



EAST AYRSHIRE COMMUNITY PLAN
IMPROVING HEALTH AND WELLBEING
ACTION PLAN 2011 – 2015

(COMMUNITY HEALTH PARTNERSHIP ACTION PLAN 2011-15)

LOCAL OUTCOME 1	ACTIVE, HEALTHY LIFESTYLES AND POSITIVE BEHAVIOUR CHANGE PROMOTED
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Links to SOA	<ul style="list-style-type: none"> • National Outcome 6 • National Outcome 5 <p>We live longer, healthier lives Our children have the best start in life and are ready to succeed</p>
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Indicator/s (noting frequency/ type/source)	Baseline at 2010/11	Progress Target/s to 2014/15	End target/s Direction of travel
To be determined during update of Single Outcome Agreement			

WORKSTREAM 1.1	Physical activity and healthy eating
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Actions	Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	<p>Provide a range of activities and interventions to support and encourage active, healthy lifestyles and positive behaviour change</p> <p>Adults - Activity</p> <ul style="list-style-type: none"> • Programme of physical activity programmes including exercise classes and health walks with an annual attendance of 15,000 delivered • Activity on Prescription initiative developed and implemented – 500 members per year <p>Adults – Healthy Lifestyles</p> <ul style="list-style-type: none"> • 2,000 attendances at outreach services per year, including the Community Health Improvement Partnership (CHIP) Van, events and community group visits 	<p>2011-15</p> <p>2011-15</p> <p>2011-15</p>	<p>Improving Health Group- CHP Lead Officer Public Health (EAC-Leisure Services)</p>

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		<p>Adults – Health Behaviour Change</p> <ul style="list-style-type: none"> Intensive individual and group support provided to 100 people referred via health and social care professionals Play, sport and health related activities delivered in support of 6 national campaigns per year to promote positive health behaviour change amongst adults <p>Commonwealth 2014 Legacy</p> <ul style="list-style-type: none"> Range of Active Nation themed activities delivered to support legacy with 20,000 attendances per year Signage and way markers developed for East Ayrshire Community Hospital (EACH) Grounds of EACH developed as part of Greening the NHS Estate 	<p>2011-15</p> <p>2014/15</p> <p>2012/13</p> <p>2014/15</p>	Improving Health Group- CHP Lead Officer Public Health (EAC-Leisure Services)
b.	Integrate maternal, infant and early years nutrition training (including breastfeeding, formula feeding and weaning) into inter-agency training programmes for early years staff and other child care providers	<p>Healthy Eating</p> <ul style="list-style-type: none"> 2 staff training sessions on maternal and infant nutrition delivered per year 	2011-15	Improving Health Group- CHP Lead Officer Public Health (NHS Public Health)
c.	Implement the 'Breastfeed Happily Here' scheme	<ul style="list-style-type: none"> 'Breastfeed Happily Here' scheme fully implemented in all NHS and Local Authority establishments 	2012/13	
d.	Work with relevant partners to develop an inter-agency obesity strategy for Ayrshire	<ul style="list-style-type: none"> Strategy and action plan developed and implemented 	2013-15	

WORKSTREAM 1.2
Oral health

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Deliver training for 'Search for a Smile', pilot its implementation and, pending results, rollout to all primary and special needs schools	<ul style="list-style-type: none"> 48 teaching staff (total) trained on basic oral health promotion and use of new educational resource 'Search for a Smile' programme rolled out 	2011-15	Improving Health Group- CHP Lead Officer Public Health (NHS Oral Health)
b.	Roll out community development oral health pilot project (North West Kilmarnock) to Dalmellington and Doon Valley	<ul style="list-style-type: none"> Steering group established Training delivered to 15 local childcare services, including nurseries, primaries, youth projects and community groups Dental information stations established across 5 early years establishments and 1 community pharmacy 	2011/12 2012/13 2012/13	
c.	Establish oral health in the workplace programme in NHS Ayrshire and Arran	<ul style="list-style-type: none"> Mapping exercise of vending machines in hospital bases completed Branding and promotional materials developed to raise awareness of the oral health in the workplace programme Mouthwash pilot programme established in 2 hospital settings 8 hospital volunteers based across 2 settings trained in basic oral health promotion/key messages Oral health product sales established in Women's Royal Voluntary Service in 2 hospital bases 	2011/12 2012/13 2011/12 2011/12 2012/13	

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		<ul style="list-style-type: none"> 8 open days delivered across 3 dental access centres to raise awareness among NHS staff Oral health promotion e-learning course developed for NHS staff 	2012/13	
d.	Evaluate 'Open Wide' pilot and implement findings, as appropriate	<ul style="list-style-type: none"> Evaluation report completed 	2012/13	Improving Health Group- CHP Lead Officer Public Health (NHS Oral Health)
e.	Participate with Change Fund Team to develop oral health section of training package for Learning Disabled care agencies in East Ayrshire	<ul style="list-style-type: none"> Training Package ready to be delivered to Learning Disabled care agencies in East Ayrshire 	2012/13	
f.	Plan for roll out of Caring for Smiles Training to care homes for older people in East Ayrshire	<ul style="list-style-type: none"> 'Caring for Smiles' training rolled out to care homes for older people in East Ayrshire 	2013/14	
g.	Participate with National Oral Health Improvement Group for prisons, and prisoners with HMP Kilmarnock to develop training package for prisoners	<ul style="list-style-type: none"> Training package piloted and evaluated Hostel staff trained 	2012/13	

WORKSTREAM 1.3

Tobacco

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Deliver Smoking Cessation Service throughout East Ayrshire	<ul style="list-style-type: none"> Specialist services delivered via groups and 'one to one' interventions (*Target still to be determined) 	2014/15	Improving Health Group- CHP Lead Officer Public Health

