

EAST AYRSHIRE COMMUNITY HEALTH PARTNERSHIP

COMMITTEE

18 MAY 2009

UPDATE ON THE DEVELOPMENT OF A SUBSTRUCTURE TO IMPROVE HEALTH AND WELLBEING

Report by CHP Facilitator

1. PURPOSE OF REPORT

- 1.1 To update members on the development of a proposed substructure under the Officer Locality Groups for Adults and Older People and Children and Young People to enable the delivery of health and wellbeing services for adults and older people and children and Young People within East Ayrshire
- 1.2 To outline performance management arrangements to ensure the effective delivery/ implementation of the Improving Health and Wellbeing Action Plan of East Ayrshire's Community Plan and our Single Outcome Agreement.

2. BACKGROUND

- 2.1 A mapping exercise was carried out in order to look at the current landscape in terms of groups which are working on the health agenda. Existing and proposed structures were discussed by members of the OLGs at their respective meetings on 18th and 20th March. Subsequently, further refinement of the proposed structure has taken place in order to ensure that the proposals are fit for purpose in terms of delivering on the Improving Health and Wellbeing Action Plan of East Ayrshire's Community Plan and the Single Outcome Agreement and maximise opportunities for partnership working and collaborative gain.

3. PROPOSED SUB STRUCTURE AND PERFORMANCE MANAGEMENT ARRANGEMENTS

- 3.1 The proposed structure, which is displayed at appendix one, incorporates the new local Alcohol and Drug Partnership and Community Mental Health Partnership which will soon be established and were the subject of separate reports to the OLGs in March and approval by Committee on 18 May.
- 3.2 In addition there is a need to consider cross cutting areas which will also be pertinent to both officer locality groups. These include Health Improvement/Inequalities and the aforementioned Alcohol and Drug Partnership.

- 3.3 It is proposed that each subgroup is chaired by a member of the officer locality group and that they assume responsibility as a lead officer for reporting on relevant elements of the Improving Health and Wellbeing action Plan of the Community Plan and specific indicators within the Single Outcome Agreements. In addition the sub group chairs would be responsible for reporting activity back through the CHP structure.
- 3.4 In terms of performance management the specific reporting responsibilities for each subgroup in respect of the SOA national and local outcomes, Improving Health and Wellbeing Action Plan aims and actions and specific outcome indicators are detailed at appendix 2. This table includes all specific areas of the SOA, the Community Plan and links to the delivery of the Children and Young People's service Plan. These areas represent the essential minimum reporting requirements and clearly some sub groups will wish to consider extending their areas of partnership activity and reporting in response other local and national drivers.
- 3.5 Following the approval and formation of sub-groups the table at Appendix 2 will be further expanded to detail specific smart actions and projected outputs which are contained within the Community Health and Wellbeing Action Plan and this will form the work programme. The CHP Facilitator, where required, will work with lead officers in order to assist in the set up the groups. In addition tools such as the Partnership Assessment Framework will be available as part of this process.
- 3.6 Indicative timescales and requirements for reporting progress and performance is displayed in the table below. Timescales will be confirmed following confirmation of 2010 committee dates with NHS Ayrshire and Arran, East Ayrshire Council and final guidance from the Scottish Government.

SOA 08/09	Improving Health and Wellbeing Action Plan 08/09	SOA 09/10 and Improving Health and Wellbeing Action Plan 09/10 combined
Annual Performance Proforma Completed by lead officers by July 2009	Annual Performance Proforma completed by lead officer by end April 2009	Lead Officer update progress proforma reported to OLGS and Community Planning Joint Officer's Group in July 2009 November 2009 and March 2010
Performance reported to CHP Committee 24/8/09	Performance reported to CHP Committee 6/7/09	Annual Performance Proforma completed by Lead officers by 31/5/10
Performance reported to Cabinet and CPP Board September 2009	Performance reported to Cabinet 17/9/09 and CPP Board 30/7/09	Performance reported to CHP Committee August 2010
Submit to Scottish Government by end September		Performance Reported to Cabinet and CPP Board September 2010
		Submit report to Scottish Government in September 2010 (SOA)

3.7 The Council's new IT-based Performance Management System, the contract for which was awarded to CorVu Limited, will support accurate and timeous reporting in respect of SOA performance measures. Links will also be made with the NHS Ayrshire and Arran Perfoms arrangements through the NHS Ayrshire and Arran Community Planning Group.

