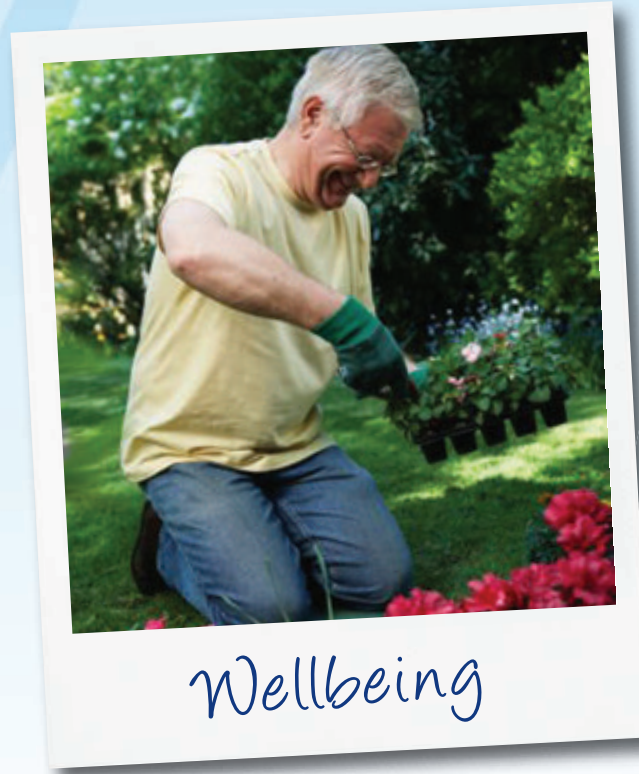




Support



Independence



Wellbeing



Health

County Durham Joint Health and Wellbeing Strategy 2014-2017

Delivery Plan

“Improve the health and wellbeing of the people of County Durham and reduce health inequalities”

JOINT HEALTH & WELLBEING STRATEGY – DELIVERY PLAN 2014/2017

STRATEGIC OBJECTIVE 1: CHILDREN AND YOUNG PEOPLE MAKE HEALTHY CHOICES AND HAVE THE BEST START IN LIFE

Outcome: Reduced Childhood Obesity

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Improve support to families with children who are obese or overweight</p> <ul style="list-style-type: none"> • Work jointly to develop obesity pathways • Expand the Family Initiative Supporting Children’s Health (FISCH) initiative focusing on childhood obesity as part of Wellbeing for Life approach • Provide education and training on food growing clubs / allotments 	<p>DCC (Public Health)</p>	<p>March 2015 March 2015 March 2016</p>	<p>Council Plan</p>
<p>Improve support to women to start and continue to breastfeed their babies</p> <ul style="list-style-type: none"> • Further develop peer support programmes to provide information and listening support in antenatal and postnatal periods, to increase the number of women who start and continue to breastfeed • Further develop the breastfeeding-friendly venues scheme with businesses, to enable women to breastfeed their babies more easily when outside of the home • Continue to commission the UNICEF Baby Friendly Scheme 	<p>DCC (Public Health)</p>	<p>March 2015 March 2015 March 2015</p>	<p>Council Plan</p>

Outcome: Reduced levels of tobacco related ill health

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Provide and develop a range of interventions to reduce the availability of age restricted products (e.g. tobacco and alcohol) to children and young people</p> <ul style="list-style-type: none"> • Provide awareness courses for retailers • Undertake an intelligence-led approach to tackling cheap and illicit tobacco and alcohol • Reduce proxy sales of alcohol through operation A.R.I.E.S (Alcohol Related Intervention Education & Support) 	<p>Tobacco Control Alliance for County Durham</p> <p>Alcohol Harm Reduction Unit</p>	<p>March 2015 March 2015</p> <p>March 2015</p>	<p>Tobacco Control Alliance Plan</p> <p>Alcohol Harm Reduction Strategy</p>
<p>Evaluate the 'baby clear' initiative (a North East project that aims to increase the uptake of stop smoking services for pregnant women)</p> <ul style="list-style-type: none"> • Monitor the outcomes of the 'baby clear' initiative 	<p>Tobacco Control Alliance for County Durham in collaboration with CCGs</p>	<p>March 2015</p>	<p>Council Plan</p> <p>Tobacco Control Alliance Plan</p>
<p>Develop a process to implement and measure exposure of children to second hand smoke in line with the Smoke Free Families initiative</p> <ul style="list-style-type: none"> • Establish a baseline for County Durham to measure exposure of children to second hand smoke, in partnership with local community groups and agencies, through awareness campaigns • Public health through their smoking cessation and smoke free family initiatives to work with CCGs to reduce the number of children developing lower respiratory tract conditions 	<p>Tobacco Control Alliance for County Durham in collaboration with CCGs</p>	<p>May 2014</p> <p>March 2015</p>	<p>Council Plan</p> <p>Tobacco Control Alliance Plan</p> <p>CCG Operational / Strategic Plans</p>

