

Cumbria Health and Wellbeing Strategy 2016 – 2019
Delivery Plan 2017/18

Outcome One: Every child has the best start in life.						
Key area of activity	Measure	Baseline	Milestone/1 Year Measure/Target3-year Measure(s) or Target(s)	Frequency of performance reporting	Programme(s) of activity	Lead Organisation and Lead Officer
Promoting Breastfeeding	Initiation and continuation of breastfeeding at 6-8 weeks (% of children with a recorded breastfeeding status) % of all mothers who breastfed their babies in the first 48hrs after delivery (NO LONGER AVAILABLE AT DISTRICT LEVEL)	Data recoding issues reported to CPFT – CCC issues over the use of the RIO system. Cumbria 69.5% (Q2) Cumbria – 64.9% National – 74.3%	To achieve England average rates by 2017/18 Increase rate in line with England (over 3 years) Increase rates in the districts with the lowest levels in line with England	Quarterly Annual	Continue County-wide Implementation of WHO Baby Friendly Initiative, with Implementation taking across the county through progress towards accreditation of different stages of BFI. Work with all county stakeholders throughout Cumbria to develop a strategy for breastfeeding. Expansion of Public Protection work with food businesses to provide healthy options to promote breast feeding friendly premises.	Cumbria County Council/Assistant Director for Early Help and Learning Involves North Cumbria Acute Hospitals Trust Morecambe Bay Hospitals Trust Cumbria Partnership Foundation Trust – Health Visitors Children’s Centres South Lakeland District Council.
Tackling Childhood obesity	% of reception age (4-5 yrs) with excess weight (overweight and obese combined). % of children aged 10-11 (Year 6) classified as overweight (overweight and obese combined).	Cumbria: 26.6% England: 22.1% Allerdale – 26.9% Barrow – 28.9% Carlisle – 28.4% Copeland – 27.6% Eden - 26.1% SL – 21.0% (National Child Measurement Programme, 2015-16) Cumbria: 35.0% England: 34.2% Allerdale – 33.4% Barrow – 38.6% Carlisle – 35.3% Copeland – 40.1% Eden - 31.0% SL – 32.0% (National Child Measurement Programme, 2015-16)	To reduce the rate of excess weight in 4-5 year olds to 23% by 2020/21. 4 Training courses delivered 840 home packs delivered 1,200 2-5 year olds to take part in the programme. 2,200 young people engaged with per annum through satellite sports clubs. 149,152 participants reached from April 2015-March 2016.	Annual	Oversee implementation of the 0-19 HCP contract and deliver through early help providers. Further introduction and development of the ‘learn to play through Smart Start’ programme. Continue to deliver the Satellite sports clubs and Sportivate programmes. Provision of leisure facilities / parks and open spaces and promotion of their utilisation for exercise and health reasons. Healthy weight in children – pilot in North Allerdale Work with CPFT to redesign and deliver a more universal targeted approach to children’s	Cumbria County Council / Director of Public Health Cumbria County Council/Assistant Director for Early Help and Learning Cumbria County Council / Director for Public Health All District Councils Allerdale Borough Council Cumbria County Council / Director for Public Health