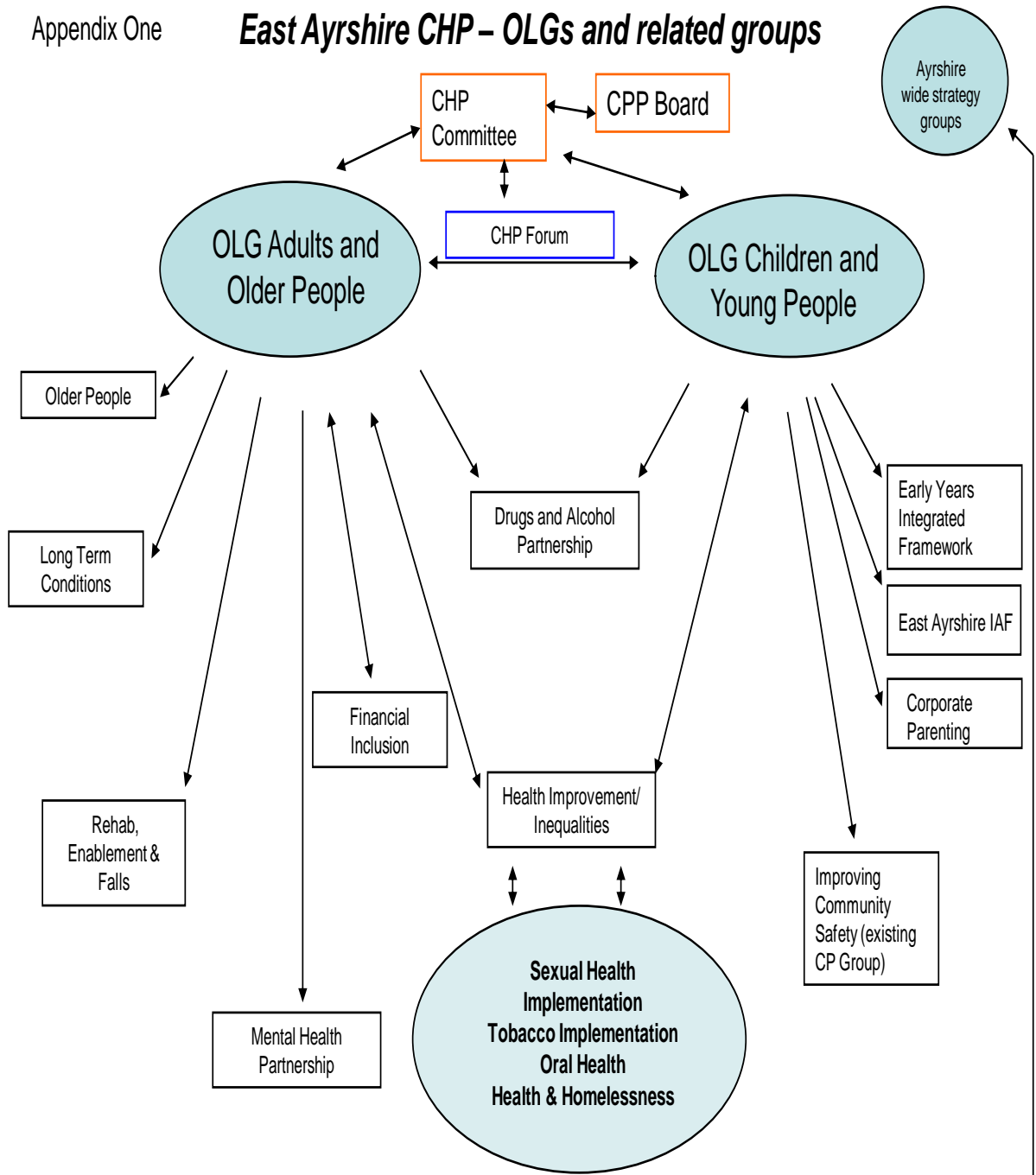
4. RECOMMENDATIONS

4.1 The Committee is asked to:

- i) Consider the proposed structure as an effective means of developing effective partnership working across the Community health Partnership and delivering on the Single Outcome Agreement and the Improving Health and Wellbeing Action Plan of the Community Plan.
- ii) Approve the arrangements subject to final refinements by the OLGs at their meetings 8th and 13th May
- iii) Remit the Lead Officers to begin the process of setting up the sub groups and systematically report performance as outlined in section 3.6 of this report