Improved early health intervention services for children and young people

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Continue to improve the emotional wellbeing of children and young people and provide effective, high quality mental health services to those who need it</p> <ul style="list-style-type: none"> • Following review commission children’s Occupational Therapy and Speech and Language Therapy services • Further develop and rollout Autistic Spectrum Disorder pathway and post diagnosis • Agree a plan for the development of emotional wellbeing provision with secondary schools • Review health funded posts for Educational Psychologists and Advisory Teachers • Implement recommendations from the review of universal, targeted and specialist Child and Adolescent Mental Health Services • Implementation of Public Mental Health Strategy with a focus on: <ul style="list-style-type: none"> ○ Prevention. ○ Promotion. ○ Early Intervention. ○ Recovery and identifying priority groups such as young carers and looked after children • Implement ‘Children and Young People’s Mental Health, Emotional Wellbeing and Resilience Plan’ 	<p>CCGs</p> <p>North of England Commissioning Support Unit</p> <p>DCC (Public Health)</p> <p>CCGs</p> <p>CCGs</p> <p>DCC (Public Health)</p> <p>DCC (Public Health)</p>	<p>September 2014</p> <p>September 2014</p> <p>December 2014</p> <p>April 2015</p> <p>April 2015</p> <p>March 2017</p> <p>March 2017</p>	<p>CCG Operational / Strategic Plans</p> <p>Children, Young People and Families Plan</p> <p>Better Care Fund Plan</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Support children and young people to take part in positive activities which are appropriate for their age and reduce negative and sexual health risk-taking behaviours e.g. smoking, drinking alcohol, teenage conceptions</p> <ul style="list-style-type: none"> • Implement the teenage pregnancy and sexual health delivery plan with a focus on: <ul style="list-style-type: none"> ○ Supporting young people to achieve and attain during school years to prepare them for relationships, sexual wellbeing and adulthood ○ Building resilience in children and young people to protect against engaging in risky behaviour ○ Raising self-esteem, aspirations and educational attainment of young people ○ Improving the outcomes for vulnerable young people including teenage parents and their children, those at risk of unplanned pregnancy 	DCC (Public Health)	August 2017	
<p>Improve the oral health of children living in County Durham</p> <ul style="list-style-type: none"> • Provide primary school children with the early uptake of dental services 	DCC (Public Health) in partnership with NHS England	March 2015	
<p>Implement a single pathway for early intervention by midwives and health visitors in line with the Healthy Child Programme</p> <ul style="list-style-type: none"> • Ensure acute liaison service responds to any referrals made by midwifery/other services regarding pregnant women who either have a mental illness or are at risk of developing a mental illness after giving birth • Implement the Healthy Child Programme for 5-19 year olds • Project-manage the transition to the council for health visitors and the Family Nurse Partnership 	<p>Tees, Esk & Wear Valley (TEWV) NHS Trust</p> <p>DCC (Public Health)</p> <p>DCC (Public Health)</p>	<p>September 2014</p> <p>March 2015</p> <p>October 2015</p>	<p>TEWV Locality Business Plan for County Durham and Darlington</p> <p>Public Health core work</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Ensure One Point Service is effective in coordinating the provision of early help to families identified with additional needs</p> <ul style="list-style-type: none"> • Introduce a Single Front Door (First Contact Service) for referrals. • Introduce a single assessment framework. • Implement Early Help Strategy 	<p>DCC (Children's Services)</p>	<p>April 2014</p> <p>April 2014</p> <p>April 2016</p>	
<p>Work together to reduce incidents of self-harm by young people</p> <ul style="list-style-type: none"> • Clarify safe and effective support pathways, and raise awareness of key professionals that can be involved in complex cases • Implement new Child and Adolescent Mental Health Services (CAMHS). self harm service • Implement suicide and attempted suicide early alert process for young people at risk of suicide or self harm • Develop open access and drop in clinics for CAMHS • Increase the utilisation of outreach work i.e. clinics within children's centres, GP practices • Adopt a better use of technology by CAMHS services, for example Skype. • Increase publicity around the issues of self-harming • Ensure parents and carers receive appropriate public health advice and support. • Review the pathway for paediatric self-harm admissions • Develop the knowledge and skills of school based staff to identify and support vulnerable young people engaging in self-harm behaviours • Evaluate the sheds model for young people 	<p>DCC (Public Health)</p> <p>CCGs</p> <p>DCC (Public Health)</p> <p>TEWV</p> <p>TEWV</p> <p>TEWV</p> <p>DCC (Public Health)</p> <p>DCC (Public Health)</p> <p>CCGs</p> <p>DCC (Public Health)</p> <p>DCC (Public Health)</p>	<p>December 2014</p> <p>December 2014</p> <p>February 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2016</p>	<p>TEWV CYPS Transformation Plan</p> <p>Better Care Fund Plan</p> <p>Children, Young People and Families Plan</p> <p>CCG Operational / Strategic Plans</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Carry out a strategic review of commissioning arrangements for children with a disability and their families</p> <ul style="list-style-type: none"> • Re-commission specialist short breaks to ensure increased choice and value for money • Design and implement a process for specialist commissioning • Improve commissioning of services for children with special educational needs (SEN) who do not attend special schools • Re-commission Universal Short breaks to ensure equitable access across the County • Review major contracts to understand the impact of Respite Care services • Review direct payments for children 	<p>DCC (Commissioning)</p> <p>DCC (Commissioning)</p> <p>DCC (Commissioning)</p> <p>DCC (Commissioning)</p> <p>CCGs</p> <p>DCC (Commissioning)</p>	<p>November 2014</p> <p>November 2014</p> <p>June 2014</p> <p>June 2014</p> <p>March 2015</p> <p>April 2015</p>	<p>Children, Young People and Families Plan</p> <p>Better Care Fund Plan</p>
<p>As part of Special Education Needs and Disability (SEND) reforms, implement birth to 25 Education, Health and Care (EHC) assessments for children with special educational needs</p> <ul style="list-style-type: none"> • Implement birth to 25 Education, Health and Care (EHC) assessments • Prepare a personal budget for anyone in receipt of an EHC Plan, when requested by the parents or young person • Publish the Local Offer of services that support children and young people with special educational needs and their families • Provide advice and guidance for families of children with SEN • Develop SEN and Disability Strategy and implement recommendations 	<p>DCC (Education) / CCGs</p>	<p>September 2014</p> <p>September 2014</p> <p>September 2014</p> <p>September 2014</p> <p>September 2014</p>	<p>Children, Young People and Families Plan</p> <p>CAS Service Plan</p> <p>CCG Operational / Strategic Plans</p>
<p>Provide training to professionals and develop a range of marketing materials to raise their awareness of young carer needs</p> <ul style="list-style-type: none"> • Raise awareness of professionals of the needs of young carers through a range of marketing methods and carer training for operational staff • Review and re-commission young carers service • Develop a social care assessment procedure to enable young carer needs to be assessed in advance of their 18th birthday 	<p>DCC (Commissioning)</p> <p>DCC (Commissioning)</p> <p>DCC (Children's Services)</p>	<p>March 2015</p> <p>March 2015</p> <p>March 2015</p>	<p>Better Care Fund Plan</p> <p>Social Care Reform Action Plan</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Work in partnership to increase awareness and provide education to young people and their parents on the risks of alcohol and ensure that adequate control on the sale of alcohol is in place and effective treatment services are available</p> <ul style="list-style-type: none"> • Ensure that children and young people who present with alcohol or substance misuse related injuries at emergency departments in the trust areas are referred for specialist interventions to address any alcohol or substance misuse related problem at the earliest opportunity • Implement a 'Think Family' approach when parental alcohol and/or substance misuse is identified • Work in partnership to address proxy provision of alcohol – i.e. parents supplying alcohol to their children 	DCC (Public Health)	<p>January 2015</p> <p>January 2015</p> <p>March 2015</p>	<p>Alcohol Harm Reduction Strategy</p> <p>Children Young People and Families Plan</p>
<p>Implement the Unintentional Injuries Strategy to reduce accidental injuries in children and young people</p> <ul style="list-style-type: none"> • Develop a Local Injury Prevention Strategy Group to lead on implementing the NICE action plan • Develop relevant clinical protocols across agencies to ensure quality of care for Children and Young People involved in accidental injury 	DCC (Public Health)	<p>March 2015</p> <p>March 2015</p>	<p>Children, Young People and Families Plan</p> <p>CAS Service Plan</p>

