

Health and Wellbeing Board			
Report Title	Health and Wellbeing Strategy Implementation Group: Action Plan report		
Contributors	Danny Ruta, Director of Public Health	Information Item No.	7A
Class	Part 1	Date:	19 th May 2015

1. Purpose

- 1.1. The purpose of this report is to inform the Board on progress made in implementing the Lewisham Health and Wellbeing Strategy 2012-2015 Delivery Plan and the proposal to develop a new plan for initially 1 year.

2. Recommendations

- 2.1. Members of the Health and Wellbeing Board are recommended to note:
- a) progress made in implementing the activities contained in the 2012-2015 Delivery Plan.
 - b) future activities proposed at the Delivery Plan review workshop of 20th April 2015.
 - c) proposal to develop a Delivery Plan initially for the next 1 year, during which the current Health and Wellbeing Strategy priorities are streamlined to a more strategic focus that reflects the whole system approach.

3. Policy Context

- 3.1 The Health and Social Care Act became law in March 2012 and provided the legal basis for the transfer of public health functions from the NHS to local authorities as part of the wider NHS Transformation Program. Under the Act, the majority of Public Health responsibilities and functions transferred to the Council on 1 April 2013.
- 3.2 The Health and Social Care Act (2012) places a statutory obligation on the Council, Clinical Commissioning Group (CCG) and the NHS Commissioning Board to develop a Joint Strategic Needs Assessment and produce a joint Health & Wellbeing Strategy to meet the needs identified.

4. Strategic Context

- 4.1 The Health & Wellbeing Strategy Delivery Plan contributes to the priority outcome in Shaping our Future that communities in Lewisham should be Healthy, Active and Enjoyable – where people can actively participate in maintaining and improving their health and wellbeing. The Health & Wellbeing Strategy Delivery is consistent with this priority, and with the priorities of the Children and Young People's Plan
- 4.2 The Better Care Fund (BCF) is part of a wider Adult Integrated Care Programme (AICP). The focus of AICP is to establish better planned and co-ordinated care closer to home, thus reducing demand for emergency/crisis care in acute settings and preventing people from requiring mental health and social care services. Since the development of the Delivery Plan those actions aimed at delaying and reducing the need for long term care and support (Priority 8) and at reducing the number of emergency admissions for people with long term conditions (Priority 9) have been

refreshed so that they directly contribute to health and social care integration, and to ensure compliance with the new Care Act. These priorities are therefore now being delivered jointly by LBL, Lewisham CCG and its partners through the AICP.

5. Background

- 5.1 The Lewisham Health and Wellbeing Strategy was developed in 2012/13 by the Council together with its partners using the Lewisham JSNA evidence. The 9 priorities listed in sections 6 to 14 of this report were agreed to be delivered over a period of ten years.
- 5.2 A Delivery Plan that underpins the Health and Wellbeing Strategy sets out the actions that were to be taken, initially in the first three years, to achieve the improvements and outcomes required.
- 5.3 The Health and Wellbeing Board, in September 2013, delegated the responsibility for the monitoring the implementation of the Delivery Plan to the Implementation Group. The purpose of the Implementation Group was to provide an overview of progress on delivering the Health and Wellbeing priorities and report to the Health and Wellbeing Board. Since the introduction of the AICP, implementation of Priorities 8 and 9 have largely been overseen by the AICP Board and reported through it to the Health and Wellbeing Board.

There has been good progress made in many of the priority areas. Appendix 1 provides summary of progress in delivering all the activities and actions in the Delivery Plan over the three years. Red Amber and Green (RAG) rating has been used to assess progress, where Green is good, Amber is fair, and Red is poor. Majority the actions have been rated Green.

A workshop was held on 20th April 2015 with leads and partnership groups for each of the 9 Health and Wellbeing to review progress and identify activities/interventions for the 2015-2018 Delivery Plan, including overarching themes that the Health and Wellbeing Board might consider taking responsibility for.

Key achievements in delivering each of the 9 priorities during the period 2012-2015 are highlighted in the sections that follow below. Also included under each priority are 2015-2016 activities/interventions proposed in the workshop.

6. Priority 1: Achieving a Healthy Weight

- 6.1 Breastfeeding: Community and maternity services achieved UNICEF Baby Friendly Initiative stage 2 award in 2014.
- 6.2 Nutrition initiatives: Implementing universal vitamin D scheme reaching 30% of eligible women and 50% of infants under 1 year.

Physical activity: Implementing the Let's Get Moving physical activity care pathway training of primary care staff and the wider community to deliver brief advice on physical activity.

- 6.3 Healthier built environment: The Development Management Local Plan (2014) includes a DM policy (18) on hot food take-ways. This includes a restrictive policy based on an

exclusion zone (400m) around schools and maximum percentages outside exclusion zones.

- 6.4 Obesity surveillance: High participation rate in National Child Measurement Programme. Also weight management support providing a range of programmes available for children and adults as part of a tiered referral pathway accessed by nearly 2,500 residents a year.

Workshop proposal for future activity

- *Create a partnership to work with schools to support healthy lifestyle initiatives*
- *Achieve and maintain Baby Friendly accreditation across maternity and community*
- *Implement the Healthier Catering Commitment (HCC) scheme with eligible fast food businesses*

7. Priority 2: Increasing the number of people who survive colorectal, breast and lung cancer for 1 and 5 years.

- 7.1 Review of Cancer: CCG and Public Health have completed a review of cancer in February 2014. Reducing variation in early detection has been incorporated into the work of the CCG Primary Care Development Strategy Board.

- 7.2 Cancer awareness raising: Public Health incorporated cancer awareness raising as part the services delivered by the Community Health Improvement Service in Lewisham & Greenwich Trust).

- 7.3 Be Clear on Cancer Campaigns: Public Health England's National Be Clear on Cancer Campaigns that have focussed on Bowel Cancer, Bladder and Kidney Cancer, Lung Cancer, Ovarian Cancer and Breast cancer in older have been promoted to Primary care and communities.

Workshop proposal for future activity

- *Develop a collaborative between health professionals and local communities to deliver targeted Awareness Programme to promote recognition of bowel, breast and lung cancer symptoms and earlier presentation to GP Practices.*
- *Promote cervical, bowel, breast and cervical cancer screening programmes in the community and work with GP Practices so that they are more proactive in following up cancer screening non-attenders*

8. Priority 3: Improving Immunisation Uptake

- 8.1 Further development and implementation of care pathways: A new Children's Centre Pathway was launched in July 2014 to improve uptake of preschool booster and MMR2.

- 8.2 Support for GPs in aiming for best practice, in implementing care pathways fully: Monthly dashboard being mail-out by Public Health to GP practices, detailing individual surgery performance on uptake of MMR and quarterly performance on uptake of preschool booster.

- 8.3 Annual action plan to improve uptake of influenza: Plan agreed for 2013/14 and for 2014/15. In the 2014/2015 Flu season, Lewisham saw its best performance yet and its greatest levels of improvement on uptake of flu vaccine.

Workshop proposal for future activity

- *Work with GP Practices/Neighbourhood Practice Groups, Pre-school and Early Years settings to improve Pre-School Booster/MMR2 vaccination.*
- *Work with GP Practices to improve access to GP-based vaccinations.*
- *Develop and disseminate public information to 'normalise' childhood vaccination and promote earlier and more timely delivery of vaccination.*

9. Priority 4: Reducing Alcohol Harm

- 9.1 Brief advice on alcohol: Trained at least 750 front line workers to be skilled in the Identification and Brief Advice on Alcohol.

- 9.2 Improved provision of alcohol support: Re-designed and recommissioned Lewisham's alcohol and drugs providers in response to a review, in order to increase access to alcohol advice and support.

- 9.3 Enforcement: Focussed on enforcing the sensible supply of alcohol, including a review of the licensing policy and the introduction of the Director of Public Health as a 'Responsible Authority'.