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		<ul style="list-style-type: none"> Pharmacy services delivered (*Target still to be determined) Services delivered to most disadvantaged and vulnerable groups (*Target still to be determined) <p>*Targets for the specialist services will be determined by new HEAT targets which replace the present HEAT target in March 2011</p>	2012/13	(NHS Freshairshire)
b.	Increase referrals to Specialist Smoking Cessation Service	<ul style="list-style-type: none"> Referrals to specialist service increased by 25% per year (baseline 400 at 2010) 60% of referrals from areas of high smoking prevalence 	2014/15	
c.	Deliver Brief Interventions training programmes for service providers	<ul style="list-style-type: none"> Generic Training delivered monthly – 40 courses delivered across Ayrshire and Arran 20 Mental Health staff trained to provide ongoing smoking cessation support 20 other specialist staff trained to provide ongoing smoking cessation support All community midwives offered training in brief interventions - 80% of midwives trained in brief interventions 	2014/15	
d.	Increase capacity for smoking cessation through volunteering	<ul style="list-style-type: none"> 3 Volunteers recruited and trained per year 10 events supported by volunteers per year 	2011-15	Improving Health Group- CHP Lead Officer Public Health (NHS Freshairshire)

WORKSTREAM 1.4

Sexual Health

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Increase the awareness and knowledge of the factors which affect sexual health and wellbeing	<ul style="list-style-type: none"> Research project to establish attitudes, beliefs and knowledge within Kilmarnock college completed 	2011/12	Improving Health Group- CHP Lead Officer Public Health (NHS Health Promotion)
b.	Deliver sexual health initiatives in partnership	<ul style="list-style-type: none"> Interventions developed in response to research findings 	2014/15	
		<ul style="list-style-type: none"> 10% increase per year in sign up points for 'C' Card scheme (Baseline October 2010 - 21 sign up facilitators in East Ayrshire) 	2014/15	
		<ul style="list-style-type: none"> 10% increase per year to Sexual Health Ayrshire (SHAYR) - measured by use of website (Baseline at April 2010 – 15,700 hits) 	2014/15	

LOCAL OUTCOME 2**ALCOHOL AND DRUG RELATED HARM REDUCED****Links to SOA**

- National Outcome 6
- National Outcome 7
- National Outcome 8
- National Outcome 9
- National Outcome 11

We live longer, healthier lives
 We have tackled the significant inequalities in Scottish society.
 We have improved the life chances for children, young people and families at risk.
 We live our lives safe from crime, disorder and danger.
 We have strong, resilient and supportive communities where people take responsibility for their own actions and how they affect others.

Indicator/s (noting frequency/ type/source)	Baseline at 2010/11	Progress Target/s to 2014/15	End target/s Direction of travel
To be determined during update of Single Outcome Agreement			

WORKSTREAM 2.1

Recognise and build on the skills of all stakeholders within the Alcohol and Drug Partnership (ADP)

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Develop the involvement and contribution of the wider partnership	<ul style="list-style-type: none"> • 2 Alcohol and Drug Partnership (ADP) consultation and engagement events delivered per year 	2011-15	CHP Lead Officers for ADP (ADP Advisory Group)
b.	Increase the knowledge base of the alcohol and drug agenda with the Alcohol and Drugs Partnership stakeholders	<ul style="list-style-type: none"> • 2 information sessions delivered per year within East Ayrshire for local stakeholders 	2011-15	

WORKSTREAM 2.2**Education: Preventing alcohol and drug use in young people**

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Implement Substance Misuse Education aligned to Curriculum for Excellence in all educational establishments	<ul style="list-style-type: none"> Substance Misuse Education embedded into school curriculum and written into school improvement plans - implemented in all secondary schools 	2012/13	CHP Lead Officers for ADP
b.	Utilise key professional expertise to reinforce lessons on substance misuse	<ul style="list-style-type: none"> Teachers' plans developed with external agencies to support the delivery of lessons on substance misuse At least 2 experts invited by each school per year to support lessons 	2011- 15	
c.	Provide ongoing Continuing Professional Development for staff on basic alcohol and drug awareness	<ul style="list-style-type: none"> All professionals working with young people to participate in basic alcohol/drug awareness sessions - 9 sessions delivered: one per learning community 	2012/13	
d.	Raise awareness of alcohol/drug services available to support young people	<ul style="list-style-type: none"> Database of services compiled and distributed to all schools/educational establishments 	2012/13	
e.	Offer workshops to parents/carers to raise awareness of basic alcohol/drugs	<ul style="list-style-type: none"> 1 workshop offered to parents/carers in every learning community 	2012/13	

WORKSTREAM 2.3

Prevention Community Focused: Positive attitudes positive choices

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Deliver Alcohol Brief Interventions (ABI)	<ul style="list-style-type: none"> xxx ABIs delivered within primary care settings to meet HEAT H4 target across NHS Ayrshire and Arran 	2011-15	CHP Lead Officers for ADP
b.	Promote positive recovery stories in local media	<ul style="list-style-type: none"> 3 positive recovery stories in local media per year 	2011-15	CHP Lead Officers for ADP (ADP Advisory Group)
c.	Increase opportunities for diversion activities for young people	<ul style="list-style-type: none"> 25,000 children and young people engaged in positive sport/leisure opportunities per year 	2011-15	CHP Lead Officers for ADP
d.	Deliver whole population alcohol awareness	<ul style="list-style-type: none"> 1 national campaign supported locally per year 	2011-15	CHP Lead Officers for ADP (ADP Advisory Group)
e.	Deliver alcohol and drug awareness information and ABIs within communities through the CHIP Team as part of the wider health improvement programme	<ul style="list-style-type: none"> 50 Alcohol and drug awareness and information sessions delivered within communities per year 200 screening and ABIs delivered in a community setting per year 	2011-15	CHP Lead Officers for ADP (ADP Committee)

WORKSTREAM 2.4

Prevention Early Intervention: Supporting families and communities

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Review different models of available family therapy	<ul style="list-style-type: none"> Findings report and recommendations completed and submitted to ADP 	2012/13	CHP Lead Officers for ADP (ADP Advisory Group)
b.	Identify children and young people affected by parental substance misuse at an early age	<ul style="list-style-type: none"> Multi-agency training provided to all partnership staff 	2011-15	CHP Lead Officers for ADP