STRATEGIC OBJECTIVE 2: REDUCE HEALTH INEQUALITIES AND EARLY DEATHS

Outcome: Reduced mortality from cancers and circulatory diseases

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Develop joint action plans with partners that will reduce the number of people who have cancer, heart disease and strokes through the implementation of systematic approaches to primary and secondary prevention</p> <ul style="list-style-type: none">• Implement the Experience Led Commissioning Stroke Prevention and management strategy and action plan• Implement model of care for community stroke / transient ischemic attack (TIA) services which will reduce the number of incidences of stroke/TIA improved access to therapies and improved patient experience• Evaluate the heart failure service in community/primary care	CCGs	July 2014 March 2015 March 2015	CCG Operational / Strategic Plans

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Work with Clinical Commissioning Groups to ensure targeted access to the Health Check Programme in County Durham</p> <ul style="list-style-type: none"> • Increase the proportion of people on practice registers having a NHS Health Check and risk management plan, with an estimated 20% risk or more of developing cardiovascular disease in the next 10 years • Increase the number of people in areas with a high prevalence of risk factors for CVD accessing the Check4Life programme and taking part in lifestyle interventions 	<p>CCGs / DCC (Public Health)</p>	<p>March 2015</p> <p>March 2015</p>	<p>Public Health Core Offer to CCGs</p> <p>CAS Service Plan</p> <p>CCG Operational / Strategic Plans</p>
<p>Raise the profile of cancer awareness and earlier diagnosis and encourage the uptake of cancer screening programmes from communities where take up is low</p> <ul style="list-style-type: none"> • Carry out a review of referrals thresholds for suspected cancer which will result in an increase in the diagnosis of cancer at an earlier stage • Evaluate the primary care cancer risk assessment tool • Review of current cancer pathway to identify gaps in service provision e.g. diagnostics which will result in improvements in cancer treatment time targets • Carry out targeted work with GP practices where take up of cancer screening is low • Review the impact of national cancer awareness programmes on cancer waiting times 	<p>CCGs / DCC (Public Health)</p>	<p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p>	<p>Council Plan</p> <p>CCG Operational / Strategic Plans</p>
<p>Work with the community and voluntary sector to offer interventions to people who do not engage well with mainstream health services</p> <ul style="list-style-type: none"> • Use results from Health Equity Audits and associated Public Health Intelligence to target Health Trainer Services 	<p>Community Wellbeing Partnership</p>	<p>March 2015</p>	<p>Wellbeing for Life Service Plan</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Develop a comprehensive partnership approach to wider tobacco control actions to reduce exposure to second hand smoke, helping people to stop smoking, reduce availability (including illicit trade), reduce promotion of tobacco, engage in media and education and support tighter regulation on tobacco</p> <ul style="list-style-type: none"> • Implement the Tobacco Alliance Action Plan 	<p>Tobacco Control Alliance for County Durham</p>	<p>March 2017</p>	<p>Tobacco Control Alliance Plan</p>
<p>Work together to reduce the health inequalities between the Gypsy Roma Traveller community and the general population</p> <ul style="list-style-type: none"> • Appoint a Health Visitor and Health Care Assistant to work with families with young children emphasising the importance of immunisation, breastfeeding and general health • Appoint two Health Trainers to work in the community with an emphasis on signposting to health care and a range of health improvement activities 	<p>DCC (Public Health)</p>	<p>June 2014</p> <p>June 2014</p>	

