HEALTH AND WELLBEING BOARD DELIVERY PLAN

This Delivery Plan underpins the Health and Wellbeing Strategy and set out the actions that will be taken to achieve the improvements and outcomes required in each priority area. This work will be undertaken in partnership by strategy agencies, the voluntary and community sector and by individuals themselves.

	Priority Area	Objectives	Activity and actions	Timescale	Indicator	Lead
1.	Achieving a healthy weight	Capacity building/training- development of knowledge and skills around nutrition, physical	To deliver training for midwives on maternal obesity and introducing solids for health visitors	annual	Number of staff attending training	PH
		activity and healthy weight to deliver effective brief	To deliver training to frontline staff on weight and nutrition guidelines	annual	Number of staff attending training	PH
		interventions	To deliver Let's Get Moving ysical Activity Care Pathway training to primary care staff and the wider community	annual	Number of staff attending training	PH
			To deliver Fitness for Life training programme to primary school teachers	annual	Number of teachers attending training	PH
		Breastfeeding support services- providing easier access to breastfeeding and infant feeding	To improve staff skills on infant feeding by delivering training and audit staff skills	Feb 2014	Achieve UNICEF stage 2	PH
		support	To expand number of local breastfeeding cafes and peer supporters reaching women ante natal and post natal	March 2015	Increase prevalence of breastfeeding at 6-8 weeks	PH
			To develop Infant Feeding Care Pathway incorporating all UNICEF Baby Friendly Practice Standards	March 2015	Mother's audit of infant feeding support report experience of care in line with UNICEF standards	PH
		Healthier catering - working with early years settings, schools and fast food outlets to increase the range of healthy food options available	To roll out Eat Better, Start Better training for early years settings	March 2015	50% of early years settings signed up to voluntary food and drink guidelines	PH

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Priority Area	Objectives	Activity and actions	Timescale	Indicator	Lead
		To work with school caterers to improve the uptake of school meals	March 2014	Increase uptake of free and paid school meals	PH
		To implement the Healthier Catering Commitment (HCC) scheme with eligible fast food businesses	March 2016	75% of all eligible fast food outlets awarded HCC certificate	PH
	Healthier built environment - working with others to create spaces and homes that support health and wellbeing	Restrictive policy on new hot food take-away in Development Management Local Plan	December 2014	No new hot food take-away approved	LBL (Plannin
		To support development of community gardens and community food growing initiatives	March 2015	Increase number of community gardens and food projects	PH
		To ensure health perspective incorporated into large scale Housing developments	March 2016	Increased active travel	PH
	Physical activity programmes - providing access to a range of activities in schools and in the community.	To develop Healthy lifestyle programmes promoting healthy eating and physical activity and offer them to all primary schools.	March 2015	Increased participation in extra curricular ysical activity. Increased number of chane4life clubs.	PH
		To work with School to encourage Fitness for Life sessions to be incorporated into school curriculum	March 2015	Increased fitness of primary school aged children	PH
		To support children and adults to participate in physical activity through subsidised courses	March 2015	Number of children and adults who access swimming, cycling	PH
		To support uptake of targeted activity programmes e.g. Exercise on Referral, Active Heart, NHS Health Checks Get Moving and walking for health	March 2015	Increase proportion of adults who participate in activity	PH

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Priority Area	Objectives	Activity and actions	Timescale	Indicator	Lead
	Nutrition initiatives- working with communities to improve healthy eating and cooking skills of residents	To implement universal free vitamin D scheme to pregnant women, one year post natal and children under 4 years	March 2014	Uptake increases to 25% of all those eligible (from baseline of 10%)	PH
		To roll out healthy eating on a budget cooking courses	March 2014	Number of participants report improved healthy eating	PH
		To support community projects in development of cookery/healthy eating	March 2014	Number of participants (DNP, 170 project, participatory budgeting)	PH
		To monitor access to food banks in Lewisham	annual	Number of participants accessing food banks	PH
		To work with partners to ensure evidence-based nutrition guidelines are adopted and disseminated	March 2015	Number of organisations signed up to nutrition guidelines	PH
	Workplace health initiatives - assisting employers to help their own employees improve their health	To work initially with the Council and partner agencies that are represented on the Health and Wellbeing Board to promote healthy eating and physical activity with their own employees.	March 2014	Evidence that employees have been given information on healthy eating and feedback from staff	Communic tions/ HR/ Occupation al Health/ partner agencies
		To deliver workplace events where healthy eating / options are promoted, beginning with the Council and partner agencies that are represented on the Health and Wellbeing Board	March 2014	Feedback from staff	Occupation al Health/ HR/ CHIS/ partner agencies