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
				(Child Protection Committee/ADP)
c.	Provide support to children affected by parental substance use	<ul style="list-style-type: none"> Dedicated support service developed and available to children affected by parental substance use 	2012/13	CHP Lead Officers for ADP (ADP Advisory Group)
d.	Deliver Alcohol Brief Interventions in maternity services	<ul style="list-style-type: none"> All women presenting to maternity services screened for alcohol related problems 	2011-15	CHP Lead Officers for ADP
e.	Provide age appropriate alcohol and drug services for children and young people	<ul style="list-style-type: none"> Dedicated support service for children and young people with substance misuse problems provided 	2012/13	CHP Lead Officers for ADP (ADP Committee)
f.	Provide overdose awareness and training sessions for families and concerned significant others	<ul style="list-style-type: none"> 20 individuals trained per year 	2011-15	CHP Lead Officers for ADP (ADP Advisory Group/Delivery Group)

WORKSTREAM 2.5

Treatment and Recovery: Promoting Recovery

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	Action Owner
a.	Recognise and develop peer mentors, family support groups and networks	<ul style="list-style-type: none"> Network of recovery 'champions' created 	2014/15	CHP Lead Officers for ADP (ADP Service Delivery Group)
b.	Develop a Recovery Oriented System of Care suitable for East Ayrshire's needs	<ul style="list-style-type: none"> Process developed for the implementation of a Recovery Orientated System of Care model 	2011/12	CHP Lead Officers for ADP
c.	Undertake a training needs analysis in line with the requirement of the Recovery Orientated System of care	<ul style="list-style-type: none"> Workforce development strategy for a wide range of staff based on the Recovery Orientated System of Care developed and implemented 	2014/15	CHP Lead Officers for ADP (ADP Advisory Group)

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	Action Owner
d.	Ensure the delivery of a range of interventions to promote the recovery of individuals with alcohol and/or drug problems	<ul style="list-style-type: none"> Range of alcohol and drug services established which comply with the national HEAT A11 target 	2011-14	CHP Lead Officers for ADP
e.	Consider the co-location of commissioned and provided drug and alcohol services within East Ayrshire	<ul style="list-style-type: none"> Feasibility plan for co-located drug and alcohol services produced by ADP 	2012/13	
f.	Provide easy access to and information about a wide variety of support and recovery options for people with alcohol and/or drug problems	<ul style="list-style-type: none"> Local directory of support and recovery treatment options produced and routinely updated 	2012-15	CHP Lead Officers for ADP (ADP Advisory Group)
g.	Review accessibility of services, for example hours of availability, geographical location, age related, gender related	<ul style="list-style-type: none"> 200 service users consulted on services that they use through the use of service user evaluation Service changes made accordingly 	2012/13	CHP Lead Officers for ADP (ADP Service Delivery Group)
h.	Identify prescribing 'champions' (GPs with special interest) and ensure they link prescribing practice with additional support	<ul style="list-style-type: none"> 5 prescribing 'champions' identified to improve access to wider support systems available to service users supported through primary care 	2013-14	CHP Lead Officers for ADP
i.	Implement a single shared assessment tool of recovery capital	<ul style="list-style-type: none"> Single shared assessment of recovery capital agreed and in use by all agencies signed up to an information sharing protocol 	2013/14	CHP Lead Officers for ADP ADP Service Delivery Group
j.	Link universal services into the formal alcohol and drug treatment community	<ul style="list-style-type: none"> Access and utilisation of community leisure/further education opportunities increased (0 baseline) 	2013/14	
k.	Strengthen the focus of adult substance misuse services on the needs of children and families	<ul style="list-style-type: none"> All assessment tools child centred 	2012/13	

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	Action Owner
i.	Examine the prison healthcare reform recommendations	<ul style="list-style-type: none"> All prisoners offered the option of take-home naloxone on release from the prison estate (naloxone - drug used to counter the effects of opioid overdose, for example, heroin or morphine overdose) Access to community support available to all prisoners on release from the prison estate 	2012/13	CHP Lead Officers for ADP NHS Ayrshire and Arran
m.	Develop and implement a take-home naloxone programme for people who use opiates to help prevent drug related deaths	<ul style="list-style-type: none"> 500 take-home naloxone kits distributed (25% of current estimated prevalence rate 2009) (Funding currently available to March 2012) 	2014/15	CHP Lead Officers for ADP ADP Advisory group.

WORKSTREAM 2.6

Protection: Reducing consumption and Law Enforcement

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Tackle alcohol and drug related crime	<p>Alcohol</p> <ul style="list-style-type: none"> Monitored licensed premises visited, including to ensure compliance with bottle marking scheme Reports submitted to Licensing Board Intelligence led youth alcohol action plans implemented during school holiday periods 1 Test Purchase operation implemented per month to ensure compliance with licensing age restrictions 	2011 - 2015	CHP Lead Officers for ADP (Strathclyde Police)

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		<ul style="list-style-type: none"> • Stop searches of young people for alcohol implemented <p>Drugs</p> <ul style="list-style-type: none"> • Community intelligence developed to: <ul style="list-style-type: none"> – identify those concerned in the supply of controlled drugs – target offenders • Target packages to deal with drug suppliers increased • Disclosures in relation to drugs supply made to East Ayrshire Council increased to allow action to be taken by the Council, as appropriate 		CHP Lead Officers for ADP (Strathclyde Police)
b.	<p>Further implement the Public Reassurance Model within part of Ward 2 focusing on four priority concerns</p> <ul style="list-style-type: none"> – Drunk and Disorderly Behaviour – Drug Dealing and Misuse – Violent crime – Housebreaking and other forms of theft 	<ul style="list-style-type: none"> • Public Reassurance pilot within Ward 2, North West Kilmarnock reviewed and evaluated • Model of 'best practice' for Public Reassurance identified and rolled out to other communities, as appropriate 	2011 - 2015	Strathclyde Police

For Community Planning purposes this section will be reported through the Improving Community Safety Action Plan.

LOCAL OUTCOME 3**IMPACT OF MULTIPLE DEPRIVATION AND POVERTY ON THE HEALTH AND WELLBEING OF THE MOST VULNERABLE INDIVIDUALS AND COMMUNITIES ADDRESSED****Links to SOA**

- **National Outcome 7**

We have tackled the significant inequalities in Scottish Society.