Workshop proposal for future activity

- *Work with alcohol support providers and GPs to increase the number of people accessing detoxification and treatment services.*
- *Reduce the illegal sale of alcohol and super strength beer & lager.*
- *Deliver Alcohol Identification Brief Advice (IBA) Training to partnership agencies and front line staff on a Neighbourhood Model, including a network of peer support for those trained.*

10. Priority 5: Preventing the uptake of smoking among children and young people and reducing the numbers of people smoking

- 10.1 Reducing the supply of cheap and illegal tobacco: Lewisham had the biggest seizure of any local authority of illegal tobacco in the UK and has been cited as a model of success regionally.

- 10.2 Brief advice on smoking: Trained at least 1200 front line workers in very brief advice on smoking ie skills and confidence to raise the issue of smoking and refer for support.

- 10.3 Reaching the heavily addicted: Successfully reached and helped the most heavily addicted smokers to quit, including pregnant smokers, smokers with mental health problems and smokers on low incomes.

- 10.4 Tobacco peer education programme: Trained more than 300 pupils aged 12 to 13 years to persuade more than 3000 of their peers not to start smoking.

Workshop proposal for future

- *Continue to focus on motivating and assisting the most heavily addicted smokers to quit, aligning services with neighbourhood care networks.*
- *Promote smoke free environments including homes, cars, hospital grounds and children's playgrounds.*
- *Prevent the uptake of smoking by young people through reducing the availability of cheap/illegal tobacco and peer education.*

11. Priority 6: Improving mental health and wellbeing

Skills for mental health support: Successful delivery 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.

Focussed work with the at risk groups: A large proportion (31% to 33 %) of people referred to IAPT were from BME groups, compared to 46.6% in the population.

Targeted Family Support: Over 400 families have benefited from targeted family support in the year ending March 2015.

Workshop proposal for future activity

- *Work with GP neighbourhood to identify Serious Mental Illness (SMI) populations and improve access to mainstream health screening and health improvement activity.*
- *Develop and deliver tiered training programme on mental health awareness for frontline workers, community workers/volunteers and health and social care professional.*
- *Support children at risk of deteriorating mental health or those exposed to risk factors for mental health.*

12. Priority 7: Improving sexual health

12.1 Increase access to sexual health services in pharmacies: A total of 19 pharmacies offering emergency contraception & chlamydia and gonorrhoea screening.

12.2 Increase access to online STI screening through promotion of the services available: Number of online screening requests in 2014/15 increased on previous year. Plans to extend offer to over 25s.

12.3 Ensuring that Lewisham secondary schools are offered access to Sex and Relationships Education (SRE) lessons from local services: All secondary schools were offered access to free SRE in the 2013/14 school year. 9 schools took up this offer.

12.4 Ensuring that staff in GP practices have the opportunity to be trained in sexual health and HIV: 75% of Lewisham GP practices have now got of Sexual Health in Practice

(SHIP) trained staff. Training is being extended to include basic contraception module for practice nurses and HCAs.

Workshop proposal for future activity

- *Ensure service provider delivers pre-TOP contraceptive counselling and follow-up or onward referral. Develop and implement a clear pathway post-pregnancy termination in order to increase uptake of Long Acting Reversible Contraceptive (LARC) and reduce the numbers of repeat abortions.*
- *Implement NICE guidance for HIV testing by testing in key departments of Acute Trusts. Develop targeted HIV community testing settings whilst raising awareness of the value of testing and early detection in these communities.*
- *Develop and implement a clear pathway for onward referral of women presenting for Emergency contraception to either GP or S&RH Clinics for LARC.*

13. Priority 8: Delaying and reducing the need for long term care and support.

- 13.1 Admissions avoidance and enablement: The Adult Integrated Care Programme Board (AICPB) has reviewed a service map of intermediate care, rehabilitation, admissions avoidance and enablement.
- 13.2 Providing Integrated Care and Support :Co-location of key healthcare staff in each of the four neighbourhoods is being progressed. Estates issues being resolved in order to enable the co-location of key staff.

Future activity

To be decided by the Adult Care Integration Programme Board.

14. Priority 9: Reducing the number of emergency admissions for people with long term conditions

- 14.1 Implementing the key principles for treatment and care for all people with long term conditions: The CCG has supported GP practices to deliver the National Unplanned Admissions Enhanced Services (ES) and 40 of the 41 GP practices have used the Risk Stratification Tool to identify patients who are at most risk.
- 14.2 Encouraging GPs to identify undiagnosed Chronic Obstructive Pulmonary Disease (COPD), Diabetes and Cardiovascular Disease (CVD) among their patients: Delivered a structured programme to support practices to increase the numbers of NHS health checks, increased stop smoking and improving immunisations was delivered in 2013/14.
- 14.3 Redesign of all key Long Term Condition pathways: Improving access to structured education programmes - DESMOND (Diabetes Education and Self-Management for On-going and Newly Diagnosed). This has been commissioned by the CCG and is enabling patients to 'self-refer for support.

Future activity

To be decided by the Adult Care Integration Programme Board.

15. Overarching actions for the Health and Wellbeing Board

The workshop proposed that the Health and Wellbeing Board considers taking on the responsibility for overarching areas that would support the delivery of the 9 priorities. The following 3 areas were proposed for the Board consider:

- *Stronger communities – gaps analysis and identifying assets and how public services might better support communities to support themselves.*
- *Cross cutting themes – this could include workforce development and brief intervention training to enable staff to use every contact with individuals to support healthy lifestyles.*
- *Geographical focus – actions that might be targeted at more deprived areas or those places in borough with much poorer health outcomes.*

16. Next steps

- a. Implementation Group to produce a draft Delivery Plan for the next year.
- b. The Health and Wellbeing Board and the Implementation Group will take steps to streamline the current Health and Wellbeing Strategy priorities so that they are more strategic and support a whole system approach.
- c. The Implementation Group will work with the Joint Public Engagement Group (JPEG), to undertake public/community engagement on the development of a streamlined Health and Wellbeing Strategy.

17. Financial Implications

- 17.1 There are no specific financial implications arising from this report; all activities to be delivered within the existing budgets.

18. Legal Implications

- 18.1 There are no specific legal implications arising from this report. Members are reminded that under Section 195 Health and Social Care Act 2012, health and wellbeing boards are under a duty to encourage integrated working between the persons who arrange for health and social care services in the area.

19. Crime and Disorder Implications

- 19.1 There are no specific crime and disorder implications arising from this report.

20. Equality Implications

- 20.1 There are no specific equalities implications arising from this report however addressing health inequalities is a key element of the Lewisham Health and Wellbeing Strategy.

20.2 An Equality Impact Assessment (EIA) was carried out on the Lewisham Health and Wellbeing Strategy

21. Environmental Implications

There are no specific environmental implications arising from this report.

Background Documents

a) Lewisham Health and Wellbeing Strategy

<http://www.lewishamjsna.org.uk/>

b) Adult Integrated Care Programme, Better Care Fund and Draft Joint Commissioning Intentions

<http://councilmeetings.lewisham.gov.uk/documents/s34716/Information%20item%20E%20-%20AICP%20BCF%20and%20Draft%20JC%20intentions.pdf>

c) Reducing Emergency Admissions for people with Long Term Conditions – Lewisham CCG Progress Report.

<http://councilmeetings.lewisham.gov.uk/documents/s32246/05b%20Reducing%20Emergency%20Admissions%20for%20People%20with%20long%20Term%20Conditions%20-%20CCG.pdf>

If you have any difficulty in opening the links above or those within the body of the report, please contact Kalyan DasGupta (kalyan.dasgupta@lewisham.gov.uk; 020 8314 8378), who will assist.