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Priority Area	Objectives	Activity and actions	Timescale	Indicator	Lead
		To develop agreements with the caterers to ensure that food supplied for Council and partner agencies that are represented on the Health and Wellbeing Board have healthy options labelled	March 2015	Copy of agreement and monitoring report on food supplied	Procurement / PH/ partner agencies
		To develop and implement Nutrition guidelines, which demonstrate the Council's and its partners commitment to healthy eating and provide an outline of what is expected from catering providers.	March 2015	Copy of the Nutrition guidelines monitoring report on food supplied	Procurement PH/ partner agencies
	 Obesity surveillance – monitoring levels and trends of overweight and obesity in the population¹ 	To increase the participation in National Child Measurement Programme (NCMP)	annual	Over 90% of eligible children measured	LHNT (SANS)
		To produce annual data set on BMI in pregnancy at booking appointment	annual	Determine prevalence of maternal obesity	PH/LHNT
		To record and monitor overweight and obesity in adults aged 40-74 as part of the NHS Health Check programme	annual	Determine prevalence of excess weight in adults aged 40-74 years	PH
	Weight management programmes - targeting those adults and children already	To follow up proactively all children identified as very overweight in the NCMP by school nurses	annual	Number advised and attending appointments	LHNT (SANS)
	identified as overweight or obese	To develop targeted weight management programmes in community settings	March 2015	Increased number of referrals and positive outcomes	PH
		To develop borough wide specialist community weight management services for children and adults	March 2015	Increased number of referrals and positive outcomes	PH

¹ This reflects the work of a number of strategies and plans. Detailed action plans are available for Breastfeeding, Promoting Healthy Weight in Children and Families Strategy, ysical Activity Plan, Food Strategy and Workplace Health

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Priority Area	Objectives	Activity and actions	Timescale	Indicator	Lead
	Streamline healthy lifestyle referral pathways following NHS Health Check	To commission a Lifestyle Referral Hub for those identified at high CVD risk after NHS Health Check	March 2014	Increased referrals to weight management and physical activity programmes	PH
2. Increasing the number of people who survive colorectal, breast and lung cancer for 1 and 5 years	Improved awareness of early signs and symptoms of key cancers such as bowel cancer, lung cancer and breast cancer.	To develop a cancer awareness raising programme in collaboration with the community and health improvement practitioners.	March 2014	Programme developed with appropriate activity indicators and incorporated into the work of the health improvement provider	PH/CHIS
		To deliver cancer awareness raising programme in collaboration with the community and health improvement practitioners.	March 2015	Cancer Collaborative with local communities developed and involved in targeted cancer awareness programme in at least 2 wards and identified population groups with worse outcomes for cancer	
		To review and expand cancer awareness raising programme implemented in collaboration with the community and health improvement practitioners.	March 2016	Cancer Collaborative and cancer awareness programme expanded to other wards with poor outcomes for cancer	PH/CHIS
	Improved awareness of cancer screening programmes	Bowel, Breast and Cervical Cancer Screening training developed as part of the Lewisham Health Improvement Training Programme aimed at improving the skills and knowledge of individuals with paid or unpaid health promotion role in	March 2014	Two training courses developed	PH