	<p>% of children with decayed, missing or filled teeth.</p> <p>% of children achieving physical literacy standards</p> <p>% of Looked after children classified as overweight or obese</p>	<p>New baseline measure not yet established (data capture method not yet confirmed)</p> <p>New baseline measure not yet established (data capture method not yet confirmed)</p>	<p>Reduce rates in the districts with the highest levels in line with England.</p> <p>Establish a Year 1 baseline (later in the year when data is made available)</p> <p>Establish a Year 1 baseline (later in the year when data is made available)</p>	<p>Annual (time lag)</p>	<p>oral health that meets the needs of children most in need.</p> <p>Continue to develop and expand the Smile4Life within Children's centres.</p> <p>Leisure clubs for people with learning disabilities (both adults and young people) in partnership with Westmorland Mencap. Promotion of health lifestyles is one of the clubs main themes.</p>	<p>Cumbria County Council / Director for Public Health</p> <p>Oaklea trust.</p>
<p>Improving mental wellbeing of children and young people</p>	<p>Percentage of inappropriate referrals to specialist services</p> <p>Part of national project to develop common measures for mental wellbeing, led by CORC and Anna Freud/UCL</p> <p>National Programme Outcome – socially significant improvement in the mental wellbeing of at risk young people (range of measures pre and post exposure to commence in September 2016)</p>	<p>33%</p> <p>Further work been undertaken – review at delivery plan refresh – target March 2017</p>	<p>Reduce by 5% (to 31%)</p> <p>60% of CAMHS Tier 3 referrals.</p> <p>Key Job role profile agreed in September 2016. Recruitment in CED in January 2017.</p>	<p>Quarterly</p>	<p>Work with county partners to increase the awareness of the Cumbria multi-agency whole system model.</p> <p>Provision of youth clubs in Eden and other community opportunities in South Lakes and Furness</p> <p>Introduction of new CCG investment programme to increase access to specialist services.</p> <p>Introduction of CCG funded anxiety and depression pathway.</p> <p>Develop Family resilience programme as part of headspace. Development of CCG led engagement with parents and carers on community eating disorder services.</p> <p>Implementation of Cumbria's Transforming services plan</p> <ul style="list-style-type: none"> • Further development and 	<p>CCG / Cumbria County Council/Director for Public Health / Assistant Director for Early Help and Learning</p> <p>Oaklea Trust</p> <p>North and South Cumbria Clinical Commissioning Group.</p> <p>North and South Cumbria Clinical Commissioning Group.</p> <p>Cumbria County Council / North and South Cumbria Clinical Commissioning Group</p> <p>Cumbria County Council / North and South Cumbria Clinical Commissioning Group</p>

	<p>Hospital admissions due to substance misuse (15-24 yrs) (PHOF, 2011/12-13/14)</p>	<p>Baseline to be established – new local measure</p>	<p>All schools to be aware of the Mytie programme</p> <p>April 2017 – Service launched and all posts recruited.</p> <p>By end of January 2017 agree multi-agency workforce development programme to promote resilience for C+YP.</p>	<p>Annual</p>	<p>implementation of the service model.</p> <ul style="list-style-type: none"> • CCG further investment in Tier 3 to improve capacity to meet CED needs. • Closer Collaboration with Schools CCG led pilot programme in South Cumbria aimed at achieving better school integration through Tier 2 and 3. • New Mytie service introduced to establish good links with schools. • Investment programme in place through the CCG to remodel services to meet the demand out of office hours. • Investment programme in S136 functions introduced in partnership with CCC. <p>Implementation of monitoring system to analyse the need for primary mental early intervention service and programme put in place to extend existing services.</p> <p>HeadStart Phase 3 Strategy and Implementation plan</p> <ul style="list-style-type: none"> • Building resilience promoting environments • Building capacity in the CYP workforce • Implement legacy plan including making a basket of tools and resources available for schools and providers. • Introduce investment from CCG transformation plan post head start funding. <p>Continue to train all health visitors in the use of a multi-agency maternal mental health</p>	<p>Cumbria County Council / North and South Cumbria Clinical Commissioning Group</p> <p>Cumbria County Council / Director for Public Health / Assistant Director for Early Help and Learning</p> <p>Cumbria County Council / Director for Public Health</p>
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	<p>Self-Harm: Young people hospital admissions for self-harm: rate per 100,000 aged 10 – 24 (PHOF, 2010/11-12/13)</p>	<p>Cumbria: 461.2 England: 352.3</p>	<p>CLA to receive a CHOICE assessment within 15 working days and all urgent CAMHS referrals are seen in 48 hours.</p> <p>76 Children that were or are Children Looked After (CLA) on CAMHS caseload at the end of Q1.</p>	<p>Annual</p>	<p>pathway – health visiting service.</p> <p>Introduction of CHOICE initial assessment appointments have been introduced with a specialised target's for CLA.</p>	<p>Cumbria County Council / North & South Cumbria Clinical Commissioning Group / CPFT</p>
	<p>Hospital admissions due to substance misuse (15-24 yrs) (PHOF, 2011/12-13/14)</p>	<p>Cumbria: 118.1 England 81.3</p>	<p>One CLA that was referred to CAMHS in Q1 and was seen in the 15 day period.</p>	<p>Annual</p>		
	<p>Mental health services for children and young people with learning disabilities and autism</p>					
	<p>Number of young people who have access to early intervention services</p>	<p>Review upon the implementation of challenging behaviour young people service in February 2017</p>	<p>Staff training implemented and completed by Jan 2017</p> <p>Implementation of early intervention services by March 2017</p>		<p>Deliver tier one activities</p> <ul style="list-style-type: none"> • Early bird programme (pre-school autism) • What now – (school age autism) • Confident parent (age 2-11 challenging behaviour) <p>Deliver tier two programmes</p> <ul style="list-style-type: none"> • 5x individual sessions (to tackle challenging behaviour in 2-11 year olds.) 	<p>North & South Cumbria CCG Director of Children's and Families / CPFT – Clinical services manager</p>
	<p>Number of children with EHCP plans across the county</p>	<p>c.740</p>	<p>Introduce process to look at better ways of working, through a possible autism outreach service.</p> <p>With the view to reduce the number of EHCPs issued across the county.</p>		<p>Continue to offer training to schools and families where appropriate</p> <p>Contribute services to multi agency service teams to deliver disability and autism services across the county</p> <p>Deliver transformation plans for children with disabilities that are going through the education system and / or social care system that meet their needs.</p>	<p>Cumbria County Council / Assistant Director for Early Help and Learning</p> <p>Cumbria County Council /Assistant Director for Children, Health and Care commissioning / Cumbria County Council/Assistant</p>
		<p>C.740 – delivered as part of a C+YPs EHCP.</p>				

