>SWIFT upgrade to version 29 completed. Upgrade to AIS started with establishment of project team. Full project team in place January 2015</p>
		<p>Implement recommendations form Francis report, Winterbourne View</p> <p>Ensure all providers meet safeguarding standards set by CQC and LSAB and that all safeguarding alerts are investigated and dealt with promptly</p> <p>Implement safeguarding data base as part of case management system upgrade</p> <p>Implement recommendations from safeguarding audit</p>	<p>Providers are compliant and patients are safe</p> <p>Database implemented</p> <p>Audit recommendations implemented</p>	<p>Executive Nurse CCG</p> <p>Strategic Commissioner Adults</p>	<p>July 2014</p> <p>February 2015</p>	<p>Winterbourne View – all actions implemented and no current learning disability in-patients in assessment and treatment units</p> <p>Safeguarding standards monitored as part of annual contract monitoring visits and weekly review of CQC reports.</p> <p>Quarterly monitoring of Safeguarding referrals received timescales to action and outcomes. Quarterly report to Contract Performance Meetings</p> <p>Safeguarding with SWIFT may not be available until AIS version therefore will not meet target date.</p> <p>Single Referral Point business case being considered by Seqol and Commissioning as part of audit review and Care Act requirements.</p>
	<p>Reduce the number of people suffering from long term conditions through the promotion of healthy lifestyle choices</p> <p>Promote independence and</p>	<p>Evaluate community navigator and roll out to all practices if successful evaluation</p>	<p>Reduction in hospital admissions for people with long term health conditions</p>	<p>Accountable officer, CCG</p>	<p>January 2015</p>	<p>First evaluation in September 2014 with improvements in quality but not significant reduction in hospital admissions. Further analysis of data in December 2014 has shown that small reduction in spent on acute hospital services were achieved for patients within the community navigator cohort. However, spent on adult social care increased as new needs were identified. The model will be adjusted in 2015/16 to focus on self help and community based solutions for individual patients. Funding will come from Transformation Fund nationally.</p>

Joint Commissioning delivery Plan 2014/15 – DRAFT V01

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	reduce the need for hospital services and long term care					
		<p>Implement Locality based initiatives to reduce isolation in older people by commission befriending/reducing isolation</p> <p>Circles of support for older people, those with a learning disability and carers</p>	<p>Reduce hospital admissions for older people</p> <p>Delay care packages for those supported by Time to Call</p> <p>Circles of support in place for 50 older people</p> <p>Delay in increase in care package by those supported through Circles of support</p>	Head of Commissioning Children & Adults	<p>October 2014</p> <p>October 2014</p> <p>January 2015</p>	<p>Home from Hospital service increased and new model tested with increased capacity from December 2014</p> <p>Time to call not yet evaluated</p> <p>Circles of support in place for 40 people as of December 2014 and 20 matched with a volunteer. 70 volunteers now in process with 40 volunteers approved and trained. Barriers in engaging with older people identified and Localities actively working to increase take up by older people</p>
		<p>A number of Urgent care initiatives are in place to ensure that the current schemes such as the 'Joint Front Door'; the Swindon Intermediate Care Centre (SWICC); telehealth; and virtual wards.</p> <p>Opportunities to review these and further enhance these and to develop other urgent pathways will be reviewed during 2014</p>	<p>Reduction in non elective admissions to hospital I line with better Care Fund target</p>	Joint Commissioner community health	March 2015	<p>Better care Fund schemes in place and plan approved with support. BCF final amended submission 28th November 2014</p> <p>Target of 3.5% reduction remains challenging with increase in hospital demand. 7 day working and additional OT and therapy services at the front door implemented in November 2014. SUCCESS in place.</p> <p>Care Homes project established and work by adult social care already has reduced some admissions.</p>
		<p>Improve diagnosis and support for people with dementia following service re-design workshops and implement dementia Strategy</p>	<p>Increase diagnosis for people with dementia</p>	Joint Commissioner Mental Health	March 2015	<p>Dementia strategy agreed and due to go to cabinet in December 2014. Implementation through dementia Steering Group. Target to diagnose 1,600 people by December 2014. This would support delivery of surpassing the national target of a 66% diagnosis rate by March 2015.</p> <p>Dementia Friends awareness training programme established to</p>