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		Work with the health promotion specialist for the South East London boroughs to promote the Bowel Cancer Screening Programme, providing resources and training for primary care and community and voluntary groups	March 2014	Course on Bowel Cancer Screening delivered to at least 12 key individuals from primary care and community and voluntary groups who have a health promotion role	PH/ SE London boroughs health promotion specialist
		Delivery of Bowel, Breast and Cancer Screening training delivered as part of the Lewisham Health Improvement Training Programme aimed at improving the skills and knowledge of individuals with paid or unpaid health promotion role in Lewisham	Nov 2015	At least 2 training courses for a total of 24 individuals with health promotion role in Lewisham delivered AB, JA & KM	PH/ SE London boroughs health promotion specialist
		Work with NHS England to promote uptake of cancer screening for cervical, bowel and breast cancer	Oct 2015	Improved uptake of cancer screening in Lewisham	PH/NHS England
	Greater awareness within primary care on the signs and symptoms of cancer and the appropriate management of patients presenting	Distribution of Cancer profiles to each GP practice in Lewisham providing information on incidence and mortality, cancer screening uptake, 2 week referrals and emergency presentations for cancer.	March 2015	Improved 2 week GP referral figures	London Cancer Commission ing Team
		Application to Macmillan to fund GP lead for Cancer and if successful to work with practices on education for primary care to improve cancer awareness and early diagnosis,	2013-15	Successful application Work programmes developed with appropriate activity	PH/CCG

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	screening uptake and improved survivorship.	indicators and incorporated into the work of the Lead Cancer GP
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	Priority Area	Objective	Activity and Action	Timescale	Indicator	Lead
3.	Improving immunisation uptake	Further development and implementation of care pathways – active management of individual children to ensure that they are immunised is key to success	To ensure HV pathway, similar to that in MMR pathway, becomes an integral part of the preschool booster pathway	April 2014	Pathway agreed and reports on implementation submitted to Immunisation Strategy Group	PH
			To agree with SANS and with NHS England a care pathway for immunisation of school aged children in Lewisham	April 2014	Pathway, and relevant contracts, agreed.	PH
		Support for GPs in aiming for best practice, in implementing care pathways fully and to ensure good flow of data. Support to include feedback of information to practices.	To develop and disseminate care pathway for immunisation of all children under one.	April 2015	Pathway agreed and reports on implementation submitted to Immunisation Strategy Group	PH
			To agree and deliver a training programme for GP facilitators so they can support practices in maximising the uptake of vaccines	Sept 2013	Training Programme Delivery.	PH
			To produce monthly dashboard mail-out for GP practices, detailing individual surgery performance on uptake of MMR and quarterly performance on uptake of preschool booster	Monthly for MMR Quarterly for PSB	Dissemination of Dashboards	PH
			To support GPs in introducing changes to national immunisation schedule through providing training for practice nurses, advice on formulation of patient group directives, and promoting new vaccines.	Respond as soon as possible as changes are announced.	Uptake of newly introduced vaccines.	PH

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Priority A	rea	Objectives	Activity and actions	Timescale	Indicator	Lead
			To agree annual action plan aiming to improve uptake of influenza vaccine. Those at risk require immunisation each year, against the predicted prevailing types of the virus for that year.	Annual	Plan Agreed	CCG
		Working with children's centres and schools to ensure their full engagement.	To review arrangements for schools BCG and for provision of BCG to others who require the vaccine as part of TB needs assessment	Sept 2014	Completed Report	PH
			To ensure incorporation of collection of information on immunization status into school entry procedures	Sept 2015	%Return of Health Checklists	PH
		Identifying, and attempting to remove barriers to successful completion of immunisation	To conduct survey on parental perceptions of barriers to immunisations	Sept 2014	Completed Report	PH
			Annual workplans to include measures to minimise barriers	Annual	Uptake of vaccine	PH
4. Reducing A	Alcohol	Strengthening population based approaches to prevention through effective enforcement of	Strengthen and Review LBL licensing policy	March 2014	New policy agreed	LBL (Licensing)
		regulations relating to alcohol supply	To ensure Licensing Law and Regulations are used whenever possible	ongoing	Evidence of license reviews and refusal	LBL (Licensing)
			To develop a system for the Director of PH to consider and respond to Licensing applications	March 2013	Clear process established and being used	PH/LBL