If there are any queries on this report please contact Danny Ruta on 020 8314 8637

Appendix 1: Health and Wellbeing Strategy Delivery Update 2012/13 to 2014/15

Priority Area	Objectives	Activity and actions	Timescale	Indicator	Achievement	Final RAG rating
1. Achieving a healthy weight	Capacity building/training-development of knowledge and skills around nutrition, physical activity and healthy weight to deliver effective brief interventions	To deliver training for midwives on maternal obesity and introducing solids for health visitors	annual	Number of staff attending training	Training for both courses now mandatory for staff. Since 2013 over 100 midwives attended annual training sessions on maternal obesity. Five training sessions on introducing solids have been delivered to 56 health visiting staff	Green
		To deliver training to frontline staff on weight and nutrition guidelines	annual	Number of staff attending training	A range of bespoke training sessions available to staff, topics included obesity, raising the issue, nutritional guidelines and weight management. 250 staff attended training during the period. A primary care protected learning event on obesity was attended by representatives from over 24 GP practices in December 2013. 30 staff also attended a workshop on obesity as part of a behaviour change event and workshop on obesity in December 2014.	Green
		To deliver Let's Get Moving (LGM) Physical Activity Care Pathway training to primary care staff and the wider community	annual	Number of staff attending training	20 GP Surgeries and 120 primary care staff received the LGM Physical Activity Care Pathway training which included physical activity brief advice training and capacity building. Wider Community training and events included:	Green

					<p>NHS Health Check event ;</p> <p>Lewisham Physical Activity Network event – 40+ attendance;</p> <p>Obesity GP Event - 40+ attendance;</p> <p>North Lewisham steering group – 20+ attendance;</p> <p>Community Health Improvement Service 20 + attendance;</p> <p>Lewisham Volunteer Walk Leaders team 15+ attendance;</p> <p>Total 305 received the LGM Training</p> <p>In addition Let's Get Moving/Brief Advice was delivered at the GP PLT (Protected Learning Time) which was attended by 60+ GP's. Two tailor made workshops were delivered to update GP's on key physical activity documents, guidance and training on Brief advice. In total 28 GP's attended the two workshops.</p> <p>February 2015 LGM and brief advice training delivered as part of the NHS Health Check programme to Pharmacy, primary care staff and community. In total 11 participants attended the training session.</p>	
		To deliver Fitness for Life training programme to primary school teachers	annual	Number of teachers attending training	<p>A total of 12 schools ran the programme in 2014 and 50 classes across these schools participated in programme. This averaged 27 children per class, giving an approximate total of 1,350 children.</p> <p>Fitness for Life in primary schools programme continues in the 4 or the original schools as part of the</p>	Green

					curriculum. The programme will be offered to primary schools who wish to use the school premium to pay for the programme.	
	Breastfeeding support services-providing easier access to breastfeeding and infant feeding support	To improve staff skills on infant feeding by delivering training and audit staff skills	Feb 2014	Achieve UNICEF stage 2	<p>The UNICEF Baby Friendly community stage two award was achieved in February 2014. Maternity services achieved the UNICEF baby friendly stage 2 award in August 2014. The community and hospital are now working towards the stage 3 award due in the October 2015. Children's centres have also registered their intention to work towards accreditation.</p> <p>As part of the initiative over 100 Health Visitors and Midwives attended 2 day breastfeeding management training during this period. Also more than 75 of the Health visiting team and children centre staff attended Baby Friendly awareness training in August 2014.</p>	Green
		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	<p>Nine breastfeeding support groups are currently available in Lewisham. Seven of these operate as weekly breastfeeding 'Baby café local' drop-ins in Lewisham supporting nearly 800 new mothers and over 2000 attendances during January to December 2014.</p> <p>Two cohorts of breastfeeding peer support training has been delivered each year. This successful breastfeeding peer support programme has resulted in 30-38</p>	Green

					active volunteer peer supporters helping to support mothers within the breastfeeding groups and on the postnatal ward in Lewisham during this period.	
		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	Peer supporters have been trained to help undertake audits mothers experience of support on feeding their baby which started in February 2015 as part of the preparation for the stage 23 assessment process	Green
	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	The local target to engage early years settings in adopting the voluntary food and drink guidelines for early years settings has proved challenging. Settings express interest but fail to commit to attend training, alternative ways of engagement are being explored. 47 settings attended training during the period.	Green
Priority Area	Objectives	Activity and actions	Timescale	Indicator	Achievement	Final RAG rating
		To work with school caterers to improve the uptake of school meals	March 2014	Increase uptake of free and paid school meals	Joint promotional events (Public Health and Chartwells) held to increase uptake of school meals included activities in libraries during family learning festival. In 2014 an annual Meet the Grower event held where 180 school children were provided the opportunity to meet and interact with the farmers who	Amber

					<p>grow their food (food to fork).</p> <p>The take up of school meals in 2014 remained constant over the year. In July 2014 the take up of school meals was 54.1% in primary schools and 27.9% in secondary schools.</p> <p>In September 2014 every child in reception, year 1 and year 2 (Key stage 1) in state-funded schools became entitled to free school meals.</p> <p>A section on school meals was included in the 'Well!' magazine (The Lewisham Annual Public Health Report) to encourage take-up of the offer.</p>	
		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	The HCC scheme was successfully implemented with 16 businesses in 2012/13 but no further progress was made in 2013/14. The Environmental Health team plan to implement the Healthier Catering Commitments in fast food outlets in Lewisham with the aim to recruit up to 40 business in 2015.	Red
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	<p>The Development Management Local Plan (2014) includes a DM policy (18) on hot food take-ways. This includes a restrictive policy based on an exclusion zone (400m) around schools and maximum percentages outside exclusion zones.</p> <p>Since the policy has been adopted, 5 planning applications for take away</p>	Green

					use have been refused, 3 have appealed with one allowed and a further 2 awaiting decision. The policy has also been used in discussion with applicants resulting in a number of withdrawn applications.	
		To support development of community gardens and community food growing initiatives	March 2015	Increase number of community gardens and food projects	Existing community gardens have been supported through the provision of small grants funding of activities as part of e.g. the participatory budgeting process in Bellingham	Amber
		To ensure health perspective incorporated into large scale Housing developments	March 2016	Increased active travel	This will be considered for 2015/16	N/A
	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 physical activity. Increased number of chane4life clubs.	Sports based healthy lifestyle programmes are available to primary schools, examples include 32 schools participated in the Hoops4health programme, an accredited healthy lifestyle programme based on basketball in 2013-15. Schools have been encouraged to register with the new Healthy Schools London programme, 30 schools are currently registered for this award. One school has achieved the bronze award and a further two schools have submitted evidence for the bronze award and are awaiting the outcome.	Amber
		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	Schools will be offered the Fitness for life programme as part of the school premium.	Amber
		To support children and	March 2015	Number of	Quarter 1 & 2 of 2015 the number of adult beginner and improver cycle	Green

		adults to participate in physical activity through subsidised courses		children and adults who access swimming, cycling	lessons delivered was 129. The borough bike loan scheme for Q 1&2 was taken up by 300 people. Year 6 school children completed Bikeability Level 1 /2 and 1932 school children completed the training . Year 6 school children completed a Road Safety and physical activity training course 1877 children. Free swimming in Q1&2 was attended by 1776 adults and Under 16's swimming figure was 6835.	
		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	<p>In Quarters 1 and 2 of 2015 the number of people attending regular walks was 1432 and 80% of new walkers were recorded.</p> <p>Number of referrals to Exercise on Referral was 1346 and the number who attended their initial assessment was 338.</p> <p>The NHS Health Check programme; 749 (24%) of patients were recorded as inactive. And 1167 (38%) of health check patients recorded as Active from a total of 3090 health checks.</p> <p>The Health Check Get moving exercise programme had 254 health check referrals attending at least one 10 week exercise programme.</p>	Green
Priority Area	Objectives	Activity and actions	Timescale	Indicator	Achievement	Final RAG rating
	Nutrition initiatives- working with communities to	To implement universal free vitamin D scheme to pregnant women, one year	March 2014	Uptake increases to 25% of all	'FreeD' scheme launched in November 2013, free vitamins available from over 60 distribution sites in Lewisham including 45	Green