Indicator/s (noting frequency/ type/source)	Baseline at 2010/11	Progress Target/s to 2014/15	End target/s Direction of travel
To be determined during update of Single Outcome Agreement			

WORKSTREAM 3.1**Income Maximisation and Benefit Take Up**

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP LEAD OFFICER Action Owner
a.	Provide benefit checks for all new carers who register with the Carers Centre	<ul style="list-style-type: none"> • 250 benefits checks completed per year for new carers 	2011-15	CHP Lead Officer for Financial inclusion (EA Carers Centre)
b.	Provide support and assistance in the form of benefits advice, income maximisation and energy efficiency to young carers, not in education, employment or training, who are in the process of setting up their own tenancy	<ul style="list-style-type: none"> • 100 young people provided with support and assistance per year 	2011-15	
c.	Support and improve the systems that are in place to maximise income from benefit and debt counselling and money advice	<ul style="list-style-type: none"> • 500 people aged over 60 benefiting from benefits advice per year 	2011-15	CHP Lead Officer for Financial Inclusion (DWP Pension Service)

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP LEAD OFFICER Action Owner
d.	Further develop Joint Team partnership working arrangements for provision of benefit checks and income maximisation services	<ul style="list-style-type: none"> 1,000 people assisted per year, with 650 benefiting financially and 100 being referred on for additional services 	2011-15	(i.e. Joint team)
e.	Promote and raise awareness of basic benefits and local sources of appropriate information, advice and assistance	<ul style="list-style-type: none"> 12 promotional events delivered per year 	2011-15	CHP Lead Officer for Financial Inclusion (Benefit Take Up Group)
f.	Provide benefit checks and income maximisation, including better off calculations for those seeking employment - Citizens Advice Bureau (CAB)	<ul style="list-style-type: none"> Income maximisation with a value in excess of £3.5m achieved per year for service users <p>(Subject to conclusion of new CAB Service Level Agreement by March 2011)</p>	2011-15	CHP Lead Officer for Financial Inclusion (CAB)

WORKSTREAM 3.2

Tackling the causes of poverty and building financial capability

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead officer Action Owner
a.	Support the roll out of 'Money Made Clear' information within the local community	<ul style="list-style-type: none"> 'Money Made Clear' information available and accessible within local communities 	2011/12	CHP Lead Officer for Financial inclusion
b.	Tackle worklessness for households or individuals within NW Kilmarnock (Subject to confirmation of funding)	<ul style="list-style-type: none"> 500 people in NW Kilmarnock engaged with per year 160 people in NW Kilmarnock placed in employment per year 	2011-14	CHP Lead Officer for Financial inclusion (Jobcentre Plus)

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead officer Action Owner
c.	Provide advice, support and assistance to help people deal with debts, manage their money more effectively and make maximum use of the income available to them	<ul style="list-style-type: none"> 375 new money advice cases taken on per year (Subject to conclusion of new CAB Service Level Agreement by March 2011) 	2011-15	CHP Lead Officer for Financial inclusion (CAB)
d.	Target local Credit Union activity at increasing membership and working further toward operational sustainability	<ul style="list-style-type: none"> 15% annual growth in new members benefiting from Credit Union membership, against a baseline of 1,640 active adult members in April 2010 	2011-15	CHP Lead Officer for Financial inclusion (Credit Unions)
e.	Provide information on Credit Union financial products and services	<ul style="list-style-type: none"> 200 members used easy saving facilities per year 80 members benefited from obtaining low cost loans per year 12% annual growth in new junior savers, against a baseline of 597 junior savers in April 2010 1 major marketing campaign implemented per year 4 community events implemented per year 	2011-15	
f.	Provide appropriate information, advice and assistance to individuals and families in order to prevent fuel poverty	<ul style="list-style-type: none"> 12 Energy Advice Surgeries provided per year in housing offices, local offices or libraries 12 talks/events delivered per year to raise public awareness of energy issues, with follow up individual advice or home visits as required 	2011-15	CHP Lead Officer for Financial inclusion (EA Energy Advice Unit)

WORKSTREAM 3.3

Improving the health and wellbeing of vulnerable groups

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Work in partnership to address the health needs of vulnerable client groups and facilitate integration into mainstream services	<ul style="list-style-type: none"> Integrated care pathways for homelessness developed and updated (mental health, addictions, sexual health, primary care, podiatry, dental services) Outreach services provided within homeless hostels and Allies (76 per year) Befriending service for homeless clients provided – 20 per year (numbers to be confirmed if and when funding agreed – by March 2011) All homeless clients received hygiene packs 3 Health Events delivered in prison per year 	2013/14 2011-15 2011-15 2011-15 2011-15	Improving Health Group- CHP Lead Officer Public Health Improving Health Group- CHP Lead Officer Public Health (NHS Health Promotion)
b.	Provide anticipatory care interventions for the most vulnerable groups	<ul style="list-style-type: none"> 'Keepwell' health checks delivered for 0 – 20% most deprived communities and homeless population aged 35 – 64 yrs (Target will be available when funding is confirmed by the extension board—should be before March 2011) 	2012/13	Improving Health Group- CHP Lead Officer Public Health (NHS Keep Well)

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		produces details of reasons for people exiting services in order to improve evidence base for interventions and means to achieve outcomes	2011/12	
b.	Promote and sustain good physical health for people affected by mental illness	<ul style="list-style-type: none"> • Cancer screening included in 15 monthly Quality Outcome Framework at physical health reviews for people with poor mental health • 40 Community Mental Health Team service users per year supported to access screening services • Cancer prevention awareness raising training delivered to Community Mental Health Teams and all front line support staff – 100 staff across EAC, NHS and independent sector 	2012/12 2011-15 2012/13	CHP Lead Officers for Mental Health and Learning Disabilities (MH Sub Group)
c.	Continue to develop and test out the Prescribing Audit Tool (PAT)	<ul style="list-style-type: none"> • All practices using EMIS: <ul style="list-style-type: none"> – have access to PAT reports – work in collaboration with both prescribing advisers and Community Mental Health Teams re targeted service improvements based on prescribing practices and trends • ensure appropriate anti-depressant prescribing and access to psychological therapies as an alternative or adjunct therapy 	2011/12	
d.	Encourage all GP practices to complete PHQ9 assessments for patients presenting with low mood to assist in their treatment options, including referral to specialist services	<ul style="list-style-type: none"> • Baseline audit undertaken with guidelines issued to GPs • Use of PHQ9 assessments in primary care re-audited 	2011/12	
e.	As an early implementer pilot site, undertake work in relation to the phased development of	<ul style="list-style-type: none"> • Suitable tool developed to support local services in making best use of available 	2011/12	