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	Priority Area	Objective	Activity and Action	Timescale	Indicator	Lead
4.	Reducing Alcohol Harm		To develop a rolling programme for test purchasing operations by Trading Standards for 'off sales' and Under Age Sales	ongoing	Number of test purchases per annum	LBL (Trading Standards)
		Improving referral pathways and expand interventions to support those most at risk	To review and improve locally defined referral routes and care pathways for alcohol (to include referral procedures), including specific groups such as vulnerable adults, young people and those 40-74 having health checks)	March 2014	No. of people accessing and completing treatment services will increase. Implementation of Lewisham hospital Alcohol CQUIN	DAAT/SP and Alcohol Treatment Provider, LHNT, CCG
					No. of people aged 40- 74 accessing and completing treatment services will increase.	
					No. of young people exiting treatment in a planned way being maintained at 90% or better each year up to 2016	
					Number of people aged 40-74 accessing and completing treatment services will increase.	
					The number of young people exiting treatment in a planned way being maintained at 90% or better each year up to 2016	
			To monitor, review and develop the capacity of the alcohol	Oct 2014	Review implemented	DAAT

	treatment system for Lewisham			
	To provide satellite and outreach provision from alcohol services into partnership agencies, the community and targeted specific areas	March 2015	Decrease in the number of alcohol-related hospital admissions.	DAAT/ SP and Alcohol Treatment Provider
Training for practitioners working in Lewisham to deliver effective screening and brief interventions for alcohol misuse.	To deliver Alcohol Identification Brief Advice (IBA) Training to partnership agencies and front line staff	March 2016	By 2016, most practitioners will be skilled in identifying those at risk from alcohol harm and in delivering brief interventions.	PH/DAAT/ SP/CCG
	To deliver alcohol IBA training sessions for the GP Protected Learning Time Event.	Aug 2013	50% practices have trained staff in IBA	PH/DAAT/ SP/CCG
	To undertake an evaluation of alcohol IBA Training to be undertaken and produce recommendations for the future.	Oct 2013	Evaluation report	PH/DAAT/ SP & Alcohol Delivery Group Members
Co-ordination and enforcement of existing powers against alcohol-related crime, disorder and anti-social behaviour	Responsible Retailers Agreements to be signed with off licences in drinking hotspots to remind them of their licensing responsibilities and identify problem premises.	March 2014 & ongoing	No. of agreements No of problem premises	NCSS
	To review the needs of street drinkers/street communities/Rough Sleepers	March 2015		DAAT/SP, NCSS/PH
	Audit offenders with alcohol related offences once a year to ensure appropriate support has been offered and review how Probation clients access alcohol services and embed Alcohol	ongoing		Lewisham Probation, Alcohol treatment provider

	Treatment Requirements with alcohol care pathway			
Workplace health policies – assisting employers in developing policies and schemes that promote consistent messages about alcohol harm	To work with partners to review and/or develop workplace alcohol policies to support improvement of health of the working population and reduce sickness absence	2014	Evidence of policies demonstrated	PH/DAAT/ SP & Alcohol Delivery Group Members
To produce and widely distribute consistent alcohol messages & signposting to support services.	Communications strategy including websites, posters, twitter, Lewisham Life, press and bus stops & billboards	March 2014	Awareness raised of the physical and mental short-term and long-term effects of drinking alcohol	PH/DAAT/ SP
	To raise awareness of alcohol harm amongst children & young people through SE Lesson, Health Days and Junior Citizens.	ongoing	Increase in knowledge, development of skills and attitudes to support making informed choices and decisions	DAAT Training Team/PH
	To develop partnerships between community groups, including those in Bellingham Well London & North Lewisham and alcohol treatment agencies.	March 2014	Numbers of residents reached	DAAT/ SP and Alcohol Treatment Provider
	To develop a social marketing campaign to include raising awareness of alcohol harm amongst young women and a mobile one application aimed at those most at risk to reduce alcohol related harm	March 2014	Usage of application Alcohol related admissions among young women	DAAT/ SP
Share intelligence to ensure a targeted approach to tackling alcohol related violence.	To establish a process that allows alcohol related assault data to be collected by UHL A&E and shared with the police and public health to inform a targeted response.	2014	Data shared	PH,MPS Reducing Reoffendi ng Lead,