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Reduce the inequalities between people with learning disabilities and the general population</p> <ul style="list-style-type: none"> • Undertake two “Fulfilling Lives” engagement events to seek the views of people with a learning disability on how they access universal services in their local communities • Implement Learning Disability Health Charter for social care providers • Establish cancer screening and health check groups for people with learning disabilities • Specialist learning disability services to support good practice and education in mainstream health services to improve the health of people with learning disabilities • Implement Eye Check Pilot for people with learning disabilities • Implement the local joint plan to fully address the requirements of the Winterbourne Concordat • Develop pathways to ensure that individuals with learning disabilities and behavioural problems have access to appropriate services to improve their physical health and wellbeing 	<p>Learning Disability Engagement Forum</p> <p>DCC (Commissioning) DCC (Public Health)</p> <p>TEWV Health Facilitation Team DDES CCG DCC (Adult Care) / CCGs DCC (Public Health)</p>	<p>September 2014</p> <p>September 2014</p> <p>November 2014</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>April 2015</p>	<p>Transforming Care Joint Plan</p> <p>CCG Operational / Strategic Plans</p>
<p>Use all available tools to identify areas and groups at risk of poor health outcomes and intervene appropriately to reduce the widening gaps in life expectancy</p> <ul style="list-style-type: none"> • Undertake Health Equity Audits • Undertake Health Impact Assessments • Undertake Health Needs Assessments 	<p>DCC (Public Health) / CCGs</p>	<p>March 2015</p> <p>March 2015</p> <p>March 2015</p>	<p>Public Health Core Offer to CCGs</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Develop and implement primary prevention programmes to improve health outcomes in general practice and save costs around quitting smoking, reducing problem drinking and improving exercise take up</p> <ul style="list-style-type: none"> • Review the Exercise Referral Pathway • Jointly review commissioning for weight management • Implement alcohol misuse screening in primary care • Implement brief interventions around smoking and alcohol 	DCC (Public Health)	March 2015 March 2015 March 2015 March 2015	CAS Service Plan
<p>Work together to address the health and social needs of vulnerable people who come into contact with the Criminal Justice System</p> <ul style="list-style-type: none"> • Ensure robust pathways into alcohol treatment for offenders are developed • Develop an assessment to identify the physical and mental health needs of lower level offenders • Implement the Child Health Assessment Tool (CHAT) to understand the health needs of young people who offend • Develop the social care assessment procedure to take into account adults that are in prison or approved premises • Develop pathways and access for identified health needs for young people who offend with a focus on speech language and communication needs 	DCC (Public Health) CCGs / Health and Justice Area Team DCC (County Durham Youth Offending Service (CDYOS)) DCC (Adult Care) DCC (CDYOS)	March 2015 March 2015 March 2015 March 2015 March 2015	Social Care Reform Action Plan Reducing Reoffending strategy

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Develop an integrated and holistic wellbeing service to improve health and wellbeing and tackle health inequalities in County Durham</p> <ul style="list-style-type: none"> • Complete phase one of the wellbeing approach, with a provider in place to deliver services from existing access points and community buildings • Develop an evaluation framework with Durham University that enables Wellbeing services outcomes are captured and learning is disseminated. • Develop an co-produced approach across the council, so that joint planning and delivery enables provides the best possible health outcomes for local people • Apply an asset based approach which involves communities in relation to the commissioning of the Health Trainer Programme including Health Trainer Champion provision • Work with CCGs to develop a pilot for patients with long terms conditions • Work with partners to develop specific interventions around social determinants of health, e.g. housing, adult education and learning and employment. 	<p>DCC (Public Health)</p>	<p>September 2014</p> <p>November 2014</p> <p>September 2015</p> <p>March 2015</p> <p>June 2015</p> <p>September 2015</p>	<p>Council Plan</p> <p>Wellbeing for Life Service Plan</p>

Outcome: Reduced levels of alcohol and drug related ill health

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Work together to reduce the number of people who misuse alcohol</p> <ul style="list-style-type: none"> • Evaluate the Alcohol Hospital Liaison Team in Emergency Departments • Undertake further work to understand alcohol misuse in particular groups such as older people, pregnant women, men aged 25 – 44. • Support Area Action Partnerships and the Voluntary and Community Sector to implement local alcohol related activities • Develop an integrated Drug and Alcohol Service • Use social marketing techniques to raise awareness about the harms of alcohol • Agree the best approaches to tackling alcohol related harm in pubs, other venues and places 	<p>DCC (Public Health)</p>	<p>February 2015 March 2015 March 2015 March 2015 March 2015 March 2015</p>	<p>Alcohol Harm Reduction Strategy CCG Operational / Strategic Plans Council Plan</p>
<p>Implement the Drugs Strategy to prevent harm, restrict supply and sustain a future for individuals to live a drug free and healthy life, whilst minimising the impact of drugs on communities and families</p> <ul style="list-style-type: none"> • Agree the Dual Diagnosis Strategy • Implement the Drug Strategy Action Plan to: <ul style="list-style-type: none"> ○ Increase awareness and understanding of drugs in order to reduce drug misuse across the population ○ Have fewer people taking up drug use and to break the inter-generational path to drug misuse and dependency ○ Reduce the supply of drugs and number of drug related incidents impacting upon families and communities ○ Ensure recovery is understood and visible in the community ○ Support people to successfully recover from their dependency, addressing both their health and social needs arising from their drug misuse ○ Involve and support families and carers living with drug related issues 	<p>DCC (Public Health)</p>	<p>November 2014 March 2015</p>	<p>Safe Durham Partnership Plan Council Plan</p>

Outcome: Reduced obesity levels

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Develop a Healthy Weight Alliance for County Durham; bring all key elements of an obesity strategy together and strengthen work programmes</p> <ul style="list-style-type: none"> • Develop a Healthy Weight Strategic Framework and Delivery Plan to promote physical activity and a healthy diet • Undertake a review of commissioning responsibilities for Tier 3 (dietary, psychology and physiotherapy services) and Tier 4 (bariatric surgery) obesity services • Develop a performance and reporting process in order to make relevant data available to all partners • Improve access to physical activity and encouraging greater use of the natural environment 	<p>DCC (Public Health)</p> <p>CCGs / County Durham and Darlington NHS Foundation Trust (CDDFT)</p> <p>DCC (Public Health)</p> <p>DCC (Public Health)</p>	<p>December 2014</p> <p>March 2015</p> <p>March 2016</p> <p>March 2016</p>	<p>Council Plan</p> <p>CCG Operational / Strategic Plans</p>
<p>Produce a Food and Nutrition Plan for County Durham to include work around policy, food provision and access</p> <ul style="list-style-type: none"> • Develop a food and health mapping assessment to inform future procurement, commissioning of services and provide information and recommendations for action for partners e.g. AAPs • Produce a Food and Nutrition Plan for County Durham to include work on policy, food provision and access 	<p>DCC (Public Health)</p>	<p>September 2014</p> <p>March 2015</p>	<p>Council Plan</p>