						director for Early Help and Learning
Outcome Two: Adults lead healthy and fulfilling lives.						
Key area of activity	Measure	Baseline	Milestone/1 Year Measure/Target3-year Measure(s) or Target(s)	Frequency of performance reporting	Programme(s) of activity	Lead Organisation and Lead Officer
Reducing unhealthy levels of alcohol consumption	Alcohol specific hospital admissions (persons) directly age standardised rate per 100,000 population (PHOF, 2014-15)	Cumbria: 418 England: 364 Allerdale: 372 Barrow: 689 Carlisle: 431 Copeland: 477 Eden: 215 SL: 333	Reduce in Line with England	Annual	Develop the new Alcohol strategy for 2017 which builds upon the 3 themes that were introduced in the 2016 Alcohol strategy. Continue to work with the 6 Locality HWB forums to fund activity to reduce alcohol harm. Ensure the safe and appropriate enforcing of licensing objectives. Establish and identify further action through the Healthy attitudes to alcohol task group.	Cumbria County Council / Director for Public Health PHA / Local Health and Wellbeing Forums. All District Councils Allerdale Borough Council.
	Rate of alcohol related crime (Cumbria Constabulary, 2015-16)	Cumbria: 14.0% Allerdale: 11.2% Barrow: 17.6% Carlisle: 13.6% Copeland: 16.6% Eden: 11.5% SL: 13.1%	Reduce to 12% Reduce levels in the districts with the highest levels in line with the county average	Annual	Develop signposting for the Alcohol pathway. Further introduce Comms plans to maximise campaigns such as One you and dry January.	Cumbria County Council / Director for Public Health Cumbria County Council / Director for Public Health
	Alcohol related Anti-Social Behaviour (Cumbria Constabulary, 2015-16)	Cumbria: 15.7% Allerdale: 15.0% Barrow: 16.2% Carlisle: 15.4% Copeland: 17.0% Eden: 12.8% SL: 16.5%	Reduce to 12%; Reduce rates in the districts with the highest levels in line with the county average	Annual	Continue contact management service to increase the number of hazardous drinkers accessing the unity programme.	Cumbria County Council / Director for Public Health
	Numbers of individuals referred to Placed Based Prevention services	10,000 targeted visits	<i>To be set following Q1 baseline</i>	Annual	Safe and Well Visits to those over 65	Cumbria County Council / Fire and Rescue Service
Reducing the prevalence of smoking; tackle inequality by reducing	Smoking prevalence (persons 18+) (PHOF, 2015; Annual	Cumbria: 15.6% England: 16.9%	To reduce smoking prevalence to 12% by 2019 across the population as a	Annual	Continue to work with the 6 Locality HWB forums to fund activity to reduce smoking	PHA / Local Health and Wellbeing Forums.