Katie Kelly
CHP Facilitator
29/4/09

East Ayrshire CHP – OLGs and related groups



Appendix 2

SUB GROUP	Single Outcome Agreement National and Local Outcomes	Community Plan Improving Health and Wellbeing Action Plan	SOA Outcome Indicators or linked plan
Health Improvement/ Inequalities (incorporating Children's Health Improvement)	<p>National Outcome 6 We live longer, healthier lives</p> <p>National Outcome 5 Our Children have the best start in life and are ready to succeed</p> <p>Local Outcomes Health and Well being of the local population improved Health inequalities in the most disadvantaged neighbourhoods/ groups reduced Healthy Lifestyles for children and young people promoted</p>	<p>Aim 1 To ensure that information is available in a suitable format and that services are provided when and where required for those who need them to enable people to make healthy lifestyle choices</p> <p>Actions 1.1-1.4</p> <p>Aim 2 To strive for equality in health for the most disadvantaged in East Ayrshire by targeting activity to address factors that contribute to the most prevalent health problems and improving support and care services for the most vulnerable groups</p> <p>Actions 2.1-2.6</p>	<p>Percentage of men and women aged 16-64 meeting the minimum recommended levels of 30 minutes per day of physical activity on 5 or more days per week increased</p> <p>Mortality rate for coronary heart disease (CHD) in under 75s reduced</p> <p>Percentage of smoking population who quit through assistance services (at 1 month post quit)</p> <p>Increase and maintain the proportion of physically active children and young people Percentage of young people smoking reduced</p> <p>Completion rates for child healthy weight intervention</p> <p>Teenage pregnancy rates in 15 – 19 year olds in the most deprived areas reduced</p> <p>Percentage of children aged 5 years (P1) with no sign of dental disease increased Levels of dental registration in the 3 – 5 age group</p>

			<p>Coronary heart disease mortality rate per 100 000 population under 75 years in the most deprived communities</p> <p>Number of inequalities targeted cardiovascular health checks</p> <p>Percentage of adults aged 16+ in the most deprived areas smoking reduced</p> <p>Women recorded as a current smoker at ante-natal booking appointment expressed as a number (3 yr total) and percentage of all women attending booking appointment</p> <p>Vulnerable adults supported as indicated against projected output</p>
Early Years Integrated Framework	<p>National Outcome 5 Our Children have the best start in life and are ready to succeed</p> <p>Local Outcomes Healthy Lifestyles for children and young people promoted Development of Early Education and Childcare Services to support children and families promoted</p>	<p>Aim 1 To ensure that information is available in a suitable format and that services are provided when and where required for those who need them to enable people to make healthy lifestyle choices</p>	<p>Exclusive breastfeeding rate at 6-8 weeks increased</p> <p>Percentage of early education and childcare services managers with qualifications at degree level increased</p> <p>Integrated package of health, early education and care for vulnerable children aged 0-3 years maintained via day care places in local authority nursery and family centres across East Ayrshire</p>
Alcohol and Drug Partnership	<p>National Outcome 6 We live longer, healthier lives</p> <p>Local Outcomes Health and Well being of the local</p>	<p>Aim 1 To ensure that information is available in a suitable format and that services are provided when and where required for those who need them to</p>	<p>Number of screenings (using the setting appropriate screening tool and appropriate alcohol brief intervention in line with SIGN 74 guidelines) HEAT target, 2006</p>