improve healthy eating and cooking skills of residents	post natal and children under 4 years		those eligible (from baseline of 10%)	community pharmacies, health centres and most children centres. Since the launch over 11,500 bottles of women's tablets and nearly 20,500 bottles of children's drops have been issued. The scheme is reaching 20-30% of eligible women and 50% of infants under 1 year. About 18% of those registered on the scheme are beneficiaries of the Healthy Start scheme.	
	To roll out healthy eating on a budget cooking courses	March 2014	Number of participants report improved healthy eating	Cookery courses commissioned and delivery started in December 2013. A total of 12 courses run annually in a variety of community venues, including libraries, with approximately 100 participants per year. The courses are popular with males (44%) and females (56%). Some participants have registered interest in attending accredited healthy eating courses.	Green
	To support community projects in development of cookery/healthy eating	March 2014	Number of participants (DNP, 170 project, participatory budgeting)	A variety of groups have been supported during the period by Downham Nutrition Partnership and North Lewisham Plan. These include nursery schools, community groups, food co-op, community café and cook and eat sessions. Participants that graduated from the OCN healthy eating and running a cookery workshop attended a facilitation skills workshop and community groups attended a healthy eating workshop. The Open College Network (OCN) accredited healthy eating and running	Green

					a cookery workshop training offered as part of Public Health promotion training resulted in 75 local people completing the course. Several of these now delivering or volunteering in community cookery programmes in the borough.	
		To monitor access to food banks in Lewisham	annual	Number of participants accessing food banks	As of September 2014 6 food banks are now operational in Lewisham. Processes are being implemented to monitor quarterly access. Using data from October to May 2013 as baseline when 1,000 people accessed food banks Access to food banks will be one of the areas covered in a forthcoming food summit in June/July 2015	Amber
		To work with partners to ensure evidence-based nutrition guidelines are adopted and disseminated	March 2015	Number of organisations signed up to nutrition guidelines	This is to be considered for 2015/16 onwards	Red
	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	A total of 52 Health Checks and Wellbeing assessments were undertaken for local authority staff at Laurence House in over 5 weeks in January and February. A number of other staff opted for general information on health, including on healthy eating. Staff who the health check team saw and spoke to were very pleased with the service. A total of 31 staff members signed up for some form of follow up lifestyle support programme	Amber

					<p>including healthy walks, Get Moving physical activity programmes and Health Trainer one-to-one lifestyle change programme.</p> <p>Work with partner agencies is yet to be progressed.</p> <p>Achieved endorsement for the Council to go for the London Healthy Workplace Charter accreditation as the first step to the Council leading partners by example and is to be progressed 2015/16 onwards..</p>	
		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	<p>The 5 week Health Checks and Wellbeing assessments delivered to Council staff included information on healthy eating. Feedback from staff indicated they were very pleased with the event.</p> <p>Work with partner agencies is yet to be progressed as above.</p>	Amber
Priority Area	Objectives	Activity and actions	Timescale	Indicator	Achievement and	Final RAG rating
		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	This has not been progressed due to capacity but will form part of the Healthy workplace accreditation agreed in principle for 2015/16 onwards	Amber/Red
		To develop and implement Nutrition guidelines, which demonstrate the Council's and its partners	March 2015	Copy of the Nutrition guidelines monitoring	As above	Amber/Red

		commitment to healthy eating and provide an outline of what is expected from catering providers.		report on food supplied		
Obesity surveillance – monitoring levels and trends of overweight and obesity in the population ¹		To increase the participation in National Child Measurement Programme (NCMP)	annual	Over 90% of eligible children measured	Participation rate for 2012/13 of 92% which exceeded national target of 85% and was similar to the national average. NCMP results for 2013/14 published on the 3rd Dec 2014. Local participation rates - Reception: 95.5% (3,487 children measured) Year 6: 93.1% (2,672 children measured). This is similar to the national participation rates and exceeds the national target of 85%.	Green
		To produce annual data set on BMI in pregnancy at booking appointment	annual	Determine prevalence of maternal obesity	Data for 2012 show that 51% of women are overweight or obese at their booking appointment Data for 2013 indicate that 43.1% of women were overweight or obese at their booking appointment. Data for the first two quarters of 2014/15 show that 41.6% of women were overweight or obese at their booking appointment at Lewisham Hospital. Currently analysing the data on ethnic background of women to see if this is a reason for the decrease in the proportions overweight or obese	Green
		To record and monitor overweight and obesity in adults aged 40-74 as part of	annual	Determine prevalence of excess	Data monitored on a quarterly basis. NHS Health Check data (Oct 2012-Oct 2013) show that over 58% of	Green

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, Physical Activity Plan, Food Strategy and Workplace Health

		the NHS Health Check programme		weight in adults aged 40-74 years	adults are identified to be overweight or obese. The data for 2013/14 show that 58.3% of adults screened as part of the NHS Health Checks were identified as overweight or obese. The data for Q1 2014/15 show a similar figure of 57.3%.	
Weight management programmes - targeting those adults and children already identified as overweight or obese		To follow up proactively all children identified as very overweight in the NCMP by school nurses	annual	Number advised and attending appointments	Healthy weight school nurse team telephoned families of all children identified as very overweight as part of 2012/13 programme (over 400 contacts). In 2013/14 they contacted families of nearly 600 children to offer advice and support and option of referral to family weight management programmes. The majority of children have been measured as part of the 2014/15 programme. The school nursing service are in the process of sending feedback letters to parents.	Green
		To develop targeted weight management programmes in community settings	March 2015	Increased number of referrals and positive outcomes	A range of targeted weight management programmes are available in community settings as part of the children and adult weight management pathways. Families with children who are overweight can self refer or be referred to Mini-Boost, New Mum New You and Mend programmes. (217 families were recruited to the programmes in 2013/14). Adults with a BMI above 28 can be referred to free community group programmes (Shape-Up and Weight	Green

					Watchers). In 2013- 14 there were over 1800 referrals to these services)	
		To develop borough wide specialist community weight management services for children and adults	March 2015	Increased number of referrals and positive outcomes	Specialist weight management services are available to adults and children as part of the weight management care pathways. Families with children who are very overweight or have complex needs can be referred to a specialist weight management service (Active Boost). This offers either a group or one to one sessions delivered in community venues for children. (188 families accessed the service in 2013/14). Adults with a BMI over 40 can be referred to a specialist obesity dietetic service, hosted in GP practices in each Neighbourhood. (263 adults accessed service in 2013/14)	Green
Priority Area	Objectives	Activity and actions	Timescale	Indicator	Achievement	Final RAG rating
	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	Lifestyle Hub has been operational since July 2013. Referrals being received from GP surgeries, Pharmacies and community teams. Referrals to weight management and physical activity programmes increased between April 2013 to March 2014. A total of 1642 clients were referred to the new lifestyle hub during that period. Clients engaged in a variety of physical activity programmes and weight management. In 2014/15 in the first 3 quarters, a total of 2,807 people were referred to the lifestyle hub a and of these, 795	Green

					were for physical activity and 607 were for weight management.	
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	CCG and Public Health have completed a review of cancer in Feb2014. Reducing variation in early detection has been incorporated into the work of the CCG Primary Care Development Strategy Board. Incorporated awareness raising in the service specification of the Community Health Improvement Service (Lewisham & Greenwich Trust) Public Health England's National Be Clear on Cancer Campaigns that have focussed on Bowel Cancer, Bladder and Kidney Cancer, Lung Cancer, Ovarian Cancer and Breast cancer in older have been promoted to Primary care and communities	Green
		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	Lack of capacity impacted on the developing work with communities on creating a collaborative cancer prevention programme. Nevertheless, the Community Health Improvement Service has worked with the North Lewisham Health Improvement Programme to raise awareness of cancer in New Cross Gate Ward and Evelyn Ward, as well as Bellingham Ward and other parts of the borough	Amber