<p>the percentage of people who smoke in districts currently above the county average</p>	<p>Population Survey)</p> <p>Numbers of individuals referred to NHS choices website</p>	<p>Allerdale: 17.2% Barrow: 20.2% Carlisle: 13.9% Copeland: 19.7% Eden: 14.7% SL: 10.5%</p> <p>10,000 targeted visits</p>	<p>whole and to 17.5% in routine and manual groups.</p> <p><i>To be set following Q1 baseline</i></p>	<p>Annual</p>	<p>cessation.</p> <p>Continue to work with pharmacies in regards to the stop smoking service until September 2017 and support signposting for this activity.</p> <p>Further introduce Comms plans to maximise campaigns such as One you and Stoptober.</p> <p>Safe and Well Visits to those over 65</p>	<p>Cumbria County Council / Director for Public Health</p> <p>Cumbria County Council / Director for Public Health</p> <p>Cumbria County Council / Fire and Rescue Service</p>
<p>Tackling obesity</p>	<p>% of people who have a BMI over 30 (GP Register)</p> <p>% of people in Cumbria registered with diabetes (GP Register)</p> <p>% of people physically inactive (Active Lives Survey) (KPI 2 in Govt Strategy)</p>	<p>Cumbria CCG: 9.72% England: 9.03% (QOF, 2014-15)</p> <p>Cumbria CCG: 7.14% England: 6.37% (QOF, 2014-15)</p> <p>New measure, baseline not yet established</p>	<p>Reduce in line with England; and reduce rates in the districts with the highest levels in line with the county average</p> <p>Reduce in line with England; and reduce rates in the districts with the highest levels in line with the county average</p> <p>Establish a Year 1 baseline (later in the year when data is made available)</p> <p>Physical Activity care Pathway shared with partners during Autumn</p>	<p>Annual</p> <p>Annual</p> <p>Annual</p>	<p>Fully introduce the weight management service and allow integration with the HAWCs service.</p> <p>Continue to work with the 6 Locality HWB forums to fund activity to reduce Obesity.</p> <p>Further introduce Comms plans to maximise campaigns such as One you and dry January and StopTober.</p> <p>Monitoring of leisure facility Contracts, delivery of sport and physical activity strategies.</p> <p>Local Healthy Options Awards</p> <p>Finalise and share new pathway with partners and them fully introduce new Physical Activity Care Pathway.</p>	<p>Cumbria County Council / Director for Public Health</p> <p>PHA / Local Health and Wellbeing Forums.</p> <p>Cumbria County Council / Director for Public Health</p> <p>All District Councils</p> <p>Carlisle City Council</p> <p>Cumbria County Council / Director for Public Health</p>

		442 participants currently subscribe to a e-newsletter every 4-6 weeks	2016.		Through the three principles of the active workplace programme, increase the number of participants	Cumbria County Council / Director for Public Health
Improving the mental health and wellbeing of adults	Reduction in use of S136 detentions (Cumbria Constabulary)	128 (April – September 2014) (21 per month)	50% reduction (10 per month)	Monthly	Continue the implementation of the Cumbrian Mental Health Strategy - 'better mental health for all' building upon the three sections of the strategy.	Mental health programme board and JCB
	No children/adults in custody suites as a place of safety under MHA (Cumbria Constabulary)	33 adults; 1 child (April – September 2014)	Reduce to 0	To be finalised	Arts and Culture events programmes Support people with low mental health problems through the Health and Social care System	All District Councils
	Reduce waiting times for Mental Health Act (MHA) Assessments (ASC?)	Baseline to be finalised	50% reduction (currently between 2 – 15 hours)	To be finalised	Deliver new crisis assessment service to incorporate S136 detentions to reduce the number of children and adults in custody and will reduce the waiting times for MHA assessments.	Cumbria County Council and North and South Cumbria Clinical Commissioning Group –, Director of Integration; Chief Operating Officer
	Suicide rate (per 100,000 persons)	Cumbria: 11.3 England: 8.9 (PHOF, 2012-14)	Reduce in line with England by 2018	Annual		
Outcome Three: older people are enabled to live independent and healthy lives.						
Key area of activity	Measure	Baseline	Milestone/1 Year Measure/Target3–year Measure(s) or Target(s)	Frequency of performance reporting	Programme(s) of activity	Lead Organisation and Lead Officer
Reducing the number of falls	Reduced conveyance of care home residents to hospital.	<ul style="list-style-type: none"> Length of Stay Q1 16/17 – 8.87 Q2 16/17 – 8.32 			Further develop and implement the frailty service developed at the Cumberland infirmary to reduce pressure on Hospital beds.	North Cumbria Clinical Commissioning Group – Deputy Network Director Carlisle and Eden
	Injuries due to falls in people aged 65 and over (Persons)	Cumbria: 2,125 England: 2,064			Review and further develop	