	population improved	enable people to make healthy lifestyle choices Actions 1.5-1.6	Percentage of adults exceeding weekly safe limits for alcohol consumption of 21 units for men and 14 units for women reduced Number of alcohol related and attributable hospital patients Frequency and level of alcohol consumption in 12-15 year olds reduced Number of drug related hospital patients reduced
Mental Health Partnership	National Outcome 6 We live longer, healthier lives Local Outcomes Health and Well being of the local population improved	Aim 1 To ensure that information is available in a suitable format and that services are provided when and where required for those who need them to enable people to make healthy lifestyle choices Actions 1.7-1.8	Rates for suicides per 100,000 decreased Rate increase of antidepressants prescribing reduced Number of readmissions (for mental health problems) for those who have had a hospital admission of over 7 days
Older People	National Outcomes 6,11 We live longer, healthier lives We have strong, resilient and supportive communities where people take responsibility for their own actions and how they care for others Local Outcomes Health and Wellbeing of Population Improved Proportion of people needing Care or Support who are able to sustain an independent quality of life as part of the Community Increased through effective joint working	Aim 3 To work in partnership to improve the balance of care for older people and community care groups. Actions 3.1, 3.2, 3.3, 3.4, 3.5,3.7	Percentage of people aged 65+ with intensive needs receiving care at home maintained at 35% Percentage of people aged 65+ receiving free personal care at home maintained at 7% Number of carers receiving ongoing support increased Number of emergency inpatient bed days for people aged 65 and over reduced Number of unintentional injuries in the home for those aged 65+ reduced Number of patients diagnosed with dementia increased

Financial Inclusion	<p>National Outcome 7 We have tackled the significant inequalities in Scottish Society</p> <p>Local Outcomes Financial Inclusion within disadvantaged communities supported Carers and Young carers supported Everyone within our communities can access the full range of services which combat poverty</p>	<p>Aim 4 To promote wellbeing by providing financial inclusion services which target our most deprived communities and populations. Actions 4.1-4.8</p>	<p>Total number of Credit Union members increased</p> <p>Number of carers receiving benefits checks maintained</p>
Long Term Conditions/ Telehealth /Telecare	<p>National Outcome 6 We live longer, healthier lives</p> <p>Local Outcome Health and Wellbeing of the local population improved</p>	<p>Aim 5 To improve the balance of care and quality of life for people who have Long Term Conditions Actions 5.2-5.4</p>	<p>Number of hospital admissions for respiratory disease reduced</p> <p>Rates of hospital admissions of patients with primary diagnosis of COPD, Asthma, Diabetes or CHD (from 2006/7 to 2010/11) reduced</p>
Rehab/ Enablement/ Falls	<p>National Outcome 6 We live longer, healthier lives</p> <p>Local Outcome Health and Wellbeing of the local population improved</p>	<p>Aim 3 To work in partnership to improve the balance of care for older people and community care groups. Action 3.6 Aim 4 To promote wellbeing by providing financial inclusion services which target our most deprived communities and populations. Action 4.8 Aim 5 To improve the balance of care and quality of life for people who have Long Term Conditions Actions 5.1</p>	<p>Number of hospital admissions for respiratory disease reduced</p> <p>Percentage of people aged 65+ with intensive needs receiving care at home maintained at 35%</p> <p>Number of emergency inpatient bed days for people aged 65 and over reduced Number of unintentional injuries in the home for those aged 65+ reduced</p>

<p>Integrated Assessment Framework</p>	<p>National Outcome 5 Our Children have the best start in life and are ready to succeed Local Outcome Healthy Lifestyles for children and young people promoted</p>	<p>Delivery of relevant elements of EA Children and Young People's Service Plan</p>	<p>Performance reported through EA Children and Young Peoples Service Plan (Hyperlink in SOA)</p>
<p>Corporate Parenting</p>	<p>National Outcomes 5,8 Our Children have the best start in life and are ready to succeed We have improved the life chances for children , young people and families at risk Local Outcomes Healthy Lifestyles for children and young people promoted Child protection and the safety of vulnerable adults promoted</p>	<p>Delivery of relevant elements of EA Children and Young People's Service Plan</p>	<p>Performance reported through EA Children and Young Peoples Service Plan (Hyperlink in SOA)</p>
<p>Improving Community Safety (children and young people)</p>	<p>National Outcome 8, 9 We have improved the life chances for children , young people and families at risk We live our lives safe from crime, disorder and danger</p>	<p>Delivery of relevant elements of EA Children and Young People's Service Plan</p>	<p>Performance reported through EA Children and Young Peoples Service Plan (Hyperlink in SOA)</p>