				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	As above	Amber
	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 Lewisham	March 2014	Two training courses developed	<p>Bowel Cancer Screening was included in the Public Health run Health Improvement Training Brochure Nov 2013- April 2014, but the course was cancelled as there was low uptake</p> <p>Subsequently in 2014/15 The Specialist Health Promotion Officer post for Bowel Screening (based at L&GHT) that delivers this training fell vacant. This impacted on the delivery of the training, but Bowel Cancer UK was used as a alternative and the following three training courses were delivered:</p> <p>On the 23rd February 2015, Bowel Cancer UK delivered a Bowel Cancer Awareness session to 24 pharmacists</p> <p>On 24th March 2015 half-day training session of Bowel Cancer was delivered to community and voluntary sector agencies. 10 Participants attended the course.</p>	Green

					On 10th March Bowel Cancer UK delivered an awareness session to 13 members of the Health Improvement Team and their volunteers.	
		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	The post of health promotion specialist for the South East London boroughs to promote the Bowel Cancer Screening fell vacant but Bowel Cancer UK was used as described above to deliver training to: 24 pharmacists 10 people from the community and voluntary sector agencies. 10 Participants attended the course. 13 staff and volunteers from the Community Health Improvement Service team.	Green
		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	As above	Green
		Work with NHS England to promote uptake of cancer screening for cervical, bowel and breast cancer	Oct 2015	Improved uptake of cancer screening in	Be Clear on Cancer Campaigns: Public Health England's National Be Clear on Cancer Campaigns that have focussed on Bowel Cancer, Bladder	Green

				Lewisham	and Kidney Cancer, Lung Cancer, Ovarian Cancer and Breast cancer in older have been promoted to Primary care and communities and this will continue in 205/16.	
	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	This has not been progressed due to capacity.	Red
		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, screening uptake and improved survivorship.	2013-15	Successful application Work programmes developed with appropriate activity indicators and incorporated into the work of the Lead Cancer GP	Application to Macmillan has been successful and process of recruiting a lead GP has been recruited	Amber
Priority Area	Objective	Activity and Action	Timescale	Indicator	Achievement	Final RAG rating
3. Improving immunisation uptake	Further development and implementation of care pathways –	To ensure Health Visitor (HV) pathway, similar to that in MMR pathway, becomes an integral part of	April 2014	Pathway agreed and reports on implementation	The development of a HV pathway in order to increase uptake of the pre-school booster (PSB) and MMR 2 was not possible, and attention has been	Green

active management of individual children to ensure that they are immunised is key to success	the preschool booster pathway		ion submitted to Immunisation Strategy Group	re-focussed instead on the development of a Children's Centre Pathway to achieve the same end. A new pathway was launched in July 2014 with the aim of improving uptake of preschool booster and MMR2. This involves using information provided by parents themselves to identify families that might require support to have their children immunised. Such support will be provided by Children's Centres. The impact of this pathway is now being reviewed.	
	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.	A pathway for the immunisation of school aged children was agreed in September 2014, and is in operation. Meetings with Head Teachers of secondary schools have been held to ensure that they are all fully engaged with the new pathway and with efforts to improved uptake of the three vaccines delivered in Secondary schools.	Green
	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	This work has not been undertaken because of other actions became more of a priority. Uptake of vaccines at the age of one has, however, improved, and is now just one percentage point short of the target.	Red
	Support for GPs in aiming for best practice, in	To agree and deliver a training programme for GP facilitators so they can	Sept 2013	Training Programme Delivery.	Training Programme was delivered to GP Facilitators in January 2014.

	implementing care pathways fully and to ensure good flow of data. Support to include feedback of information to practices.	support practices in maximising the uptake of vaccines				
		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	Monthly GP dashboards are being disseminated.	Green
		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.	In 2013/14 training for Practice Nurses was delivered within two weeks of the introduction of changes. Information was provided to all GPs on changes. NHS England are now in charge of development of PGDs	Green
Priority Area	Objectives	Activity and actions	Timescale	Indicator	Achievement	Final RAG rating
		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	Annual Action Plan were agreed for 2013/14 and for 2014/15. A significant development in the latest plan has been the commissioning by the CCG of a new programme to ensure that pregnant women are immunised against influenza and pertussis by midwives. In the 2014/2015 Flu season, Lewisham saw its best performance yet and its greatest levels of improvement on uptake of flu vaccine. At the end January, uptake showed improvements in all the main groups	Green

					targeted. This means that Lewisham was the most improved borough in London and safely in the top ten performers in the Capital. The greatest area of improvement was uptake in pregnant women; Lewisham ranked fourth in London and achieved an increase of 11% over last year's performance. The service provided by maternity services at Lewisham Hospital clearly had an important impact.	
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	Schools arrangements were not reviewed because of the move of the commissioning of immunisation in schools to NHS England. Lewisham will, however, now be co-commissioning this service, allowing for better review of the service. Services for others who require BCG have been agreed with the Three Borough TB service.	Amber	
	To ensure incorporation of collection of information on immunization status into school entry procedures	Sept 2015	%Return of Health Checklists	This work has been completed and will be repeated in future school years.	Green	
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	Survey completed and report written. the Immunisation Working Group plan is using the findings to develop the 2015/16 Immunisation Action Group Work Plan	Green	
	Annual work plans to include measures to minimise barriers	Annual	Uptake of vaccine	Annual work plan for 2015/2016 includes such measures. Further work in development.	Green	

4. Reducing Alcohol Harm	Strengthening population based approaches to prevention through effective enforcement of regulations relating to alcohol supply	Strengthen and Review LBL licensing policy	March 2014	New policy agreed	Licensing policy is currently out to consultation until May 2015.	Amber
		To ensure Licensing Law and Regulations are used whenever possible	ongoing	Evidence of license reviews and refusal	Enforcement undertaken on an ongoing basis and a number of licenses have been reviewed. 18 license applications have been received and logged onto the new system. Two representations from public health have been made and one license has been logged as suspended by the police. All license applications are logged.	Green
		To develop a system for the Director of PH to consider and respond to Licensing applications	March 2013	Clear process established and being used	A clear and robust system has been established within the PH team to enable the Director of Public Health to exercise his role as a 'Responsible Authority' and respond to licensing applications and reviews using the Safe stats screening tools. This system is now being used..	Green
Priority Area	Objective	Activity and Action	Timescale	Indicator	Achievement	Final RAG rating
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	There were 132 visits which identified 13 under age sales. In addition there were 42 multi-agency visits to various premises which found 17 bottles & 500 litres of counterfeit wine, and 17 bottles and 103 litres of counterfeit spirits.	Green
	Improving referral pathways and expand interventions to support those	To review and improve locally defined referral routes and care pathways for alcohol (to include referral procedures), including	March 2014	No. of people accessing and	Plans are underway to review locally defined referral routes and care pathways for alcohol (to include referral procedures) in 2015 to	Amber

	most at risk	specific groups such as vulnerable adults, young people and those 40-74 having health checks)		<p>completing treatment services will increase.</p> <p>Implementation of Lewisham hospital Alcohol CQUIN</p> <p>No. of people aged 40-74 accessing and completing treatment services will increase.</p> <p>No. of young people exiting treatment in a planned way being maintained at 90% or better each year up to 2016</p> <p>Number of people aged 40-74 accessing and completing</p>	<p>ensure that these are embedded within partnership agencies</p> <p>There will also be opportunities provided feedback on pathways.</p>	
--	--------------	---	--	--	--	--