	per 100,000	(PHOF, 2013-14)			<p>pilot programmes such as Eden falls ambulance and Community frailty service in the West of Cumbria and roll out across the County.</p> <p>County wide procurement strategy towards DFG (disabled facilities grant)</p> <p>Development of management policies – seeking to ensure homes are adaptable</p> <p>Landlord Accreditation scheme – driving up standards in the Private rented sector</p> <p>Housing enforcement – formal action to ensure health standards in new housing are remedied.</p> <p>Handypersons scheme –allows people to stay in their own homes</p> <p>Introduction of safe and warm grant in the private sector; expansion of the DFG scheme; continuation of central heating fund project; Big Allerdale Switch; lifetime homes being piloted.</p> <p>Ensure that ECO3 is implemented at a local level to maximise the benefits for Eden residents and reduce fuel poverty.</p> <p>Update RRO housing assistance policy to include additional projects utilising uplift in the Better Care Fund.</p> <p>Full roll out of the Active Cumbria Older adults programme after academic</p>	<p>All District Councils</p> <p>All District Councils</p> <p>All District Councils</p> <p>All District Councils</p> <p>South Lakeland District Council</p> <p>Allerdale Borough Council</p> <p>Eden District Council</p> <p>Carlisle City Council</p> <p>Active Cumbria / Cumbria County Council / Director of Public Health</p>
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	Numbers of individuals referred to Placed Based Prevention services	10,000 targeted visits	<i>To be set following Q1 baseline</i>	Annual	<p>evaluation and after funding is made available.</p> <p>Continued use and development of compass tool as part of the HSWB system.</p> <p>Safe and Well visits to those over 65</p>	<p>Cumbria County Council / Director for Public Health</p> <p>Cumbria County Council / Fire and Rescue Service</p>
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Tackling social isolation	% of Adult Social Care users who have as much social contact as they would like	Cumbria: 44.3% England: 45.4% (Adult Social Care Outcomes Framework)	Increase in line with England	Annual	Health and Social Wellbeing System working with wider third sector to identify at risk individuals and ensure appropriate social support Development of a private Homecare and Companionship offer for older people; launching first in the Carlisle area. This involves gentle exercise; healthy eating; social activities; peer support; advice and guidance.	Cumbria County Council / Director for Public Health Oaklea trust
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Outcome Four: The people of Cumbria receive the quality of care they are entitled to.

Key area of activity	Measure	Baseline	Milestone/1 Year Measure/Target3-year Measure(s) or Target(s)	Frequency of performance reporting	Programme(s) of activity	Lead Organisation and Lead Officer
Ensuring that people who are at high risk of needing social care receive the care they need in time	Review upon the implementation of the strengthening families programme	Strengthening families programme been implemented this year.	<ul style="list-style-type: none"> One named safeguarding health lead per family Improved assessment and referral service 	Yearly.	Monitor the decommissioning of the family nursing partnership and continue Public / Public partnership working with CPFT to deliver the strengthening family service.	Cumbria County Council / Assistant Director for Early Help and Learning / CPFT.
	Reduced non-elective	2016/17 Q2 – 13,892	Target 14,400	Yearly	CCG and CC continued	Cumbria County Council