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						promote Swindon as Dementia friendly community. Sessions delivered to SBC staff, Members and local business. To date, there have been 793 people trained as Dementia Friends locally and Swindon Borough council and providers are also conducting training all of which needs to be consolidated into the work with the Alzheimer's society
Improved health outcomes for disadvantaged and vulnerable communities	Ensure access to information and advice that supports choice and control	Ensure that all our contracts and service specifications include a consideration of how providers consider the health of the people that they engage with	Achieve balanced budget for adult social care in 2014/15	Head Of Commissioning Children & Adults	March 2015	Budget projection of 3850k underspend mitigating overspend in children's social care
	Reduce health inequalities and improve health and wellbeing	<p>Based on agreed priorities in the Health and Well Being Strategy, work with partners to determine delivery of programmes including:</p> <ul style="list-style-type: none"> Breastfeeding support Sexual health advice Preventing the uptake of smoking Alcohol and substance misuse prevention and support Determine and target those most vulnerable to poor sexual health outcomes; such as teenage pregnancy / parenthood, STI infection including HIV and sexual violence, to reduce risk and provide appropriate support <p>Work with partners to continue targeted work with vulnerable children and young people and families to reduce risky behaviour and encourage healthy lifestyles</p>	<p>Improve access to community based services for parents to be</p> <p>Commission breastfeeding support from health visiting, children's centres and midwifery services</p> <p>Children's centres work in virtual clusters to increase breastfeeding rate at 6-8 weeks from 13/14 baseline</p> <p>Build on the success of the breastfeeding strategy across Swindon through partnership working, including commissioning of Baby Friendly Initiative with UNICEF Baby Friendly Accreditation achieved by March 2015</p>	Head of Commissioning Children and Adults and Head of Children and Families Acting Deputy Director of Public Health (Sue Wald & Cherry Jones)	March 2015	<p>Implementation of baby steps in September 2014 with evaluation support from EIF.</p> <p>Breastmates groups in all children's centres</p> <p>Breastfeeding coverage positive and rates of 50% prevalence</p> <p>New alcohol treatment and recovery service in place (with CRI) from April 2014. This has been centrally commissioned by SBC integrating criminal justice, primary care, acute care and community detox.</p> <p>Supporting national and regional Public Health campaigns locally to raise awareness and encourage behaviour change including:</p> <ul style="list-style-type: none"> Stoptober Be There Tomorrow Change 4 life Illegal tobacco <p>HPV uptake for the target routine year 8 cohort was: 1st vaccine 96.9% 2nd vaccine 96.9% All three vaccines 96.6%</p> <p>A number of schools in Swindon have achieved the Food for life award: Haydonleigh school has a gold award, Westlea Primary School has a silver award, and six schools have achieved a bronze award (Holy Rood Junior, Ridgeway, Chalet, Holy Family, Goddard Park, and South Marston)</p>

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		<p>Develop a locality listening model that will promote and enable positive healthy lifestyle choices</p> <p>Use local intelligence and data to identify specific areas of need and develop social/community networks locally to</p> <ul style="list-style-type: none"> Promote messages about active and healthy lifestyles Deliver activities supporting active and healthy lifestyles Promote positive healthy lifestyle choices through the Healthy Schools Programme Working with schools to deliver on the Healthy Schools agenda. 	<p>Maintain minimum 95% coverage for 6-8 week breastfeeding figures</p> <p>The number of children with a breastfeeding status recorded as a % of all infants due for a 6-8 week check - prevalence is 47% in 2014/15</p> <p>Children aged 1, 2 and 5 have all relevant immunisations</p> <p>HPV coverage rate of relevant group of young people is 95%</p> <p>100% of children are offered a health progress check between the age of 2 and 2 and a half by March 2015</p> <p>Healthy schools awards or/and Number of schools engaged</p> <p>100% of 2 year olds in early years settings have a review through the Early Years Framework</p> <p>Reduce smoking prevalence among</p>	<p>Senior Commissioner Drugs and Alcohol (Jennifer Leibach)</p> <p>Senior Commissioner Family Support and Sexual Health (Jo Hartley)</p>		<p>The mean monthly throughput for the Swindon Health Walks has increased overall by 10% in the past twelve month and is currently approx. 650 people per month. There are at least 10 walks every week, including walks for different abilities.</p> <p>80% of all GP surgeries in Swindon have signed up to our local exercise on referral scheme, Steps to Health, with 88% of patients reporting that they felt the programme had benefited their health</p> <p>The Tri-Active project, which aims to get inactive people living in Swindon (particularly women) involved in the sports of cycling, swimming and running, currently has over 650 project participants registered</p> <p>Smoking prevalence rate in adults down from 21.5% 2012/13 to 19.4% 2013/14. (Eng average 18.4%)</p> <p>In routine and manual workers rate down from 29.4% to 27.2% (Eng average 28.6%)</p> <p>Our commissioned Swindon Integrated Sexual Health Service (SWISH) continues to raise the profile of good sexual health outcomes and reduce risk-taking behaviour which includes high quality outreach to colleges and vulnerable young people</p> <p>In Swindon the rate of conceptions in women aged under 18 years was 27.8 per 1,000 in the year 2012 (similar to the England average rate 27.7 per 1,000).</p> <p>A new one stop Sexual Health Website and accompanying campaign was launched in August 2014 (http://www.swindonsexualhealth.nhs.uk/)</p>