				<p>treatment services will increase.</p> <p>The number of young people exiting treatment in a planned way being maintained at 90% or better each year up to 2016</p>		
		To monitor, review and develop the capacity of the alcohol treatment system for Lewisham	Oct 2014	Review implemented	Some treatment services have been re-commissioned, including primary care from a combination of GPs and Blenheim CDP to start April 2015. CRI will continue to provide services to those with complex needs.	Green
		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.	As above – treatment services have been re-commissioned which are likely to contribute to decrease in alcohol related admissions	Amber
	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	IBA high quality training has been delivered to more than 750 front line workers from a range of agencies in Lewisham, including GPs, pharmacies, Lewisham and Greenwich Healthcare Trust, Job Centre Plus, housing providers, voluntary and community sector, and the criminal justice system	Green

				interventions.	<p>Another four Alcohol IBA Training sessions were delivered to hospital staff as part of the Alcohol CQUIN and 40 Staff attended the training.</p> <p>In February and March two Alcohol IBA Training sessions delivered to health professionals on the NHS Health Check training programme in total 23 participants received the training.</p>	
		To deliver alcohol IBA training sessions for the GP Protected Learning Time Event.	Aug 2013	50% practices have trained staff in IBA	<p>In 2013 a total of 49 GPs attended a training event as part of Protected Learning Time.</p> <p>In 2014, Alcohol IBA training update was provided at the GP PLT (GP's protected learning time) which was attended by over 60 GP's. Two Alcohol IBA workshops were provided during the event with over 35 GP's attending the tailor made workshops to update their skills and knowledge.</p>	Green
		To undertake an evaluation of alcohol IBA Training to be undertaken and produce recommendations for the future.	Oct 2013	Evaluation report	<p>The evaluation was completed on the Alcohol IBA training delivered between April – Sept 2014. The evaluation showed that most participants found the training useful and that it improved their confidence to use brief intervention with their clients/patients. The 2014/15 evaluation to be completed mid to the end of April 2015</p>	Green
	Co-ordination and enforcement of existing powers against alcohol-related crime,	Responsible Retailers Agreements to be signed with off licences in drinking hotspots to remind them of their licensing responsibilities and identify	March 2014 & ongoing	No. of agreements No of problem premises	<p>31 retail outlets in Deptford and New Cross agreed not to supply super strength alcohol.</p> <p>Responsible Retailers Agreements have been signed with retail outlets in</p>	Green

	disorder and anti-social behaviour	problem premises.			Catford. Two multi agency enforcement visits have also been undertaken in the area with two written warnings being issued to two problematic off licences	
		To review the needs of street drinkers/street communities/Rough Sleepers	March 2015		There has been an ongoing targeted outreach work and the most prolific street drinkers are being identified for support. A rough sleepers count has also been undertaken.	Amber
		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 Treatment Requirements with alcohol care pathway	ongoing		Alcohol Treatment Requirements work continues to be delivered by CRI Lewisham IOM Service, with an increase in successful completions. All procedures remain and will continue to be regularly reviewed in partnership with Probation	Green
	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	LBL has reviewed its alcohol policy and Public Health commented on this. Work with other partners is yet to be progressed and will form part of Public Health work plan for promoting the uptake of the London Healthy Workplace Charter accreditation by the Council and its partner organisations in 2015/16 and beyond.	Amber
	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	Key campaigns delivered in Nov - Alcohol Awareness week, Dec - Lewisham Town Centre Drink Drive/Cycling Campaign & Seasonal Alcohol Awareness Outreach event messages and Dry January has been promoted via the Council website and	Green

				of drinking alcohol	Lewisham Life magazine.	
		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	More than 4000 Children and young people have been reached via awareness sessions delivered by the LBL Drugs and Alcohol Action Team since April 2013	Green
		To develop partnerships between community groups, including those in Bellingham Well London & North Lewisham and alcohol treatment agencies.	March 2014	Numbers of residents reached	<p>Delivered two presentations to the North Lewisham Stakeholder Group on alcohol treatment services.</p> <p>Two meetings were held with Bellingham community co-ordinator to discuss Alcohol training/briefing session for Well London Volunteers.</p> <p>Two Alcohol IBA training sessions been delivered to Bellingham Well London and North Lewisham community groups. Over 35 people attended the training which included IBA skills as well as knowledge of local services .</p> <p>Updates on alcohol services and campaigns have been provided to the North Lewisham groups via Stakeholder Group. New groups who received funding through the North</p>	Green

					<p>Lewisham Participatory Budgeting are all expected to attend Alcohol IBA training as part of their funding condition.</p> <p>Health Trainers continue to signpost clients to the Alcohol services. In 2013/14 the number signposted into alcohol pathway following screening was 57, and in 2014/15 for the first 3 quarters was 99.</p>	
		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	Mobile phone APP development was completed in Quarter 4 of 2013/14 and tested in Quarter 1 of 2014/15.	Green
	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	There was initially some difficulty in obtaining data from L> since the Routine data now being sent through regularly from A & E. Report to be produced shortly to inform targeted interventions.	Green
		To collate and analyse UHL A&E and Police Data on quarterly basis, to Map Alcohol Related Issues	2015	Quarterly reports	This has not been progressed due to lack of capacity but is planned for 2015/16	Red
		To identify key hotspots and produce action plan for response	2015	Action plans	Data has been used to inform DPH response to licensing applications. No clear hotspots for targeted action have emerged to date.	Green
Priority Area	Objective	Activity and Action	Timescale	Indicator	Achievement	Final RAG rating

5. Preventing the uptake of smoking among children and young people and reducing the numbers of people smoking ²	Vision for tackling tobacco use is understood and shared across the Health and Well Being Board partners	To develop a clearly articulated and shared vision.	March 2014	All partners report demonstrate an shared understanding of the vision	Paper to Health and Wellbeing Board Sep13 & approach endorsed Mayor & Cabinet signed Local Declaration on Tobacco Control Dec 2013	Green
		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	Health and Wellbeing Board Sep 2013 & approach endorsed. Smokefree Future Delivery group – good representation on this from across agencies	Green
		To disseminate evidence to inform and engage strategic groups	ongoing	Dissemination by each partner	Paper to Health and Wellbeing Board Sep 2013 & approach endorsed. Regular programme provided by Stop Smoking Service (SSS)	Green
	Motivate and assist smokers to quit	To promote and deliver <i>Very Brief Advice</i> training as widely as possible. (including all health visitors & all school nurses) and primary care	Annual and ongoing	Frontline staff trained from a range of agencies including all member agencies of Smokefree Future Delivery Group	Regular training programme provided by Stop Smoking Service . At least 1200 front line trained in brief advice including SLAM, mental health staff, GP practices, LGT, Maternity Staff, voluntary community sector, housing providers, & children's centres School nurses attended next level, Level 2 training to become stop smoking advisors	Green

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.

				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	In CCG strategy and Commissioning intentions Trained A+E paediatrics, outpatients and doctors. New pathway established whereby all parent smokers of children with asthma referred to SSS automatically. Level 1 training offered to ward nurses.	Green
		To ensure that service spec and action plan of SSS incorporates recommendations from health equity audit 2013.	annual	50 quits x pregnancy 40 quits x acute patients 20 quits x mental health 5% increase in routine and manual quitters	Recommendations reflected in 2014/15 and 2015/16 Service Specifications for SSS.	Green

				<p>10% increase in quitters aged 30-35</p> <p>10% increase in women quitters over 60</p> <p>5% increase in Black African quitters</p>		
		To contact people who have received service and to re-engage them in service if they have relapsed.	ongoing	All service contacts called at 52 weeks to establish status	<p>SSS following up people who have relapsed.</p> <p>All lost to follow ups are called.</p> <p>Monthly messages to clients to invite them into group session.</p>	
		To develop communications plan for Stop Smoking service .	Ongoing	Systematic and planned response to national and local campaigns	<p>Stoptober campaign supported by LBL</p> <p>Integrated smokefree communications plan in place encompassing Stop Smoking Service, Smokefree Homes and Preventing the uptake of smoking among young people</p> <p>Stop Smoking referral form on LBL website and targeted emails sent encouraging smokers to quit for 2015. Also promoted on social media.</p> <p>Web pages updated to reflect additional stop smoking drop-ins.</p> <p>Infographic being prepared for use</p>	Green

					with young people focussing on manipulation by tobacco companies and cost to developing countries	
		To improve referral pathway to stop smoking services	annually		Primary care – electronic referral form created in EMIS. PLT event to promote VBA. SLAM – electronic referrals from ePJS system – opt out referrals for all smokers. L+GT – Level 1 training across departments	
Engage schools and colleges in ‘tobacco free’ agenda and commission education programmes to influence young people not to start smoking.		CYP Forum to promote tobacco free agenda	2013/16	Evidence demonstrated	No update available	Red
		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	As of January 2014, programme completed with year 8 in 3 schools and was positively received and evaluated As of June 2014 the programme was completed in a total of 5 schools. The programme continues to be delivered in schools, to be completed March 2015	Green
		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	LeSoCo Lewisham College 14-16 year olds -completed making films (18 young people) Worked directly with 320 young people, with a total of 43 films in 12 youth clubs/schools. A total 76 films made in the borough in 2013/14	Green