	<p>admissions</p> <p>Review upon the development of the integrated care commissioning and operating groups.</p> <p>Delivery of Extra Care Housing in Cumbria</p>	<p>Review upon the development of the integrated care commissioning and operating groups.</p> <p>Delivery of Extra Care Housing in Cumbria</p>	<p>8 ICC's in WNE Cumbria and 7 ICC's in the South of Cumbria. March 2017.</p> <p>3 Early accelerator ICCs in both North and South Cumbria.</p> <p>As outlined in delivery plan for the Extra Care Housing Strategy</p>	<p>Annual</p> <p>As set out in the Strategy</p>	<p>collaborative project to meet BCF objectives</p> <p>Deliver new 2 year BCF plan for 2017/18 to 2019/20 to NHS England and LGA for National Guidance.</p> <p>Develop and deliver Integrated Care Commissioning and Operating groups to support early adopters of Integrated care communities.</p> <p><u>Transformation of 'landscape of care' as outlined in commissioning strategy for care and support. (2015/2020)</u></p> <ul style="list-style-type: none"> • Deliver an integration programme through commissioning to allow external partners to deliver care services. • Provide CC led training programmes for home carers • Introduce CC led commissioning services with care homes with the support of the CCG. • Establish day service provision – work with partners in the community to establish care need. <p><u>Extra care and supported living housing to be developed in Cumbria</u></p> <ul style="list-style-type: none"> • Development and implementation of grant award programme that will enable the delivery of extra 	<p>and North and South Cumbria Clinical Commissioning Groups –, Director of Integration and Chief Operating Officer</p> <p>Cumbria County Council and North & South Cumbria Clinical Commissioning Group –Director of Integration; & Chief Operating Officer</p> <p>Cumbria County Council / Assistant Director for Children, Health and Care Commissioning.</p> <p>Cumbria County Council / Assistant Director for Cumbria Care and Social Care.</p>
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					<p>care and supported living housing.</p> <ul style="list-style-type: none"> • Award grant for the development of ECH across Cumbria. • Continue the development of work streams for ECH through the project team and board. 	
Working to ensure that the focus of services for people with learning disabilities, physical disabilities and mental health services is on recovery and independence	Number of national and regional bed closures for people with learning disabilities	<p>50% reduction through the national programme. Reduction of 1 bed expected within Cumbria.</p> <p>All 7 key stakeholder groups are engaged in the process of developing Autism champions and leads.</p> <p>All 28 HAWCs are to have completed Autism training.</p>	<p>Delivery of a sustainable and suitably commissioned learning disability services across Cumbria.</p> <p>Target for Autism stakeholder integration is December 2017.</p> <p>Training to be completed by March 2017.</p> <p>Autism strategy proposed for early 2017</p> <p>Bring forward disability learning requirements approval into this year.</p> <p>C.740 – delivered as part of a C+YPs EHCP.</p>		<p><u>Transforming care partnership</u></p> <ul style="list-style-type: none"> • Deliver the project plan for Cumbria as part of the national transforming care programme. • Either continue to align with Cumbria and North east transforming care partnership or put provision in place to align with Lancashire TCP. <p><u>Autism SAF</u></p> <ul style="list-style-type: none"> • Further develop the network of Autism champions and leads • Plan and implement Autism training for HAWCs. • Continue to work with housing on developing reasonable adjustments within the choice based letting system. • Work as part of the Cumbria Autism partnership board to develop the Cumbria Autism strategy. • Deliver transitional plans for children with autism going through the education system and through social care system. <p><u>Cumbria learning disability strategy</u></p> <ul style="list-style-type: none"> • Use disability learning requirements approval from JSNA to start the development of the Cumbria learning disability strategy. 	<p>Cumbria County Council/ Assistant Director for Children, Health and Care Commissioning.</p> <p>Cumbria County Council/ Assistant Director for Children, Health and Care Commissioning.</p> <p>Cumbria County Council / Assistant Director for Children, Health and Care Commissioning.</p> <p>Cumbria County Council/ Assistant Director for Children, Health and Care Commissioning. / Assistant Director for Early Help and Learning.</p>
Delivering patient rights as set out in the NHS	All expected rights and pledges:	<p>RTT</p> <ul style="list-style-type: none"> • CCG 90.00% 	NHS Constitutional standards	RTT, A&E, Ambulance	Deliver the 5 improvement initiatives as set out through the	North and South Cumbria Clinical Commissioning