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
	a model for measuring Demand, Capacity, Activity and Queue relating to psychological therapies	resource to match demand		
f.	Shift the balance of care from crisis intervention and response to prevention, enablement and rehabilitation	<ul style="list-style-type: none"> • Awareness of self help opportunities raised through publication on Community Planning Partners' websites • Range of condition specific multi disciplinary group work opportunities established - 2 support and development groups of service users established per year • Uptake of Named Persons and Advanced Statements increased by 10 per year (Baseline - Named Persons: 163, Advanced Statements: 82) 	<p>2012/13</p> <p>2011-15</p> <p>2011-15</p>	
g.	Implement "Living and Working in Partnership" East Ayrshire's Partnership in Practice Agreement (PIP)	<ul style="list-style-type: none"> • Actions within the PIP Delivery Plan progressed (due for completion March 2011) - progress to be reported annually 	2011-15	
h.	Promote "Better Health and Wellbeing": (included in Partnership in Practice Agreement)	<ul style="list-style-type: none"> • 'Open Wide Project' rolled out to a further 80% of care staff • WRAP(Wellness Recovery Action Planning) training delivered to a further 20 family carers – (12 already trained during initial pilot) • Learning Disability Sexuality training programme rolled out to ensure 20 care staff, 6 family carers and 20 individuals with LD are offered training • Feasibility of piloting mental wellbeing 	<p>2014/15</p> <p>2014/15</p> <p>2013/14</p> <p>2012/13</p>	CHP Lead Officers for Mental Health and Learning Disabilities (MH Sub Group)

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		indicators for people with Learning Disabilities explored		
i.	Work in partnership to implement alternative models of care and support as identified within the Integrated Resource Framework Action Plan (included in Partnership in Practice Agreement)	<ul style="list-style-type: none"> Recommendations of the Integrated Resource Framework implemented incrementally, commencing March 2011 (Target to be set in February 2011) 	2011-15	
j.	Ensure there is extensive public information available with respect to suicide prevention supports	<ul style="list-style-type: none"> Details collated of all existing resources in East Ayrshire to a single location via the Chose Life Sub Group membership Details of all resources included on each Community Planning Partner's websites Robust, very visible materials and events for suicide prevention week delivered annually 	2011/12 2012/13 2011-15	CHP Lead Officers for Mental Health and Learning Disabilities (Choose Life Steering Group)
k.	Continue to deliver training and education to agency employees and the wider community to assist in early identification of suicide risks and facilitate access to appropriate supports	<ul style="list-style-type: none"> Applied Suicide Intervention Skills Training (ASIST) provided to 100 people per year Safe talk (suicide alertness training) provided to 100 people per year 6 people trained as ASIST Trainers 	2011-15	
l.	Provide children, young people and families with access to a full and accurate diagnosis with associated advice and support on a multi-disciplinary basis with respect to Autistic Spectrum Disorder	<ul style="list-style-type: none"> Current diagnostic pathways and routes to access support and services across agencies audited Revised multi-disciplinary pathway drafted for 	2011/12 2011/12	CHP Lead Officers for Mental Health and Learning Disabilities ASD Sub Group

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		Community Health Partnership consideration		
m.	Take account of autism in all clinical and social care assessments	<ul style="list-style-type: none"> Multi-agency autism training strategy developed Autism awareness training sessions provided to 50 people across agencies per year 	2011/12 2011-15	
n.	Establish single point of contact for people with an autism diagnosis and their carers	<ul style="list-style-type: none"> Potential evaluated for an autism specific single point of contact within East Ayrshire based on benchmarking other areas which have done this against local service provision 	2012/13	
o.	Ensure transitions from children's to adult services, from establishment and hospital care and from parental home to independence, are well co-ordinated and include all stakeholders	<ul style="list-style-type: none"> Transitions specific service established Current good practice available nationally audited Accessible information developed regarding transitions for all stakeholders Number of person centred plans undertaken increased by 40 per year (Baseline – 202 in 2010) 	2012/13 2012/13 2012/13 2011-15	CHP Lead Officers for Mental Health and Learning Disabilities MH and LD Partnership

WORKSTREAM 4.2

Long Term Conditions (LTC)

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Reduce admission or readmission to hospital for Long term Conditions using risk prediction tools and developing case/care management approaches through	<ul style="list-style-type: none"> 4 General Practitioner (GP) practices identified within East Ayrshire to develop case/care management approach 	2011/12	CHP Lead Officer for Long Term Conditions/ Rehab

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
	partnership working	<ul style="list-style-type: none"> • Within these practices, SPARRA data used as a prediction tool - 100% established • Subject to learning from early implementation, risk prediction and case/care management process rolled out to all practices • New district nursing arrangements in place, coordinating, leading and supporting case/care management • GP communication and engagement arrangements established across all practices • Pilot site identified and agreed to introduce 'virtual ward' concept to community services 	<p>2011/12</p> <p>2012-15</p> <p>2013/13</p> <p>2012/13</p> <p>2011/12</p>	CHP Lead Officer for Long Term Conditions/ Rehab
b.	Develop multi-agency anticipatory care plans for people with Long Term Conditions that are shared between in hours and out-of-hours services	<ul style="list-style-type: none"> • Electronic Health Notification Forms (eHNF) developed for 100% of SPARRA patients within the 4 identified GP practices (as above) • Electronic Health Notification Forms (eHNF) developed for 100% of SPARRA patients within 3 identified care homes • Anticipatory Care Plans used for appropriate individuals within 4 identified practices • Anticipatory Care Plans used for appropriate individuals within 3 identified care homes • Baseline training needs analysis developed for 3 identified care homes 	<p>2012/13</p> <p>2012/13</p> <p>2012/13</p> <p>2012/13</p> <p>2012/13</p>	
c.	Implement the Integrated Resource Framework project, working with 10	<ul style="list-style-type: none"> • Project Initiation Document (PID) in place setting out actions and timescales for the 	2011/12	