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			<p>young people to 12% by 2015 Reduce adult smoking prevalence Reduce smoking prevalence of pregnant women at time of delivery</p> <p>Develop a Locality Listening Model that will promote and enable positive healthy lifestyle choices - model developed with measures of success by March 2014</p> <p>Embed the newly commissioned Swindon Community Alcohol Treatment & Recovery Service from April 2014. Successful delivery of the Swindon Drug Treatment and Recovery Service.</p> <p>Commissioning of Family Nurse Partnership and early Support teams Supported Housing reducing 2nd pregnancies - establishing a baseline</p> <p><u>Sexual Health</u> Services will support delivery against the three main sexual</p>			<p>Swindon continues to achieve the national targets for chlamydia screening with good coverage (5.8% of 15-24 year olds) and positivity rates (10% of 15-24 year olds). Our diagnostic rate of 2,306.8 per 100,000 of 15 -24 years olds (July to September 2013) is better than both the regional and national rates which shows that our targeted approach to testing is successful reaching young people at risk of infection.</p> <p>Over 70% of GP Practices in Swindon offering the full range of LARC services to women (prescription rate at 50.4 per 1,000, Eng rate is 49.0 per 1,000 women).</p> <p>A Sexual Health Joint Strategic Needs Assessment (JSNA) is currently being undertaken</p> <p>Drug and Alcohol service implemented home visiting programme with NSPCC and being rolled out to 14 other LA.</p>

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			<p>health Public Health Outcome Framework measures:</p> <ul style="list-style-type: none"> • Under 18 conceptions • Chlamydia diagnoses (15-24 year olds) • People presenting with HIV at a late stage of infection <p>Commissioning of universal integrated sexual health service with targeted focus on at risk groups</p> <p>Commissioning of HIV support service to reduce isolation and support long-term health and wellbeing independence</p> <p>Commissioning of support to target prevention, identification, treatment of HIV (and other STI's) amongst high risk group such as MSM, Black African community</p>			Family Nurse Partnership successful completion of annual targets and 50% of young parents reported increase in self confidence and majority reduced smoking
<i>Improved mental health, wellbeing and resilience for all</i>	Develop effective pathways for people with mental health problems	All partners to involve communities, parents and carers and service users in the creation of service	Reduction in admissions to inpatient mental health facilities	Joint Commissioner Mental Health	March 2015 March 2015	There has a significant reduction in mental health admissions over the course of the last six months and there is further intention to develop pathways and metrics to continue this trend into the financial year 2015/16.

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	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) Promote positive mental health and recognise that mental health is everyone's business	<p>developments and reviews to ensure services are based on their views and address their needs.</p> <p>Development of care clusters and pathways in preparation for Payment by results</p> <p>Effective contract managements of providers, so that outcomes for people with mental illness continue to improve</p> <p>Re-commission mental health services form the third and voluntary sector to improve mental wellbeing and recovery</p> <p>Continue to monitor and review all mental health placements with independent providers so patients are safe and in appropriate placements to meet their needs</p> <p>Review supported housing and with appropriate support to maintain mental health and reduce the need for formal ongoing support packages</p>	<p>Reduction in the cost of care packages for people with mental ill health</p> <p>Robust system in place to model impact of payment by result in mental health</p> <p>Achievement of agreed contract targets for all providers</p> <p>Contract awarded</p> <p>Reviews completed</p> <p>Recommissioning of mental health supported housing contracts</p>	<p>Strategic Commissioner Voluntary Sector</p> <p>Joint Commissioner Mental Health</p> <p>Strategic Commissioner Children & Families</p>	<p>December 2014</p> <p>March 2015</p> <p>March 2016</p>	<p>This will incorporate a developed assessment and response model aimed at responding to mental health crisis faster within the community and supporting cross provider care plans for those having contact with multiple providers across the healthcare spectrum.</p> <p>This has included work across both secondary care and third sector contracts and model structure over the past year</p> <p>There has also been work around specialist placements and care packages with those experience needs outside of local care thresholds and needs (Out of Area specialist) to bring care closer to home and meet needs locally</p> <p>***** Stephen – average costs and current budget forecast?</p> <p>The development of recovery focus on mental health pathways, including the further integration of secondary and tertiary pathways in mental health, will support continuing recovery longer term beyond secondary care supporting continuing recovery for those experiencing mental illness within Swindon. This model has been shared and supported by stakeholders of mental health within Swindon and will be implemented by June 2015</p> <p>Annual contract monitoring visits undertaken and robust action plans for those who do not meet the standards. Further review of specification and analysis of service user needs scheduled into Contracts work plan to evaluate what community and residential services are required for those with dementia with behaviours that challenge and therefore</p>