<p>Constitution</p>	<ul style="list-style-type: none"> - Referral to Treatment (RTT) - Ambulance - Accident & Emergency (A&E) - Cancer <p>Non-elective admissions. Delayed transfers of care. Permanent admissions into care homes – aged 65+ Patient/service user experience Effectiveness of reablement.</p>	<ul style="list-style-type: none"> • NCUH 91.10% • UHMB 88.00% • CPFT 94.70% <p>Diagnostics</p> <ul style="list-style-type: none"> • CCG 0.70% • NCUH 0.33% • UHMB 0.60% • CPFT 2.50% <p>A&E within 4hr waiting time</p> <ul style="list-style-type: none"> • Dec 15 – 90.7% • Jan 16 – 88.2% • Feb 16- 88.0% • April 16 – 91.3% • May 16 – 91.0% • Nov 16 – 88.1% <p>Cancer GP referrals within 14d</p> <ul style="list-style-type: none"> • CCG – 96.7% • NCUHT – 98.7% • UHMB – 93.2% <p>Ambulance - Cat A – 19min</p> <ul style="list-style-type: none"> • CCG – 88.2% • National standard – 95%. <p><u>Non elective admissions</u></p> <ul style="list-style-type: none"> • Target 14,400 • Q2 – 13,892 <p><u>DTOC</u></p> <ul style="list-style-type: none"> • 2015 – 1,606 per 100,000 • 2016 – 4380 per 100,000 <p><u>Permanent admissions into care homes</u></p> <ul style="list-style-type: none"> • Q1 - 2016/17 target 515 Actual 574.5 • Q2 – 2016/17 target 	<p>It is anticipated that on current timescales that the two year BCF plan will have to be delivered by 23rd of December.</p>	<p>Monthly; Cancer and Community Psychiatric Assessment Quartely.</p> <p>Monthly via the Cumbria Joint Commissioning Board.</p>	<p>A&E delivery board which replaces the systems delivery board.</p> <p>CCG and CC continued collaborative project to meet BCF objectives</p> <p>Deliver new 2 year BCF plan for 2017/18 to 2019/20 to NHS England and LGA for National Guidance.</p>	<p>Groups - Chief Operating officer.</p> <p>Cumbria County Council and North & South Cumbria Clinical Commissioning Group –, Director of Integration; and Chief Operating Officer.</p>
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		<p>515 Actual 526.2 <u>Patient / service user experience</u></p> <ul style="list-style-type: none"> • Target 96.5% • July 2016 93.70% <p><u>Effectiveness of reablement</u></p> <ul style="list-style-type: none"> • Q2 Target – 91.1% • Q2 Cumbria – 88.9% • Q2 North – 88.27% • Q2 South 92.57% 				
<p>Developing services for the most frail and vulnerable that enable them to lead independent lives for longer</p>	<p>Reduced non-elective admissions</p> <p>Fewer permanent admissions to residential care</p> <p>Reduced length of stay Additional measure to be agreed</p>	<p><u>Non elective admissions</u></p> <ul style="list-style-type: none"> • Target 14,400 • Q2 – 13,892 <p><u>Permanent admissions into care homes</u></p> <ul style="list-style-type: none"> • Q1 - 2016/17 target 515 Actual 574.5 • Q2 – 2016/17 target 515 Actual 526.2 <ul style="list-style-type: none"> • Length of Stay Q1 16/17 – 8.87 Q2 16/17 – 8.32 	<p>Additional measures to be agreed from BCF two year plan, which has to be delivered to NHS England and LGA on the 23rd of December.</p> <p>Further BCF programmes of activity to be confirmed Jan-Feb 2017</p>		<p>Frailty service delivered through service delivered at the Cumberland Infirmary and these programmes contribute to the BCF 2 year plan.</p> <p>CCG and CC continued collaborative project to meet BCF objectives</p> <p>Deliver new 2 year BCF plan for 2017/18 to 2019/20 to NHS England and LGA for National Guidance.</p> <p>Further BCF programmes of activity to be confirmed Jan-Feb 2017</p> <p>Develop and deliver Integrated Care Commissioning and Operating groups to support early adopters of Integrated care communities.</p>	<p>North Cumbria Clinical Commissioning Group –: Deputy Network Director; Carlisle and Eden</p> <p>Cumbria County Council and North & South Cumbria Clinical Commissioning Group –, Director of Integration; & Chief Operating Officer</p> <p>Cumbria County Council / Assistant Director for Children, Health and Care Commissioning.</p> <p>Cumbria County Council and North and South Cumbria Clinical Commissioning Groups –, Director of integration; and Chief Operating Officer</p>