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
	identified individuals who have Chronic Obstructive Pulmonary Disease (COPD) and have the support of a District Nurse and Home Carer	<p>Integrated Resource Framework COPD initiative developed</p> <ul style="list-style-type: none"> Home care staff training arrangements established Completed implementation report with agreed service changes and budgetary arrangements produced 	<p>2011/12</p> <p>2012/13</p>	

WORKSTREAM 4.3

Rehabilitation and Enablement

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Develop an Ayrshire Joint Equipment service	<ul style="list-style-type: none"> Ayrshire action plan developed by joint equipment group Recommendations in relation to service changes made to Community Health Partnership and Strategic Alliance Agreed actions implemented 	<p>2011/12</p> <p>2011/12</p> <p>2013/14</p>	CHP Lead Officer for Long Term Conditions/
b.	Develop Single Point of Contact to support an integrated model of health and social care service delivery at locality/team level within East Ayrshire	<ul style="list-style-type: none"> Report prepared on Early Implementation Initiative arrangements based in East Ayrshire Community Hospital including demonstration of: <ul style="list-style-type: none"> reduced length of stay in Burnock Ward improved care coordination, more streamlined services and reduced duplication of effort 	2011/12	CHP Lead Officer for Long Term Conditions/ Rehab

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		<ul style="list-style-type: none"> • Subject to learning from above: <ul style="list-style-type: none"> – 2 further sites identified across East Ayrshire and Single Point of Contact arrangements introduced – all home care staff within identified sites trained in re-ablement approach 	2013/14	
c.	Implement the National guidance on community falls prevention and management	<ul style="list-style-type: none"> • System developed to identify repeat fallers through Risk Management Centre • Pathways established for repeat fallers to be screened and assessed through community teams • Falls pathway agreed with Accident and Emergency at Crosshouse and Ayr hospitals • Falls prevention training delivered to all home care staff working within re-ablement service • Positive steps programme used within all day centres/sheltered housing units • 30 brief interventions provided to clients who fall as a result of alcohol use per year • Baseline established for the number of individuals who fall and go on to take part in community based exercise programmes • Pathway established for services to refer individuals who have fallen into community based exercise programmes 	2011/12 2012/13 2012/13 2012/13 2012/13 2011-15 2011/12 2011/12	CHP Lead Officer for Long Term Conditions/Rehab

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
d.	Develop integrated approach to staff training and development	<ul style="list-style-type: none"> Formal training programme developed for health and social care staff 	2012/13	
e.	Promote and oversee improvements in Occupational Therapy service delivery across and between NHS Ayrshire and Arran and the Ayrshire Councils	<ul style="list-style-type: none"> Future service delivery model developed, implementation plan agreed and progress reported 	2012-15	

WORKSTREAM 4.4	Telehealthcare
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Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Support the self-monitoring of individuals in their own homes, targeting individuals with long term conditions, dementia and learning disabilities	<ul style="list-style-type: none"> 20 individuals using Telehealth equipment within own homes 	2011/12	CHP Lead Officers for Long Term Conditions/ Rehab, MHLD and Older People
		<ul style="list-style-type: none"> Integrated monitoring systems and protocols established with identified GP practices and telemonitoring centre 	2011/12	
b.	Establish a framework for the assessment, provision and maintenance of telehealthcare equipment	<ul style="list-style-type: none"> Current practice and stock management reviewed 	2011/12	
		<ul style="list-style-type: none"> Protocols, systems and procedures established 	2011/12	
		<ul style="list-style-type: none"> Audit of new systems completed and changes implemented 	2011/12	
		<ul style="list-style-type: none"> Joint staff training programme delivered 	2011/12	CHP Lead Officers for Long Term Conditions/ Rehab, MHLD and Older People

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
c.	Develop performance management systems for telehealthcare	<ul style="list-style-type: none"> • Purchase management system developed • Training programme delivered to staff • Performance monitoring framework established 	2011/12 2011/12 2011/12	CHP Lead Officers for Long Term Conditions/ Rehab, MHL D and Older People
d.	Promote safety and security for individuals who have telehealthcare package	<ul style="list-style-type: none"> • Smoke detectors purchased and installed for all individuals in receipt of telehealthcare • Medication dispensers purchased and provided to identified individuals across East Ayrshire in line with care commission requirements 	2011/12 2011/12	
e.	Identify individuals at risk of falling	<ul style="list-style-type: none"> • Clients using telecare to prevent falls increased by 50% in East Ayrshire (Baseline to be established 2011) • Number of clients with addiction issues using telecare, who fall increased by 50% (Baseline to be established 2011) 	2011-15 2011-15	
f.	Raise awareness of opportunities to utilise telehealthcare equipment	<ul style="list-style-type: none"> • Minimum of 2 public awareness sessions in relation to telehealthcare convened • Minimum of 2 awareness sessions for Partnership professionals convened • Demonstration facility established in East Ayrshire 	2012/13 2012/13 2013/14	
g.	Enhance support systems and respite for carers through the use of telecare systems	<ul style="list-style-type: none"> • Available equipment identified • Pilot group of carers identified (through CHP Carers Sub Group Forum) 	2011/12 2011/12	

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		<ul style="list-style-type: none"> Pilot reviewed and rolled out 	2012/13	