Outcome: Reduced excess winter deaths

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>To integrate and roll out interventions to address the impact of fuel poverty on excess mortality and morbidity</p> <ul style="list-style-type: none"> • Commission a Warm and Healthy Homes project integral to the Warm Up North programme • Pilot a Boilers on Prescription project in Durham Dales, Easington and Sedgfield 	<p>DCC (Public Health)</p> <p>DCC (Public Health) / DDES CCG</p>	<p>March 2015</p> <p>March 2015</p>	<p>Council Plan</p> <p>Affordable Warmth Strategy</p>

STRATEGIC OBJECTIVE 3: IMPROVE THE QUALITY OF LIFE, INDEPENDENCE AND CARE AND SUPPORT FOR PEOPLE WITH LONG TERM CONDITIONS

Outcome: Adult care services are commissioned for those people most in need

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Ensure the needs of carers are considered by implementing the Care Act and increasing the number of carers assessments offered</p> <ul style="list-style-type: none"> • Identify the implications of the Care Bill in terms of carer support and increase the number of carer assessments offered • Review and revise carers social care assessment procedures and operating processes • Review services for carers including Carers Breaks and Emergency Support Service 	<p>DCC (Adult Care)</p>	<p>March 2015 March 2015 March 2015</p>	<p>CAS Service Plan Social Care Reform Action Plan Better Care Fund Plan</p>
<p>Reduce inappropriate admissions to care homes</p> <ul style="list-style-type: none"> • Introduce 'Time to Think' opportunities as part of the intermediate care continuum, allowing individuals the opportunity to consider their options or alternatives to long term care • Complete the review of specialist residential care, to ensure that there is capacity to deal with complex needs 	<p>DCC (Adult Care / Commissioning)</p>	<p>December 2014 March 2015</p>	<p>CAS Service Plan</p>

Outcome: Increased choice and control through a range of personalised services

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Work together to give people greater choice and control over the services they purchase and the care that they receive</p> <ul style="list-style-type: none"> • Use marketing campaigns to extend the number of people on the Durham Information Guide (DIG) website • Further develop the market to increase the availability of services which can be purchased through a virtual budget, to offer more choice and control to the service user • Establish an information and advice model for Children’s Services, Adult Care and Public Health and further extend advice and information services to people, service users and self-funders, including the Durham Information Guide (DIG), and scope the future development of the e-market place • Ensure that personal budgets are made available for all eligible people through adult case assessments and social work practice • Scope the potential for the introduction of pre-paid cards for social care services by implementing a pilot system in targeted areas 	<p>DCC (Commissioning)</p>	<p>March 2015 March 2015 March 2015 March 2015 March 2015</p>	<p>CAS Service Plan</p>
<p>Extend Direct Payments for health services for people with long term conditions</p> <ul style="list-style-type: none"> • Raise awareness of direct payments with CCGs • Increase numbers of people using personal health budgets 	<p>DCC (Commissioning) / CCGs</p>	<p>March 2015 March 2015</p>	<p>CAS Service Plan</p>

Outcome: Improved independence and rehabilitation

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Work together to support people who have dementia to live in their own home for as long as possible</p> <p>Implement the National Dementia Strategy and other national, regional and local dementia initiatives giving particular attention to:</p> <ul style="list-style-type: none"> • Increasing early detection and awareness • Early diagnosis (integrate dementia into healthy lifestyle programmes) • End of life care • Support to remain independent • Implementing dementia friendly communities. • Implementing Intensive Support Services • Undertake care home quality assessment for care home liaison service • Developing and roll out the Grey Matters Dementia Portal • Reviewing the dementia pathway • Producing a dementia health needs assessment • Reviewing community alarms/warden services 	<p>Community Services and Care Closer to Home Group</p>	<p>March 2015 March 2015 March 2015 March 2015 March 2015 March 2015 March 2015 March 2015 March 2015 June 2015 September 2015</p>	<p>CCG Operational / Strategic Plans</p> <p>Better Care Fund Plan</p>
<p>Provide care as close to home as possible</p> <ul style="list-style-type: none"> • Reform the urgent care system and improve joint working with social care to contribute to savings and cost avoidance of non-elective and unplanned care • Provide medical training to care home staff to help reduce admissions to hospital • Develop improved clinical and pharmacy support to vulnerable older people living in care/nursing homes taking into account evaluation of the various locality schemes and national good practice • Develop a post-diagnosis support service in County Durham • Develop a Pharmaceutical Needs Assessment to ensure adequate availability of drugs, medicines and listed appliances ordered through NHS prescriptions • Implement the frail elderly wrap around service based on the 'house of care' model • Implement multi-disciplinary teams to provide anticipatory care to reduce admissions to care homes • Develop a community service for diabetes moving services out of hospital into the community through the development of a lead provider model 	<p>Community Services and Care Closer to Home Group</p> <p>CCGs</p> <p>Community Services and Care Closer to Home Group</p> <p>DCC (Commissioning)</p> <p>DCC (Public Health)</p> <p>CCGs</p> <p>CCGs</p> <p>CCGs</p>	<p>September 2014</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p>	<p>CCG Operational / Strategic Plans</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Maintain people's independence at home and reduce unplanned admissions by expanding the use of self management programmes and technology</p> <ul style="list-style-type: none"> • Increase the availability of minor adaptations to support people at home • Review and implement the home equipment loans service for adults and children and determine a sustainable service model to cope with increasing demand • Implement Telehealth service • Implement floating support / supported living service • Review wheelchair service • Review lift maintenance arrangements • Review Telecare Service • Agree scope for review of Handyvan/Handyperson service • Review and re-commission ceiling track hoist contract 	<p>Community Services and Care Closer to Home Group</p>	<p>March 2015 March 2015</p> <p>March 2015 March 2015 March 2015 March 2015 June 2015 September 2015 December 2015</p>	<p>CAS Service Plan</p> <p>CCG Operational / Strategic Plans</p> <p>Better Care Fund Plan</p>
<p>Improve the support to people on their return home from hospital, to enable them to recover more quickly, through better co-ordination of care</p> <ul style="list-style-type: none"> • Roll out improvements to care planning and case management in nursing homes • Improve health related quality of life for people with long term conditions by reducing unplanned hospitalisation for chronic ambulatory sensitive conditions 	<p>Community Services and Care Closer to Home Group</p>	<p>March 2015</p> <p>March 2015</p>	<p>CCG Operational / Strategic Plans</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Improve people's ability to reach their best possible level of independence by providing more short term care (reablement/ intermediate care) in different settings</p> <ul style="list-style-type: none"> • Increase access to independent and short term care over a 24 hours a day, 7 days a week timeframe by implementing Integrated Short Term Intervention Service (ISIS) bed model: <ul style="list-style-type: none"> ○ Implement intermediate care beds ○ Implement step up GP beds ○ Implement out of hours sitting service ○ Implement OPAT (outpatient antibiotic therapy) service • Help people to manage their own long term conditions through self-management programmes • Commission robust community nursing services for better management of patients with long term conditions living in the community • Ensure that eligible people have access to the reablement service, to provide support to service users to help increase independence, through the care management process 	<p>Community Services and Care Closer to Home Group</p>	<p>June 2014 June 2014 June 2014 March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>March 2015</p>	<p>CCG Operational / Strategic Plans</p> <p>Better Care Fund Plan Action Plan</p> <p>Council Plan</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Provide more co-ordinated hospital discharge planning to avoid people returning back to hospital</p> <ul style="list-style-type: none"> • Support people who have frequent A&E attendances • Scope and commission improved discharge planning arrangements • Improve case management of patients with long term conditions • Ensure that carers are fully involved during the discharge process and are offered information on support available 	<p>Community Services and Care Closer to Home Group</p>	<p>September 2014 December 2014 March 2015 March 2015</p>	<p>CCG Operational / Strategic Plans</p> <p>CAS Service Plan</p>
<p>Improve the way services work together to support people who have had a fall, and identify those who are at risk of falling</p> <ul style="list-style-type: none"> • Utilise multi-disciplinary teams (as part of ISIS programme) to support the frail / elderly at high risk of hospital admission 	<p>Community Services and Care Closer to Home Group</p>	<p>March 2015</p>	<p>CCG Operational / Strategic Plans</p>
<p>Provide safe, high quality 7 day integrated services across the health and social care economy</p> <ul style="list-style-type: none"> • Further roll out GP weekend opening hours to increase capacity in primary care • Implement the 'Seven Day Services' Programme in County Durham, giving priority to: <ul style="list-style-type: none"> • Frail elderly care • Unscheduled care • Diagnostics in a forward programme. 	<p>CCGs / Clinical Programme Board</p>	<p>June 2014</p> <p>March 2015</p>	<p>CCG Operational / Strategic Plans</p>