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						LHNT
			To collate and analyse UHL A&E and Police Data on quarterly basis, to Map Alcohol Related Issues	2015	Quarterly reports	PH, MPS & Reducing Reoffendi
			To identify key hotspots and produce action plan for response	2015	Action plans	PH, MPS & Reducing Reoffendi ng
	Priority Area	Objective	Activity and Action	Timescale	Indicator	Lead
5.	Preventing the uptake of smoking among children and young people and	otake of smoking understood and shared across the Health and Well Being Board	To develop a clearly articulated and shared vision.	March 2014	All partners report demonstrate an shared understanding of the vision	PH/LBL
	reducing the numbers of people smoking ²		To analyse aboved typedevatoreding			
	numbers of people		To ensure shared understanding across all partners on the effective methods for reducing tobacco harm and progress.	March 2014	Partners demonstrate a shared understanding of how to reduce tobacco harm	PH/LBL
	numbers of people	Motivate and assist smokers to	across all partners on the effective methods for reducing tobacco		shared understanding of how to reduce	PH/LBL

² This is part of the Smokefree Future Delivery Plan 2013/16. The overall indicators for actions in delivery plan are: Reduce smoking prevalence to 15% by 2016
Reduce the number of primary smoking related fires (those that cause harm to people, damage property or require five or more fire engines)
Reduce the number of secondary smoking related fires being all other (less serious) fires such as rubbish fires.

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			Increased numbers of referrals to stop smoking services, including following NHS health check	
	To target smoking parents of asthmatic children and work with CCG, primary care and others on identification and developing action plan	2014-15	Implementation of Action plan	SSS CCG
	To ensure that service spec and	annual	50 quits x pregnancy	SSS, PH,
	action plan of SSS incorporates recommendations from health		40 quits x acute patients	LBL
	equity audit 2013.		20 quits x mental health	
			5% increase in routine and manual quitters	
			10% increase in quitters aged 30-35	
			10% increase in women quitters over 60	
			5% increase in Black African quitters	
	To contact people who have received service and to reengage them in service if they have relapsed.	ongoing	All service contacts called at 52 weeks to establish status	SSS
	To develop communications plan for Stop Smoking service .	Ongoing	Systematic and planned response to national and local campaigns	SSS/LBL (Comms)

	To improve referral pathway to stop smoking services	annually		PH
Engage schools and colleges in 'tobacco free' agenda and commission education programmes	CYP Forum to promote tobacco free agenda	2013/16	Evidence demonstrated	VAL
to influence young people not to start smoking.	To offer a minimum of 5 secondary schools will be offered a tobacco peer education programme.	2013/14	Reduce the % of smokers at 15 years 5 schools 50 peer educators trained 1000 pupils reached	PH
	Cut Films to work with LeSoCo on design/ film making curriculum to involve young people in tobacco peer education.	2013/14	Workplan agreed and implemented	PH/Cut Films
Regulate tobacco products effectively	Trading Standards to reduce access to illicit tobacco through gathering intelligence, targeting suppliers and enforcement.	2013/15	Minimum of 250 retail premises visited. Evidence of action against covert sources of supply where detected	Trading Standards , LBL
	To appoint dedicated officer to work on tobacco regulation and continue monitoring compliance with legislation.	Sep 2013	Officer Appointed and work plan delivered	Trading Standards , LBL
	To undertake a Shisha (tobacco) users survey in Lewisham	March 2014	Survey completed	Trading Standards , LBL
 Communicate tobacco free agenda effectively. 	To raise awareness of the risk of cheap illicit tobacco, including the use of social marketing tools such as Twitter/Facebook	2013/14	SE London social marketing campaign	LBL (Comms)
	To promote images of 'Smokefree' and align local comms to national	Ongoing	Range of outlets utilised; min of 1 item	LBL (Comms)