WORKSTREAM 4.5	Older People – Reshaping Care for Older People
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Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Support older people to feel safe in their own home (National Community Care Outcomes Framework Theme 1: User Satisfaction)	<ul style="list-style-type: none"> Number of older people accessing telecare equipment increased by xx% (target to follow-February 2011) 	2011-15	CHP Lead Officers for Older People
b.	Build community capacity through maximising use of supported accommodation units to increase opportunities for social interaction (National Community Care Outcomes Framework Theme 1: User Satisfaction)	<ul style="list-style-type: none"> 1 new community/recreational activity for older people established in each of the 5 core units per year Annual programme of leisure and lifestyle activities supported in each of the 5 Supported Housing Complexes Quarterly Continuing Professional Development programme delivered for Home Care Co-ordinators in relation to leisure and lifestyle issues 	2011-15	
c.	Build community capacity through undertaking audit of volunteer activity/organisations/community groups which currently offer support to older people (National Community Care Outcomes Framework Theme 1: User Satisfaction)	<ul style="list-style-type: none"> Comprehensive database of all voluntary/community groups which offer support to older people in East Ayrshire produced A minimum of 10 older adults recruited, trained and supported to become volunteer leisure and lifestyle mentors per year 	2011/12	CHP Lead Officers for Older People

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
d.	Build networks with and between local community organisations in order to promote the development of community capacity to support older people (National Community Care Outcomes Framework Theme 1: User Satisfaction)	<ul style="list-style-type: none"> Formal network arrangements linked to CHP structure established 	2012/13	CHP Lead Officers for Older People
e.	Work with partner agencies to support carers in feeling able to continue their role through promoting uptake of Carers' Support Plans (National Community Care Outcomes Framework Theme 3: Support for Carers)	<ul style="list-style-type: none"> Staff briefing sessions provided on the purpose and benefits of Carers' Support Plans to all relevant staff Carers' Support Plans increased by 100% 	2012/13	
f.	Improve the quality of the single shared assessment process (National Community Care Outcomes Framework Theme 4: Quality of Assessment and Care Planning)	<ul style="list-style-type: none"> Baseline for number of users/carers assessed/supported who were satisfied with Single Shared Assessment process identified 	2011/12	
		<ul style="list-style-type: none"> % satisfied year on year increased (% to be determined by baseline) 	2012/13	
g.	Promote awareness of Direct Payments during assessment process (National Community Care Outcomes Framework Theme 4: Quality of Assessment and Care Planning)	<ul style="list-style-type: none"> Uptake of Direct Payments by older people increased by 50% from baseline (82 in 2009/10) 	2011-15	
h.	Develop a local approach to the Reshaping Care for Older People consultation (National Community Care Outcomes Framework Theme 6: Moving Services Closer to Users/Patients).	<ul style="list-style-type: none"> Older People's Strategy implemented and progress reported annually 	2011-15	
i.	Introduce community based intermediate and re-ablement services across health and social care	<ul style="list-style-type: none"> National target of zero delayed discharges over 6 weeks sustained 	2011/12	

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		<ul style="list-style-type: none"> Older people experiencing repeat admissions to hospital reduced (target to be set in Feb 2011) 		
j.	Provide additional housing suitable for the needs of older people (National Community Care Outcomes Framework Theme 6: Moving Services Closer to Users/Patients)	<ul style="list-style-type: none"> 90 x 2 bed amenity bungalows provided through new Council house building programme Further 24 amenity properties programmed over the same period to be built by registered social landlords 	2011-15	

WORKSTREAM 4.6	Older People - Dementia
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Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Implement the National Dementia Strategy (National Community Care Outcomes Framework Theme 6: Moving Services Closer to Users/Patients)	<ul style="list-style-type: none"> East Ayrshire Dementia Strategy Group established East Ayrshire Dementia Action Plan developed and implemented Activity to develop community capacity, through the focus of the Provost's Charity 2010/11 on Alzheimer's disease, sustained and developed (measured through the Dementia Action Plan) 	2011/12	CHP Lead Officers for Older People
			2012/13	
b.	Improve the patient journey for people with dementia and their carers (National Community Care Outcomes Framework Theme 6: Moving Services Closer to Users/Patients)	<ul style="list-style-type: none"> Integrated care pathway developed for people with dementia 	2011/12	CHP Lead Officers for Older People

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
	Framework Theme 2: Faster Access to Services)			
c.	Provide public information in respect of dementia (National Community Care Outcomes Framework Theme 3: Support for Carers)	<ul style="list-style-type: none"> Information leaflets and helpline cards on dementia made available in all GP practices, social work offices and hospitals Helpline cards provided with prescriptions via pharmacies 	2011/12 2011/12	

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LOCAL OUTCOME 5	CHILDREN AND YOUNG PEOPLE, INCLUDING THOSE IN EARLY YEARS AND THEIR CARERS ASSISTED TO BE ACTIVE, HEALTHY, NURTURED AND INCLUDED
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Links to SOA	<ul style="list-style-type: none"> National Outcome 5 Our Children have the best start in life and are ready to succeed
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Indicator/s (noting frequency/ type/source)	Baseline at 2010/11	Progress Target/s to 2014/15	End target/s Direction of travel
To be determined during update of Single Outcome Agreement			

WORKSTREAM 5.1	Improving the Health and Wellbeing of Children and Young People
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Actions	Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Provide opportunities to improve the health and wellbeing of children and young people through encouraging them to adopt an active and healthy lifestyle	<ul style="list-style-type: none"> 2011-15 2012/13 2011-15 	Improving Health Group- CHP Lead Officer Public Health (EAC Leisure)

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
		<ul style="list-style-type: none"> • Delivery of and training for a range of sport and physical activity opportunities co-ordinated for all school age children per year • Participation of girls and young women in physical activity and sport increased by 30% (Baseline participation figures in 2009/10 - 2,157 secondary school aged young women and 2,800 primary aged girls participated in extracurricular physical activity and sport) • 1,000 children participated in Transitional Festivals/Transition stages per year • 50 parents participated in parent child sessions per year 		
b.	Work in partnership to address the health needs of vulnerable children and young people and facilitate integration into mainstream services	<ul style="list-style-type: none"> • Age appropriate toy packs provided to homeless children and young people 	2011-15	Improving Health Group- CHP Lead Officer Public Health (EA Churches Homelessness Action)
		<ul style="list-style-type: none"> • Uptake of Sports and physical activity promoted via weekly Sports Motivation visits to 3 East Ayrshire residential children's houses 	2011-15	Improving Health Group- CHP Lead Officer Public Health (EAC Leisure)
		<ul style="list-style-type: none"> • 1 healthy eating programme delivered per year in 3 East Ayrshire residential Children's houses 	2011-15	
		<ul style="list-style-type: none"> • Health Promoting Children's Houses based on the National Health Promoting Framework implemented 	2014/15	Improving Health Group- CHP Lead officer