Outcome: Continuity of joint commissioning services with partners

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Carry out a review of preventative services and develop new services to meet gaps in provision</p> <ul style="list-style-type: none"> Develop preventative services in conjunction with key partners to meet gaps in provision (as appropriate) 	<p>Social Care Reform Board</p>	<p>March 2015</p>	<p>Social Care Reform Action Plan</p>
<p>Work together to ensure a more localised approach to enable Clinical Commissioning Groups to set priorities based on local evidence</p> <ul style="list-style-type: none"> Use all available tools, such as the health equity audit, health needs assessment and health impact assessment to identify health inequalities, in order to better inform effective and evidence based commissioning across the county Work with GP Practices to improve outcomes for patients through increasing access to primary care, appropriate referral and pathway management to reduce avoidable referrals and unplanned admissions to secondary care and more effective management of long term conditions 	<p>DCC (Public Health) / CCGs</p> <p>North Durham CCG</p>	<p>March 2015</p> <p>March 2016</p>	<p>Public Health Core Offer to CCGs</p> <p>CCG Operational / Strategic Plans</p>

STRATEGIC OBJECTIVE 4: IMPROVE THE MENTAL AND PHYSICAL WELLBEING OF THE POPULATION

Outcome: Maximised independence

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Develop and implement programmes to increase resilience and wellbeing through practical support on healthy lifestyles</p> <ul style="list-style-type: none"> • Develop plan to prevent loneliness and isolation • Implement the Public Mental Health Strategy • Develop an integrated primary care mental health model • Implement programme aimed at improving workplace mental health • Provide mental health needs assessment 	<p>DCC (Public Health) DCC (Public Health) CCGs DCC (Public Health) DCC (Public Health)</p>	<p>February 2015 March 2015 March 2015 March 2015 December 2015</p>	<p>CCG Operational / Strategic Plans Better Care Fund Plan</p>
<p>Work together to find ways that will support the armed services community who have poor mental or physical health</p> <ul style="list-style-type: none"> • Provide a forum where the voice of the armed services community can be heard and can help influence service development • Enable partners working with the armed services community to come together to influence priorities through the County Durham Partnership 	<p>County Durham Partnership through DCC (Assistant Chief Executive's)</p>	<p>March 2017 March 2017</p>	<p>CCG Operational / Strategic Plans</p>
<p>Ensure that people using mental health services who are in employment have a care plan that reflects the additional support needed to help them retain this employment</p> <ul style="list-style-type: none"> • Implement the Recovery College to offer training opportunities for people with mental health difficulties to gain a better understanding of their difficulties and how to manage them as well as providing opportunities to learn from others with similar experiences • Implement employment training and educational development services • Embed the recovery approach within secondary mental health services • Implement the recommendations of the review of the Care Programme Approach (CPA) to address employment needs 	<p>TEWV CCGs TEWV TEWV</p>	<p>September 2014 March 2015 September 2015 October 2015</p>	<p>TEWV Quality Account Better Care Fund Plan</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Continue to improve access to psychological therapies</p> <ul style="list-style-type: none"> Implement an action plan to promote the service and increase staffing levels and skill mix between high intensity and low intensity with more resources aimed towards low intensity users of service. Implement recommendations of Mental Health Crisis Services Review 	CCGs	<p>March 2015</p> <p>March 2015</p>	CCG Operational / Strategic Plans