16.66.16		campaign on Smokefree		in Lewisham Life per annum	
			Dec 2013	Website pages completed	
		To contribute to Bellingham Well London, North Lewisham Health Improvement programme & other local initiatives by providing information about SSS, developing creative projects and training staff and volunteers	March 2014	Evidence demonstrated	PH
	Reduce exposure to second hand smoke	To engage animal organisations to promote smokefree homes	March 2014	Increase in number of homes that are smokefree	PH
		To promote smokefree homes and	March	Increase in number of	PH/CYP
		cars systematically with all staff working with pregnant women, children and families and housing staff through publicity & training	2014	homes that are smokefree Evidence demonstrated	SSS/LHN T
		To commission training on smokefree homes and prevention of CYP uptake of smoking.	March 2014	20% staff trained in CYP trained each year	PH/CYP
	Workplace health	To ensure brief advice provided to all staff smokers by all partners	ongoing	Numbers referred to SSS	SSS All
		To work with organisations to enforce no smoking policy outside entrances and in grounds	On going	No smoker smoking outside buildings of partner agencies	Human Resource s in all organisati ons
Improving mental health and	Ensuring those in BME groups and at high risk of anxiety and	To actively promote IAPT services through GP practices in BME	April 2014	Percentage of IAPT referrals from BME	SLAM

		To work with organisations to enforce no smoking policy outside entrances and in grounds	On going	No smoker smoking outside buildings of partner agencies	Human Resource s in all organisati ons
wellbeing	depression get access to IAPT services	groups		groups	
		Patients with long term conditions from BME groups to be assessed for anxiety and depression & referred where appropriate	April 2015	Percentage of patients assessed for depression with diabetes (QOF)	SLAM
		To encourage self referral to IAPT from BME communities through active promotion of services	April 2014	Increase in the number of BME referrals which come through self referral route	SLAM
	Targeting those individuals and families at high risk of long term mental health problems through early intervention and parenting support delivered in schools and childrens centres	To implement CYP IAPT model in Lewisham improving the quality of service delivered to child and their families in Lewisham	December 2014	2 staff trained from Voluntary sector in accredited parenting therapy programmes (specifically for families of 3 - 10 year olds, with behaviour and conduct issues)	CYP
		Targeted Family Support to work with 400 families a year.	April 2015	Demonstrated improvement in 3 key outcomes; improved child and family resilience; improved school participation and engagement; and prevention of escalation	CYP

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Priority Area	Objective	Activity and Action	Timescale	Indicator	Lead
		Lewisham schools to be offered the opportunity to participate in place2be or similar models of psychological support to school age children	April 2015	Number of schools offering Place2be or similar intervention	СҮР
	Supported discharge – those who access mental health services will be supported at discharge to prevent relapse	To develop care pathways which support individuals as they transition through care services eg. Inpatient to community mental health services, community mental health services to primary care.	October 2015	Percentage of people discharged to primary care with a recovery and support plan in place.	SLAM
	Improve recognition of poor mental health by front line workers (statutory and voluntary sector) and equip them to support individuals experiencing mental illness.	To offer a programme of mental health first aid training to all front line public and voluntary sector workers to support them to respond to the needs of people with mental health needs.	Reviewed annually from April 2014	4 mental health first aid training courses to be offered 'free' to front line workers in Lewisham Number of course	PH
				participants completing courses	
		Youth Mental Health First Aid training courses to be delivered prioritising those working with vulnerable young people	April 2014	Number of courses run and participants completing the course.	PH
		To offer tier 1 mental health awareness training to all front line staff working with children and young people	March 2015	Uptake of tier 1 training across the borough	СҮР