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
c.	Increase the awareness and knowledge of the factors which affect sexual health and wellbeing	<ul style="list-style-type: none"> Action plan developed to support the implementation of Teenage Pregnancy Guidance by March 2012 and progress reported annually 	2012-15	Public Health (NHS Health Promotion)
d.	Deliver smoking prevention initiatives	<ul style="list-style-type: none"> 20 front line children's services providers trained in use of smoke free home and car pack 500 sign ups to 'Smoke Free Homes' campaign 	2014/15	
e.	Roll out 'Search for a Smile' to all primary and special needs schools	<ul style="list-style-type: none"> 'Search for a Smile' embedded in oral health promotion programmes within the primary school setting (43 mainstream – P1 – P7 and 4 additional needs support establishments) - fits within Curriculum for Excellence Framework 	2013/14	Improving Health Group- CHP Lead Officer Public Health (NHS Oral health)
f.	Roll out community development oral health pilot project (North West Kilmarnock) to Dalmellington and Doon Valley, including establishment of: <ul style="list-style-type: none"> Baby bottle swap Dental role play 	<ul style="list-style-type: none"> Baby bottle swap established in 7 early years establishments (including community centres and nurseries) 	2012/13	
		<ul style="list-style-type: none"> Dental role play established in 5 early years establishments (nursery and primary) 	2012/13	
g.	Implement Fluoride Varnish Application Programme in targeted nurseries and primary schools to achieve HEAT H9 target by 2014	<ul style="list-style-type: none"> Children in targeted nursery schools offered fluoride varnish application twice a year to achieve 60% coverage of 3-4 year old child population in each SIMD quintile 	2011-15	Improving Health Group- CHP Lead Officer Public Health (NHS Oral health)
h.	Implement nursery and school tooth brushing programme	<ul style="list-style-type: none"> All nursery age children and children in targeted primary schools offered the tooth brushing programme annually 	2011-15	

WORKSTREAM 5.2	Corporate Parenting
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Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Implement the Corporate Parenting Action Plan which seeks to improve the lives of looked after children	<ul style="list-style-type: none"> Outputs to be determined 	2011-15	CHP Lead Officer for Corporate Parenting

WORKSTREAM 5.3	Early Years
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Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Improve joint working and communication across agencies and increase capacity of practitioners working within early years	<ul style="list-style-type: none"> 12 practitioners across early years, social work and health trained as trainers to deliver the Solihull Approach to practitioners 200 Practitioners across early years, social work and health trained in using the Solihull Approach in their work with parents 	2013/14	CHP Lead Officer for Early Years (Early Years Integrated Framework Sub Group)
b.	Review and monitor the impact of the Solihull Model on the effectiveness of joint working and practice	<ul style="list-style-type: none"> 200 practitioners across early years, social work and health trained in using the Rickter Scale to assess Impact of the Solihull Approach in their work with parents evaluated 	2013/14	
c.	Increase positive parenting skills across the East Ayrshire area	<ul style="list-style-type: none"> 25% of parents self reporting improved mental health and parenting capacity using Rickter Life Style or Parenting Frame of Reference 	2013/14	

Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
d.	Further develop a nurture approach on a child's early years	<ul style="list-style-type: none"> Nurture approach adopted by: <ul style="list-style-type: none"> all nursery and family centres selected primary schools 	2011-15	

WORKSTREAM 5.4	Getting It Right For Every Child (GIRFEC)
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Actions		Projected Outputs (Linked to Local Outcome)	Timescale	CHP Lead Officer Action Owner
a.	Monitor the effectiveness of the Integrated Assessment Framework (IAF) in East Ayrshire in relation to setting outcomes for children and young people	<ul style="list-style-type: none"> 10% of completed Integrated Assessments sampled and reviewed for effectiveness in terms of the achievement of stated outcomes for children and young people per year 	2011-15	CHP Lead Officer for GIRFEC (GIRFEC Sub group)

IMPROVING HEALTH AND WELLBEING ACTION PLAN 2011-2015

GLOSSARY OF TERMS

ABI	Alcohol Brief Interventions
ACP	Anticipatory Care Planning
ADP	Alcohol and Drug Partnership
ASIST	Applied Suicide Intervention Skills Training
BMI	Body Mass Index
CAB	Citizens Advice Bureau
CEL	Chief Exec
COPD	Chronic Obstructive pulmonary Disease
CAT	Community Addiction Team
CHP	Community Health Partnership
CHIP	Community Health Improvement Partnership
CPP	Community Planning Partnership
CVO	Council of Voluntary Organisation
DWP	Department of Work and Pensions
EAC	East Ayrshire Council
EACH	East Ayrshire Community Hospital
eHNF	Electronic Health Notification Forms
GIRFEC	Getting it Right for Every Child
GP	General Practitioner
GROS	General Register Office for Scotland
HEAT targets	Health Efficiency Access and Treatment Targets
IRF	Integrated Resource Framework
ISD	Information Services Division (NHS National Services Division)
LD	Learning Disabilities
LTC	Long Term Conditions
MEND	Mind, Education, Nutrition, Do it!
NALOXONE	A drug used to counter the effects of opioid overdose
NHS A&A	National Health Service Ayrshire and Arran
PID	Project Initiation Document
PCAT	Primary Care Addiction Team
QOF	Quality Outcomes Framework
RICKTER SCALE	An Assessment and Planning Process
ROSC	Recovery Oriented System of Care
SALSUS	Scottish Schools Adolescent Lifestyle and Substance Use Survey
SIMD	Scottish Index of Multiple Deprivation

SOA	Single Outcome Agreement
SOLIHULL	A parenting approach
STORM	Skills Training on Risk Management
SHAR	Sexual Health Ayrshire
SMHFA	Scottish Mental Health First Aid
SPARRA	Scottish Patients at Risk of Admission or Readmission
SWIFT	Social Work Information System
WRAP	Wellness Recovery Action Planning

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