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	At least 394 inspections of premises including 170 with detection dog. At least 40 underage tobacco sales test purchases including e cigarettes/e shisha, with 7 actual sales At least 3 prosecutions & 103 warnings At least 64 seizures including the biggest local authority seizure in UK Intelligence suggesting a sophisticated and locally organised criminal supply chain.	Green
	To appoint dedicated officer to work on tobacco regulation and continue monitoring compliance with legislation.	Sep 2013	Officer Appointed and work plan delivered	Lewisham is a member of the SELTA of Trading Standards and Public Health Professionals who are working together on tobacco control activities. Dedicated officer recruited and started Dec 2013.	Green
	To undertake a Shisha (tobacco) users survey in Lewisham	March 2014	Survey completed	Local survey completed on shisha use – 26% of smokers & 12% of non-smokers. Young people more likely to use shisha. The very high levels of shisha use seen among young cigarette smokers are of concern. Shisha may be acting as a gateway into regular cigarette smoking. poor knowledge of its potential health impacts and legality. Report completed with recommendations disseminated in SE London.	Green
	Communicate tobacco free agenda effectively.	To raise awareness of the risk of cheap illicit tobacco, including the use of social	2013/14	SE London social marketing	Integrated communications Plan in place.

		marketing tools such as Twitter/Facebook		campaign	Several media releases about seizure and prosecutions for illicit tobacco, linked to stop Smoking Services Facebook/Twitter/LBL website utilised re: illegal tobacco information and stop smoking services	
		To promote images of 'Smokefree' and align local comms to national campaign on Smokefree	Ongoing Dec 2013	Range of outlets utilised; min of 1 item in Lewisham Life per annum Website pages completed	Stoptober campaign linked locally with social media, website and press releases. Plans to link local campaign with No Smoking Day in March.	Green
		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	Tobacco Control Officer attends meetings of named organisations and has made valuable community contacts in communities blighted by illegal tobacco. Work is ongoing. In Bellingham – 7 volunteers trained to Level1 by SSS	Green
	Reduce exposure to second hand smoke	To engage animal organisations to promote smokefree homes	March 2014	Increase in number of homes that are smokefree	Work undertaken with Veterinary Surgeries so that they can provide information to raise awareness about second hand smoke with pet owners who visit their surgeries. Smokefree leaflets developed and distributed to all Veterinary Surgeries	Green

					in Lewisham to raise awareness with pet owners who visit their surgeries – well received by vets & their customers	
		To promote smokefree homes and cars systematically with all staff working with pregnant women, children and families and housing staff through publicity & training	March 2014	Increase in number of homes that are smokefree Evidence demonstrated	Training undertaken with some small housing providers. Smokefree home posters produced by local primary school pupils Promoted by Phoenix Housing & libraries	Amber
		To commission training on smokefree homes and prevention of CYP uptake of smoking.	March 2014	20% staff trained in CYP trained each year	Training took place and was attended by 8 people who work with young people	Amber
	Workplace health	To ensure brief advice provided to all staff smokers by all partners	ongoing	Numbers referred to SSS	LBL staff have access to SSS quit line on website and a drop in at Laurence House. Additional quit smoking drop-ins publicised on LBL staff intranet. New SSS clinic at Forest Hill Library. No update on other partners.	Amber/ Green
		To work with organisations to enforce no smoking policy outside entrances and in grounds	On going	No smoker smoking outside buildings of partner agencies	SLAM became smokefree in October 2014. Lewisham site has been reported as the most successful site. L+GT became smokefree in March 2015 at Lewisham and QE hospital sites.	Green

6. Improving mental health and wellbeing	Ensuring those in BME groups and at high risk of anxiety and depression get access to IAPT services	To actively promote IAPT services through GP practices in BME groups	April 2014	Percentage of IAPT referrals from BME groups	As of June 2014, 31% of people referred to IAPT were from BME groups, compared to 46.6% in the population (although a significant proportion of population is under 18 and not eligible for IAPT services). 62% of referrals come from GP. As of Q3 14/15 a similar proportion, though slightly higher (32.8%) was from BME groups, broken down as follows: 5.8% mixed ethnicity, Asian or Asian British 5%, Black or Black British 19.4%, Chinese or other ethnicity group 2.6%	Green
		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)	As of Q4 14/15 the IAPT service has increased group provision for people with LTHC in order to provide a more specialist offer to individuals suffering from LTHC and requiring some psychological therapy support.	Green
		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	When comparing the service with Q1 12/15 the service has managed to increase participation from BME communities. This may be due to the service increasing throughput over the reporting period.	Amber/ Green
	Targeting those individuals and families at high risk of long term mental health problems through	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	CYP IAPT in Lewisham includes delivery of psychological therapies and training for people working with children and young people outside of health settings. It focuses on extending training to staff and service managers in CAMHS, embedding	Green

	early intervention and parenting support delivered in schools and childrens centres			programme s (specifically for families of 3 - 10 year olds, with behaviour and conduct issues)	evidence based practice across services. A report in November 2014 documented that over 50 additional young people have received cognitive behaviour therapy for anxiety and depression with parent/carers benefiting from parenting support, where their child has a behaviour/conduct disorder. Early finding showed that families have welcomed support in these areas.	
		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	Over 400 families have benefited from targeted family support in the year ending March 2015. The three key outcome areas and others were considered for all families, and outcomes set for those relevant to each family. It is estimated, based on returns from the first three quarters of the year that over 90% of outcomes agreed with families were achieved.	Green
Priority Area	Objective	Activity and Action	Timescale	Indicator	Achievement and final RAG rating	
		Lewisham schools to be offered the opportunity to participate in place2be or similar models of	April 2015	Number of schools offering Place2be or	A report to the Children and Young People's Select Committee in November 2014 documented that Place 2B was currently available in	Green

		psychological support to school age children		similar intervention	tens schools, mainly primary, across Lewisham. Between April 2013 and November 2014, P2B had supported in excess of 800 pupils, with 90 children and young people having accessed 1:1 counselling sessions and approximately 500 group sessions had been delivered. In addition to this, over 500 Lewisham based professionals had benefited from P2B well-being training. Consistent improvements in the children accessing their services have been reported by teachers, parents/carers and children. Since this report, an additional six schools were to be recruited to this scheme.	
	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.	No report	Red
	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 participants	In 2013/14, 2 Adult Mental health first aid course were delivered and were attended by a total of 25 participants. In 2014/15, 2 Adult Mental Health First Aid courses were delivered and were attended by a total of 18 participants	Green

				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.	In 2013/14 a total of 5 Youth First Aid Courses were delivered and were attended by a total of 55 participants In 2014/15, 1 Youth Mental Health First Aid course was delivered and was attended by a total of 17 participants.	Green
		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	Covered as part of Youth Mental Health First Aid courses above	Green