Priority A	rea	Objective	Activity and Action	Timescale	Indicator	Lead
		Improve the physical health of those with poor mental health.	To offer support to all patients seen by SLAM identified as smokers to stop smoking	April 2014	Percentage of service users involved in developing their smoking cessation care plan	SLAM
			To offer Annual physical health checks to all patients on GP SMI registers		Uptake of physical health checks	CCG
7. Improving health	sexual	We will continue to develop new and innovative ways to deliver sexual health services to the population, including through armacies, GP practices, online as well as clinic settings	To increase access to sexual health services in pharmacies including: • Emergency contraception • Condom distribution • Pregnancy testing • Chlamydia and gonorrhoea screening	April 2015	Number of pharmacies offering sexual health services; number of individual visits to pharmacies for these services	PH
			To increase access to online STI screening through promotion of the services available	October 2014	Number of online screening requests	PH
			To review sexual health clinic provision across Lewisham in partnership with stakeholders	October 2014	Re-specification of Sexual health services in Lewisham	PH/ LSL sexual health commissio ners
		We will ensure that all young people know how to access and use free condoms, and are	To develop a Lewisham Sex and Relationships Education curriculum and lesson plans with	April 2015	Development of lesson plans which can be used in all schools	Public Health

10.06.13	equipped with negotiation skills through the SRE programmes to use them to protect themselves.	school nursing and sexual health			
	F	To ensure that all Lewisham secondary schools are offered access to SRE lessons from local services	April 2014	Number of schools taking up offer of SRE lessons	Public Health
		To continuously improve the quality of SRE provision in Lewisham	October 2014	Feedback from pupils and teachers on content	Public health
		To ensure young people are able access sexual health services in a variety of settings in a timely	April 2014	Feedback from young people on local services	LHNT
		manner		Numbers of young people accessing different types of service provision	
	Will ensure all our GP practices have the opportunity to be trained in sexual health and HIV	To deliver a sustainable programme of Sexual Health in Practice (SHIP) training across Lambeth, Southwark and Lewisham	April 2014	Number of GPs and practice nurses attending Sexual Health in Practice Training; number of practices who have at least 1 GP and practice nurse who have completed training	PH
	We will continue to expand the opportunities to promote and access LARC	To develop and commission pathways for Long Acting Reversible Contraception for primary care	April 2014	Re-commissioned LARC contracts across primary care	PH
		To improve the experience of women accessing LARC across Lewisham	October 2014	Feedback from women in LARC providers reported annually	PH

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			To ensure all women accessing emergency contraception and abortion services are offered rapid access to LARC	April 2014	Proportion of women under going TOPs who choose LARC as a method	PH
		. Mo will increase the offer and	To provide all practices with rapid HIV tests following attendance at SHIP training	April 2014	Increase in the number of positive HIV tests performed in primary care	PH
		We will increase the offer and uptake of HIV testing in primary care (GP practices) as part of routine practice	Offer a rolling programme of HIV training and updates for all primary care staff	Sept 2014	Increase in the testing rate per 1,000 patients per practice	PH
8.	Delaying and reducing the need for long term care and support	Providing timely and appropriate enablement services	To develop co-ordinated information and advice services to enable peopl to secure appropriate advice and support at an early stage		User survey	ASC
		Providing support for people with complex needs to live at home	To work with Housing services to develop appropriate housing which can be a home for life, including for those people with complex needs.	By July 2016		ASC/LBL (Housing)
		Providing integrated care and support	To further enhance enablement service to reduce unnecessary hospital admissions and ensure timely and effective hospital discharge	March 2014		ASC/LBL (Housing)
		Enabling people to manage their own conditions at home	To undertake an analysis of unmet needs in relation to supporting people to remain at home and to influence joint commissioning intentions eg night care	March 2014	Patient survey indicator - how supported patients feel to manage their own condition	ASC/LBL (Housing)