Outcome: Increased social inclusion

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Develop a more integrated response for people with both mental and physical health problems, in particular supporting people with common mental health problems (such as depression or anxiety)</p> <ul style="list-style-type: none"> Undertake physical health checks in mental health services Implement specialist mental health advocacy services Implement supported living (Richmond Fellowship) service Develop integrated care pathways to address physical and mental health needs where appropriate Implement joint working arrangements with GPs & TEWV to ensure that primary care and secondary care pathways are inter-linked to address mental health and physical health needs Implement Health Trainer model aimed at people with poor mental health 	<p>DCC (Public Health)</p> <p>CCGs</p> <p>CCGs</p> <p>TEWV / CCGs</p> <p>TEWV / CCGs</p> <p>DCC (Public Health)</p>	<p>November 2014</p> <p>March 2015</p> <p>March 2015</p> <p>December 2015</p> <p>December 2015</p> <p>March 2016</p>	<p>TEWV Trust Business Plan</p> <p>CCG Operational / Strategic Plans</p> <p>Better Care Fund Plan</p>
<p>Work with the voluntary and community sector to develop opportunities for early identification of those people at risk of social isolation</p> <ul style="list-style-type: none"> Development of Community Chest and evaluation of benefits Implement a volunteer service for mental health 	Social Care Reform Board / CCG's	<p>April 2015</p> <p>March 2016</p>	<p>CCG Operational / Strategic Plans</p> <p>Better Care Fund Plan</p>

Outcome: Reduced suicides

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Implement the multi-agency Mental Health and Suicide Prevention Strategy for County Durham</p> <ul style="list-style-type: none"> • Roll out the Mental Health Framework Implementation Plan • Undertake a pilot programme in Sedgefield related to Suicide Prevention • Implement Mental Health preventative services • Develop plan to make County Durham a Suicide Safer County • Implement suicide community response programme including early alert process for individuals at risk of suicide or self harm • Build capacity within services and communities through delivery of suicide prevention training • Evaluate suicide bereavement services 	<p>DCC (Public Health) / CCGs</p>	<p>March 2017</p> <p>July 2014 March 2015 March 2016 April 2015 February 2015</p> <p>December 2014</p> <p>December 2015</p>	<p>CCG Operational / Strategic Plans</p> <p>Better Care Fund Plan</p>

Outcome: Increased physical activity and participation in sport and leisure

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Provide a wide range of physical activity opportunities across County Durham to support more active lifestyles</p> <ul style="list-style-type: none"> • Review the Physical Activity Delivery Plan, providing a greater range of opportunities to increase participation and activity levels in County Durham • Develop and provide a community core offer for physical activity across the county, with additional targeted opportunities based on geography/health need 	<p>DCC (Public Health / Neighbourhoods)</p>	<p>March 2015</p> <p>March 2015</p>	<p>Council Plan</p>

STRATEGIC OBJECTIVE 5: PROTECT VULNERABLE PEOPLE FROM HARM

Outcome: Provide protection and support to improve outcomes for victims of domestic abuse and their children

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Work together to provide support to victims of domestic abuse from partners or members of the family</p> <ul style="list-style-type: none"> • Increase awareness of domestic abuse across services, organisations and the general public, through awareness raising campaigns • Provide training to all relevant staff across all appropriate agencies and organisations in order to recognise and identify signs and indicators of abuse, know how to deal with disclosure and understand what constitutes significant concern • Continue to develop service delivery across agencies in line with lessons learned from Domestic Homicide reviews • Develop a perpetrator strategy to understand what preventative intervention and rehabilitation capabilities are available for perpetrators of domestic abuse and sexual violence and identify areas for activity • Target teenage perpetrators of sexual violence in order to break the cycle of abuse 	<p>Safe Durham Partnership (Domestic Abuse Forum Executive Group)</p>	<p>March 2015 March 2015 March 2015 March 2015 March 2015</p>	<p>Safe Durham Partnership Plan Domestic Abuse Strategy Council Plan</p>

Outcome: Safeguarding children and adults whose circumstances make them vulnerable and protect them from avoidable harm

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Work in partnership to identify signs of family vulnerability and to offer support earlier</p> <p>Embed the Think Family approach:</p> <ul style="list-style-type: none"> • Train staff in restorative approaches for early intervention when working with families • Incorporate 'Think Family' when managing offenders and domestic abuse services, by working with the whole family rather than individuals in isolation • Integrate Think Family into Multi Agency Partnership (MAP) processes so that all partnerships understand the processes to support the family 	<p>Think Family Partnership</p>	<p>March 2015</p>	<p>Council Plan</p>

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Work in partnership to support vulnerable adults and children at risk of harm and work to stop abuse taking place</p> <ul style="list-style-type: none"> All partner agencies to have a strategic role in relation to safeguarding and promoting the welfare of children and adults within their organisation Work in partnership to review the Assessment, Intervention and Moving on (AIM) procedures to provide an operational framework to support the young people who sexually harm other children and the victims of their offences 	<p>Local Safeguarding Children's Board/ Safeguarding Adults Board</p> <p>DCC (CDYOS)</p>	<p>March 2015</p> <p>March 2015</p>	<p>Local Safeguarding Children's Board Plan</p> <p>Safeguarding Adults Board Plan</p> <p>Youth Justice Plan</p>
<p>Ensure policies and procedures are in place to make it easier for individuals to highlight concerns of abuse, such as more efficient reporting procedures</p> <ul style="list-style-type: none"> Review Safeguarding Framework to clarify the working arrangements between the Safeguarding Adults Board and Local Safeguarding Children's Board and the relationships with the Health and Wellbeing Board, Children and Families Partnership and Safe Durham Partnership Ensure all partners are aware of overarching safeguarding procedures by ensuring they are represented on the Safeguarding Adults Board and Local Safeguarding Children's Board 	<p>Local Safeguarding Children's Board/ Safeguarding Adults Board</p>	<p>September 2014</p> <p>March 2015</p>	<p>CAS Service Plan</p> <p>Safeguarding Framework</p>