			Grant awarded in May 2017.		<p><u>Transformation of 'landscape of care' as outlined in commissioning strategy for care and support. (2015/2020)</u></p> <ul style="list-style-type: none"> • Deliver an integration programme through commissioning to allow external partners to deliver care services. • Provide CC led training programmes for home carers • Introduce CC led commissioning services with care homes with the support of the CCG. • Establish day service provision – work with partners in the community to establish care need. <p><u>Extra care and supported living housing to be developed in Cumbria</u></p> <ul style="list-style-type: none"> • Development and implementation of grant award programme that will enable the delivery of extra care and supported living housing. • Award grant for the development of ECH across Cumbria. • Continue the development of work streams for ECH through the project team and board. 	<p>Cumbria County Council / Assistant Director for Children, Health and Care Commissioning.</p> <p>CCC / Assistant Director for Cumbria Care and Social Care</p>
Outcome Five: The system is put on a sustainable footing.						
Key area of activity	Measure	Baseline	Milestone/1 Year	Frequency of	Programme(s) of activity	Lead Organisation and

			Measure/Target3-year Measure(s) or Target(s)	performance reporting		Lead Officer
Ensuring that the capacity of the formal and informal workforce within the health and wellbeing system is sufficient to meet needs	Implementation and delivery of a sustainable workforce development programme	Work with respective services and providers to create baseline narrative to highlight issues, risks and mitigations.	Creation of reliable workforce data for both the formal and informal workforce, (Yr. 1.)	Annual	Development and implementation of sustainable workforce development programmes within the county council and the health service to support Health and Care Integration.	North, West & East Cumbria STP, and Lancashire and South Cumbria STP.
		Work with respective services and providers to develop reliable workforce data to identify workforce establishment, key trends and issues.	Scoping of possible resourcing and retention solutions to support workforce development. (Yr. 1.)			
			Introduction of a centre of excellence in North Cumbria in 2017. Multi agency development plan to be signed off by emotional viability partnership by January 2017.	Annual	Development of multi-agency workforce development programme is being devised by the C+YP emotional and emotional mental health well-being partnership. Develop a supportive family service integrated with health safeguarding provision through capacity and capability.	Cumbria County Council North and South Cumbria Clinical Commissioning group and Cumbria County Council
	Services delivered to adult carers by Cumbria County Council.	Carers activity sought and identified - target 658 Carers provided with up to date information, advice and guidance – target 1587 Carers receive carer assessments – target 533	Award of adult carer contract to providers in 2017	Annual	Review the adult carer contract and seek permission to go out to tender in 2017 Continue to provide grants through appropriate organisations along with tender process across Cumbria.	CCC / Assistant Director for Children, Health and Care Commissioning. / Assistant Director for Cumbria Care and Social Care

	Number of young carers, aged 5-18, that receive county council support	Young carers with a support plan that is regularly reviewed - target 1089 Young carers receiving an assessment – target 358	Commission services for young carers, aged 5-18 – October 2017	Annual	Review the young carers' contract, strategy and young carers' memorandum of understanding - seek approval to commission service in 2017. Continue to identify and support young carers Continue to work with schools to identify young carers.	CCC / Assistant Director for Early Help and Learning.
Reducing the deficits and pressures within the health and care system	Current Overspend on health and care services within the county Cumbria County Council focusing on prevention in order to reduce demand for high cost acute services.	Total budget £1,431,679,000 Total spend £1,538,566,000 Total deficit £106,887,000 Savings of £5 million	Deficit in the health and care system eliminated by 2021 in North and South Cumbria CCG areas. Savings made required in Health and Care services. The 0-19 integrated Healthy child programme to be implemented by April 2017.	Annual Monthly	Through Better care together and Success regime continue to work towards reducing the deficit on the health and care system. Achieve outcomes outlined in the 11 projects included in the Adult Commissioning Strategy. Complete 0-19 tender process and potentially review new aspects and elements agreed with CPFT.	BCT North, West & East Cumbria STP, and Lancashire and South Cumbria STP. Cumbria County Council/ Assistant Director for Children, Health and Care Commissioning. / Director for Public Health Cumbria County Council / Director for Public Health.

Key:

BCF	Better Care Fund
BCT	Better Care Together
CAMHS	Child and Adolescent Mental Health Services
CCG	Clinical Commissioning Group
CPFT	Cumbria Partnership Foundation Trust
HCP	Health Child Programme
HSCIC	Health & Social Care Information Centre
HWB	Health and Wellbeing Board
JCB	Joint Commissioning Board
LAC	Looked After Children
MHA	Mental Health Act
NWAS	North West Ambulance Service
PHA	Public Health Alliance
PHOF	Public Health Outcomes Framework
QOF	Quality Outcomes Framework

RTT	Referral to Treatment
TCP	Transforming Care Partnership
WHO	World Health Organisation