	10.00.10		To establish community development posts to work in the community and local neighbourhoods, alongside health and social care staff, to develop alternatives to statutory care and support and improve communication and referral lines.	Dec 2013		ASC/LBL (Housing)
	Priority Area	Objective	Activity and Action	Timescale	Indicator	Lead
9.	Reducing the number of emergency admissions for people with long term conditions	Developing a shared vision and strategy for 'integrated primary, hospital and social care across the heath economy in Lewisham.	Building on the foundations of the Neighbourhood Network Model/Networks to develop practical and pragmatic solutions to enable integrated working across those providing care to patients	2015/16	Patient Feedback Feedback from health care professionals Programme evaluation	LBL/CCG
		Implementing the key principles for treatment and care for all people with long term conditions; Risk profiling, Integrated Care Teams and Self Care.	To ensure the implementation of the Register, Recall and Review (3Rs) used to support the management and treatment Diabetes in partnership with patients is embedded in Primary Care (GPs)	Ongoing	Patient Feedback Peer to Peer Review & Evaluation	CCG
			To ensure the outcomes of Risk Profiling in Primary Care interfaces and support the Integrated Care Teams	2015/16	Patient Feedback Quality Innovation Productivity and Prevention (QIPP) Programme	CCG/LBL/ LHNT

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		To develop the mechanisms to enable Collaborative Care Planning with patients to support multi-disciplinary working integrated across whole system	2015/16	Patient Feedback Quality Innovation Productivity and Prevention (QIPP) Programme	CCG/LBL/ LHNT
	Encouraging more independence and healthier lifestyles	To promote self-care for patients through the use of patient led groups and education programmes (E.g. Developing Community Champion Programmes for all LTCs and supporting the Expert Patient Programme)	2015/16	Patient Feedback	CCG
Priority Area	Objective	Activity and Action	Timescale	Indicator	Lead
		To implement the Proactive Primary Care Programme	2015/16	Patient and GP Practice Feedback Evaluation of programme	ccg
		To empower patients to access their own data to support self-care	2015/16	Patient survey indicator - how supported patients feel to manage their own condition	CCG
	Encouraging GPs to identify undiagnosed COPD, Diabetes and CVD (hypertension, atrial fibulation, arrythmia, heart failure, CHD)	To encourage uptake of NHS Health Checks by GP practices in order to identify people age 40 to 74 with undiagnosed diabetes and CVD	March 2014	Numbers of health checks provided by GP, pharmacy and community outreach providers will increase	PH
	among their patients	To utilise national schemes to support practices (E.g. QP QOF: Quality and Productivity – Quality Outcomes Framework, Direct Enhanced Schemes; Dementia – DES)	Ongoing	GP Disease Prevalence Registers (CMS)	ccg

10.08.13		To support practices in order to	Ongoing	GP Disease	CCG
	Providing support, training and development to primary care in the management of long term conditions.	standardise processes and share best practice in identifying the undiagnosed	Origoning	Prevalence Registers (CMS)	
				Patient feedback (Breatheasy, Diabetes Forum and LTC Group)	
		To continue GP Education and Training Programmes	Ongoing	GP Feedback	CCG
		To support workforce development for primary care in partnership with the South East London Community Based Care Strategy	2015/16	GP Feedback	CCG
Priority Area	Objective	Activity and Action	Timescale	Indicator	Lead
	Redesign of all key LTC pathways	To continue to integrate the diabetes pathway, including primary care, community care and self care aspects	2014/15	Quality Innovation Productivity and Prevention (QIPP) Programme	CCG
				Patient Feedback	
		To review the asthma pathway to ensure that it is efficient, effective and provides quality outcomes for patients	2014/15	Quality Innovation Productivity and Prevention (QIPP) Programme	CCG
				Patient Feedback	
		To undertake an Holistic review CVD pathways from diagnosis to treatment.	2014/15	Quality Innovation Productivity and Prevention (QIPP) Programme	CCG
				Patient Feedback	

Key to Leads		
ASC	Adult Social Care	

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10.00.10	
CCG	(Lewisham) Clinical Commissioning Group
CHIS	CHIS
CYP	Children Young People
DAAT	Drugs And Alcohol Team
LBL	London Borough of Lewisham
LHNT	Lewisham Healthcare NHS Trust
MWM	Midwifery Department
MPS	Metropolitan Police Service
PH	Public Health
PHE	Public Health England
SANS	School Age Nursing Service
SLAM	South London and Maudsley NHS Trust
SP	Supporting People
SSS	Stop Smoking Service
VAL	Voluntary Action Lewisham
LHNT	Lewisham Hospital
NCSS	Neighbourhood Community Safety Service