Priority Area	Objective	Activity and Action	Timescale	Indicator	Achievement and final RAG rating	
	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	Over performing on quit target for SLAM	Green
		To offer Annual physical health checks to all patients on GP SMI registers		Uptake of physical health checks	As of January 2014, Lewisham practices performed worse than London and England on specific health checks for patients with SMI including BP, Cholesterol, HBA1c and cervical screening. As of June 2014, percentage of service users who had been in SLAM hospital / long term health care for more than one year had a physical health check in the previous 12 months was reported at 100%	Green
7. Improving sexual health	Continue to develop new and innovative ways to deliver sexual health services to the population, including through pharmacies, GP	To increase access to sexual health services in pharmacies including: <ul style="list-style-type: none"> • Emergency contraception • Condom distribution 	April 2015	Number of pharmacies offering sexual health services; number of individual	19 pharmacies offering emergency contraception & chlamydia and gonorrhoea screening. A pharmacy primary care review has been undertaken and the findings will inform a recommissioned pharmacy sexual health service offer from April 2016.	Green

	practices, online as well as clinic settings	<ul style="list-style-type: none"> • Pregnancy testing • Chlamydia and gonorrhoea screening 		visits to pharmacies for these services		
		To increase access to online STI screening through promotion of the services available	October 2014	Number of online screening requests	Number of online screening requests in 2014/15 increased on previous year. Plans to extend offer to over 25s	Green
		To review sexual health clinic provision across Lewisham in partnership with stakeholders	October 2014	Re-specification of Sexual health services in Lewisham	New specification developed for 2015/16. Plan to review whole service in 2016 – with potential to retender with Greenwich Council	Green
Ensure that all young people know how to access and use free condoms, and are equipped with negotiation skills through the SRE programmes to use them to protect themselves.	To develop a Lewisham Sex and Relationships Education (SRE) curriculum and lesson plans with school nursing and sexual health	April 2015	Development of lesson plans which can be used in all schools	Lessons plans developed by sexual health and school nurses, but do not appear to have been used outside of formal sessions commissioned from sexual health.	Amber	
	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	All secondary schools were offered access to free SRE in the 2013/14 school year. 9 schools took up this offer.	Green	
		To continuously improve the quality of SRE provision in Lewisham	October 2014	Feedback from pupils and teachers on content	Schools were previously contacted for feedback but none received.	Red

	To ensure young people are able access sexual health services in a variety of settings in a timely manner	April 2014	Feedback from young people on local services Numbers of young people accessing different types of service provision	Young people's focus groups held as part of the sexual health strategy. Overall a smaller proportion of young people appear to be accessing services, however, this could be due to better uptake of contraceptive methods such as implants which require fewer visits.	Amber
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	75% of Lewisham GP practices have now got SHIP trained staff. Training is being extended to include basic contraception module for practice nurses and HCAs	Green
Continue to expand the opportunities to promote and	To develop and commission pathways for Long Acting Reversible Contraception for primary care	April 2014	Re-commissioned LARC contracts	LARC primary care service specification was reviewed for April 2014 to enable more GPs to participate.	Green

	access LARC			across primary care		
	To improve the experience of women accessing LARC across Lewisham	October 2014	Feedback from women in LARC providers reported annually	Not delivered due to capacity constraints	Red	
	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	Service Specification for pharmacy emergency contraception from April 2014 includes offer of LARC	Amber	
Increase the offer and uptake of HIV testing in primary care (GP practices) as part of routine practice	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	Rapid tests available, but there remain problems with the delivery of tests where no new patient check operates. Practices will be working across neighbourhoods to improve the sexual health offer available and HIV testing may be offered as part of this.	Amber	
	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	SHIP HIV training offered x3 per year across Lambeth, Southwark and Lewisham. Significant variation in testing rates between practices, but not enough data yet to compare years.	Amber/ Green	

<p>8. Delaying and reducing the need for long term care and support</p>	<p>Providing support for people with complex needs to live at home</p>	<p>Admissions avoidance and enablement</p>	<p>Ongoing</p>	<p>Update reports from the ACIP Board</p>	<p>The Adult Care Integration Partnership Board (ACIPB) has reviewed a service map of intermediate care, rehabilitation, admissions avoidance and enablement. Board members also discussed the use and impact of the additional Winter Funding for 2013/14 and 2015/16 and looked at the Business Cases that are being developed on the Virtual Ward (hospital@home model) and the Ambulatory Care Unit. The Board agreed that a workshop should take place as soon as possible to progress this work</p>	<p>Green</p>
	<p>Providing integrated care and support (Transforming care planning and streamlining care pathways)</p>	<p>Establishing the Neighbourhood Community Care Model</p>	<p>Ongoing</p>	<p>Update reports from the ACIP Board</p>	<p>Co-location of key healthcare staff in each of the four neighbourhoods is being progressed. Estates issues yet to be resolved in order to enable the co-location of key staff, in a way that will enhance the growth of these teams in the medium term as care shifts from acute to community settings, and the successful realisation of shared values and co-ordinated working practices.</p>	<p>Amber</p>

Priority Area	Objective	Activity and Action	Timescale	Indicator	Achievement	
9. Reducing the number of emergency admissions for people with long term conditions (This priority is has been superseded and is now being delivered via the Adult Integrated Care Programme and supported by the Better Care Fund).	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	The 3Rs work was completed in 2013/14 and has been superseded by the National Direct Enhanced Scheme (DES) for unplanned admissions. The scheme was launched by NHS England in July 2014 and LCCG supported and developed toolkits, which enabled all Lewisham GPs to sign up to the scheme. NHS England has advised that it is likely that the DES will run again in 2015/16. In addition, locally LCCG has included additional elements to support integrated Neighbourhood Community Teams, Risk Profiling and Care Plans in its 2014/15 scheme, which will also continue into 2015/16.	Green
Priority Area	Objective	Activity and Action	Timescale	Indicator	Achievement	Final RAG rating
	Encouraging GPs to identify undiagnosed COPD, Diabetes	1. To utilise national schemes to support practices (E.g. QP QOF: Quality and	Ongoing	GP Disease Prevalenc	LCCG implemented its local scheme in September 2014, which ran until March 2015. The Lewisham Neighbourhood Primary Care Improvement Scheme	Green

	<p>and CVD (hypertension, atrial fibrillation, arrhythmia, heart failure, CHD) among their patients</p>	<p>Productivity – Quality Outcomes Framework, Direct Enhanced Schemes; Dementia – DES)</p>		<p>e Registers (CMS)</p>	<p>(LNPCIS), had several aims;</p> <ul style="list-style-type: none"> • To increase self-management for people with long term conditions • To have a positive impact on access to primary care services. • To build on the collaborative working within Neighbourhoods in Lewisham • To reduce variation. • To improve the health outcomes for people with Long Term Conditions in Lewisham • To provide a platform for the delivery of population based care <p>LTCs covered include; Diabetes, COPD, Hypertension and Cancer. The scheme has provides some positive outcomes (E.g. 5000 care plans, 574 newly recorded/diagnosed Type 2 diabetes patients, 220 newly diagnosed COPD patients, 309 referrals to Diabetes self-management courses since the scheme commenced) and will be implemented for 2015/16 as BAU.</p>	
		<p>2. To support practices in order to standardise processes and share best practice in identifying the undiagnosed</p>	<p>Ongoing</p>	<p>GP Disease Prevalence Registers (CMS) Patient feedback (Breatheasy, Diabetes Forum and LTC</p>	<p>See above. The scheme has enabled neighbourhoods to work more collaboratively in certain areas. Neighbourhoods are now meeting monthly with representatives from their respective practices to discuss their progress under the improvement scheme.</p>	<p>Green</p>

				Group)		
	Providing support, training and development to primary care in the management of long term conditions.	To continue GP Education and Training Programmes	Ongoing	GP Feedback	LCCG has an annual programme of training events for GPs and is developing via HESL bids programmes for practice nurse. LCCG has appointment a training officer and developed a draft primary care education strategy.	Green
Priority Area	Objective	Activity and Action	Timescale	Indicator	Achievement	Final RAG rating
	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 Patient Feedback	Diabetes pathway work has been complete and a review/refresh of the CCG Diabetes Strategy is underway with the joint (LGT and CCG) clinical reference group.	Green
		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	Review completed and Protected Learning Time event for Primary Care too place in 2014.	Green

				(QIPP) Programme Patient Feedback		
		To undertake a Holistic review CVD pathways from diagnosis to treatment.	2014/15	Quality Innovation Productivity and Prevention (QIPP) Programme Patient Feedback	Review of the pathway was not prioritised in 2014/15 and has been superseded by the National DES.	N/A