STRATEGIC OBJECTIVE 6: SUPPORT PEOPLE TO DIE IN THE PLACE OF THEIR CHOICE WITH THE CARE AND SUPPORT THAT THEY NEED

Outcome: Improved End of Life Pathway

Strategic Actions/Sub-Actions	Lead	Timescale	Link to Relevant Plan
<p>Adopt and implement the North East charter relating to a 'good death' which aims to provide a guide to those people who are involved with people who are approaching the end of their life, to ensure the right services are available at the right time for individuals who are dying, their families and carers</p> <ul style="list-style-type: none"> • Develop primary care mechanisms for identifying end of life patients • Progress advanced/anticipatory care planning for end of life patients by ensuring joined up working between GPs, residential homes and the voluntary sector • Develop Integrated Pathways • Incorporate requirements for quality monitoring of end of life care in residential and nursing home contracts 	<p>Community Services and Care Closer to Home Group</p>	<p>March 2015</p> <p>March 2015</p> <p>March 2015</p> <p>April 2015</p>	<p>NHS North East 'Good Death'</p> <p>CCG Operational / Strategic Plans</p>
<p>Reduce the number of emergency admissions to hospital for people who have been identified as approaching their end of life by providing services in the community</p> <ul style="list-style-type: none"> • Expand the End of life learning development pathway training • Roll out of guide to help GP's maximise the potential of the GP palliative care registers 	<p>Community Services and Care Closer to Home Group</p>	<p>March 2015</p> <p>March 2015</p>	<p>CCG Operational / Strategic Plans</p>

GLOSSARY & ABBREVIATIONS

A&E	Accident and Emergency	DCC	Durham County Council
Asset based approach	Using the skills and knowledge of individuals within a community, rather than focusing on the problems within a community. This approach aims to empower individuals.	'Deciding Right'	Deciding right is a north east wide initiative - the first in the UK - to integrate the principles of making advance care decisions for all ages. It brings together advance care planning, the Mental Capacity Act, cardiopulmonary resuscitation decisions and emergency healthcare plans.
CAMHS	Child and Adolescent Mental Health Services	DDES	Durham Dales, Easington and Sedgefield
Carers Assessment	The draft Care Bill gives local authorities responsibility to assess carer's own needs for support, regardless of level of support provided.	DIG	Durham Information Guide
CAS	Children and Adults Services	GP	General Practitioner
CCG	Clinical Commissioning Groups are clinically-led groups that include all of the GP groups in their geographical area. The aim of this is to give GPs and other clinicians the power to influence commissioning decisions for their patients.	Healthy Child Programme	The healthy child programme sets out the good practice framework for prevention and early intervention services for children and young people and recommends how health, education and other partners working across a range of settings can significantly enhance a child's or young person's life chances.
CDDFT	County Durham and Darlington NHS Foundation Trust	Health Trainer Champion / Service	Health Trainer Champions work with Health Trainer services. They help Health Trainers engage with individuals and communities. Health Trainer Champions have a good understanding of their communities and help people to appropriately access services (NHS and non NHS).
CDYOS	County Durham Youth Offending Service	ND	North Durham
CVD	Cardiovascular Disease	NICE	National Institute for Health and Care Excellence
CYP	Children and Young People	North East Charter for a Good Death	North East charter, which will guide health, social care, community, voluntary and other organisations, groups or individuals who plan, develop and provide end of life care or support. It will help to ensure the right services are available at the right time for individuals who are dying, their families and carers.

GLOSSARY & ABBREVIATIONS

Poorly Child Pathway	The Poorly Child Pathway is a plan to ensure that when children require medical intervention they receive it in the right place at the right time.	Think Family	Think Family is an approach that requires all agencies to consider the needs of the whole family when working with individual members of it. It encourages a broader view of need than that normally adopted. To 'Think Family' is to understand that children's problems do not sit in isolation from their parents, and that parents' problems impact on their children. This approach ensures that all family members are able to get the support they need, at the right time, to help their children achieve good outcomes.
Telehealth	Telehealth is the delivery of health-related services and information via telecommunications technologies.	UNICEF	United Nation's Children's Fund (formerly United Nation's International Children's Emergency Fund)
Telecare	Telecare is the term for offering remote care of elderly and physically less able people, providing the care and reassurance needed to allow them to remain living in their own homes eg fall detectors, smoke detectors, bed occupancy sensor.	UNICEF Baby Friendly Scheme	The Baby Friendly Initiative is a worldwide programme of the World Health Organisation and UNICEF to encourage maternity hospitals to implement the 'Ten Steps to Successful Breastfeeding' and to practise in accordance with the 'International Code of Marketing of Breast Milk Substitutes' as well as work to implement the 'Seven Point Plan for Sustaining Breastfeeding in the Community' and ensure quality training and professional standards for midwifery and health visiting staff.
TEWV	Tees, Esk and Wear Valley NHS Foundation Trust	VWALS	Veterans Wellbeing Assessment and Liaison Service



North Durham Clinical Commissioning Group

City Hospitals Sunderland 
NHS Foundation Trust



Durham Dales, Easington and Sedgefield
Clinical Commissioning Group

North Tees and Hartlepool 
NHS Foundation Trust

Tees, Esk and Wear Valleys 
NHS Foundation Trust

County Durham 
and Darlington
NHS Foundation Trust



July 2014

Published by Durham County Council

On behalf of the County Durham Health and Wellbeing Board

Available online at www.durham.gov.uk/jhws

Produced in collaboration with:

Durham County Council, North Durham Clinical Commissioning Group, Durham Dales,
Easington and Sedgefield Clinical Commissioning Group, County Durham and Darlington
NHS Foundation Trust, Tees, Esk and Wear Valleys NHS Foundation Trust, North Tees and Hartlepool
NHS Foundation Trust, City Hospitals Sunderland NHS Foundation Trust, Healthwatch County Durham.

County Durham Joint Health and Wellbeing Strategy

2014-2017

Delivery Plan

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