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						<p>require additional 1:1 support.</p> <p>Contract for mental health awarded with start date 1.1.2015</p> <p>Current review and analysis of services provided in the community and what causes an admission to a care home. Will link to review and re-provisioning of domiciliary care services with specifications that relate to mental health and dementia service and an accreditation process for Framework providers.</p> <p>Mental health third sector services re-commissioned and new contract in place November 2014</p> <p>2 mental health schemes de commissioned. Delay in re-commissioning of supported housing options</p>
	Improve children's mental health and well-being	TAMHS – complete Strength and Difficulties Questionnaires pre and post interventions for all children and young people that are referred to the	Collect totals of all SDQs and record on Capita and in individual clinical notes; reduce the SDQ scores in 65%	TAMHS with Caroline Little, Children and Families Commissioner	Review March 2015	Service review of TAMHS and CAMHS interface couple within the JSNA

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		<p>Targeted Mental Health Services - measure the difference in outcome scores pre and post interventions so that TaMHS can demonstrate that our interventions are having a positive impact on the children and young people that are referred to the service.</p> <p><u>CAMHS</u> Implement a tool for measuring outcomes for patients in line with the findings of the Routine Outcome Measures pilot run in 2014</p>	<p>of all the children and young people that are referred to TAMHS.</p> <p>Tool implemented consistently for all patients, data collected and recorded on system.</p>	CAMHS with Caroline Little, Children and Families Commissioner	Review March 2015	
	Reduce the stigma and discrimination associated with mental ill health and improve diagnosis and access to support	<p>A range of initiatives have been progressed to improve dementia diagnosis rates and the care pathway. These will be further developed during 2013/14 and they include:</p> <ul style="list-style-type: none"> • GP lead to provide leadership and guidance • Consultant psychiatrists providing training and awareness sessions • Memory assessment service • Mental health liaison services. <p>ensure all care</p>	<p>Reduction in the number of people admitted to hospital due to Dementia</p> <p>Increase in the number of people diagnosed with dementia and offered community based support</p> <p>Reduction in waiting times for assessment to 4 weeks</p>	Senior Commissioner, CCG	March 2015	<p>Dementia diagnosis rate have improved significantly since November 2014 and have seen Swindon locally increase to above the national average from 46% to 53% diagnosis rate in December 2014.</p> <p>There is intention to surpass the national target of 66% by the end of January 2015 ahead of the government proposed target of March 2015.</p> <p>Dementia management, both assessment and treatment is developed to be faster within the new proposed model locally to be in place by June 2015.</p> <p>This includes more rapid assessment, diagnosis and treatment of people experience Dementia related illness.</p>

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		providers have dementia awareness training				
<i>Creation of sustainable environments in which communities can flourish</i>	Build on the strengths of local communities, including the local voluntary sector, to enhance social cohesion, and promote social inclusion of marginalised groups and individuals.	<p>Develop Swindon wide volunteering approach</p> <p>Work with community groups and local people to determine what can be done locally to support families to be stable and safe, tapping into new initiative such as networks, focus on parents with disabled children and Troubled Families</p> <p>Collaboratively develop communities in order to develop and create community capacity and capability</p>	<p>Volunteering Strategy agreed</p> <p>Circles of support in place</p> <p>175 older people supported by Circles Of Support</p> <p>Circles of support in place for people with a learning disability</p>	Localities Director	June 2014-March 2015	Circles of support in place for 20 people as of October 2014 and 12 matched with a volunteer. 70 volunteers now in process with 30 volunteers approved and trained. Barriers in engaging with older people identified and Localities actively working to increase take up by older people
	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>Overarching Housing Strategy</p> <ul style="list-style-type: none"> Update Homelessness Strategy <p>Update Service Level Agreements with Housing Delivery to support Troubled Families Agenda</p> <p>Re-commission Supported Housing Schemes to maximise independence and achieve value for money</p>	<p>Housing strategy in place with future demand for housing for vulnerable people defined</p> <p>Recommissioning of supported housing commencing October 2014 with new contracts in place according to project plan</p>	<p>Commissioner Housing Strategy</p> <p>Strategic Commissioner Adults</p>	<p>December 2014</p> <p>March 2015</p>	<p>Housing Strategy out for consultation October 2014</p> <p>Commissioning timetable for supported housing agreed November 2014</p> <p>Housing allocation policy now agreed for vulnerable adults including direct nominations.</p> <p>Development of Hawthorns site now agreed and planned for 16/17. 4 properties to be allocated to adult social care to provide a step-down type service, linking with firethorn Close.</p> <p>Review and analysis of existing Extra Care. Extra Care schemes now moving to Individual Service Funds (ISF).</p>

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		<p>Review support models for community based support and supported housing</p> <p>Further develop extra Care with a greater focus on dementia and utilisation of telecare</p>				