

**TRAFFORD COUNCIL  
TRAFFORD CLINICAL COMMISSIONING GROUP**

**Report to:** Health and Wellbeing Board  
**Date:** 1<sup>st</sup> July 2014  
**Report for:** Information  
**Report of:** Linda Harper, Deputy Corporate Director Children, Families and Wellbeing, Director Service Development, Adult and Community Services  
Julie Crossley, Associate Director Commissioning, Trafford Clinical Commissioning Group

**Report Title**

**Trafford Health and wellbeing Strategy Action Plan Update**

**Purpose**

**This report is to update the Health and Wellbeing Board on progress made in relation to the Health and Wellbeing Strategy Action Plan**

**Recommendation(s)**

- **The Board note the progress**
- **The Board to receive an update on the overarching Action Plan in September 2014**
- **The Board to receive exception reports only at future meetings**
- **The Board to receive one detailed report on a priority theme at each Board meeting to enable a challenge session to take place between partner organisations.**

**Contact person for access to background papers and further information:**

**Name:** Linda Harper, Deputy Corporate Director Children, Families and Wellbeing, Director Service Development, Adult and Community Services  
**Extension:** 0161 912 1890

**Name:** Julie Crossley, Associate Director Commissioning  
**Extension:** 0161 912 9618

## **1.0 Context**

- 1.1 Further to the development and endorsement of the Health and Wellbeing Strategy the Health and wellbeing Board initiated the development of an underpinning Action Plan which sought to reflect and capture the eight priorities embedded in the Strategy. The Action Plan was agreed by the Board in April 2014.
- 1.2 The Health and Wellbeing Delivery Programme Board was established to drive forward the Action Plan and a Performance Framework with a supporting reporting schedule developed which were also agreed by the Board in April 2014.
- 1.3 The agreed Action Plan can now be accessed on the Trafford Partnership Website.

## **2.0 Progress Update**

- 2.1 The highlight reports are attached as Appendices to the report, which profiles an update in relation to a range of activity linked to the overarching Action Plan but is not exhaustive. At the time of reporting all highlight reports were reporting a 'green' status.

## **3.0 Recommendations**

- 3.1 The Board to note progress.
- 3.2 The Board to receive an update on the overarching Action Plan in September 2014.
- 3.3 The Board to receive exception reports only at future meetings.
- 3.4 The Board to receive one detailed report on a priority theme at each Board Meeting to enable a challenge session to take place between partner organisations.

**Trafford Health and Wellbeing Action Plan****Highlight Report**

<b>Priority lead</b>	<b>Lisa Davies</b>	<b>Date of Report</b>	<b>17<sup>th</sup> June 2014</b>
<b>Priority 1</b>	<b>Reduce Childhood Obesity</b>	<b>Period Covered</b>	<b>January 2014 – June 2014</b>
<b>RAG Status</b>	<b>Green</b>		

**1. Highlights**

**Details of highlights from the period are shown below:**

- Data for breastfeeding rates in Trafford for 13/14 show the highest figure for many years of 54.37% of babies being breastfed at 6-8 weeks. There have also been marked reductions in inequalities in breastfeeding rates across Trafford with areas which traditionally have had lower rates showing Trafford average rates. This improved performance coincides with the delivery of the peer support breastfeeding worker pilot and the achievement of the UNICEF Baby Friendly Initiative (BFI) level 2. The evidence is that achievement of UNICEF BFI accreditation is linked with improved breastfeeding rates.
- Nearly all reception class children and year 6 children have been weighed and measured through the National Child Measurement Programme with excellent participation rates. Initial indications are that there is a fall in the levels of obesity in Year 6 children for 13/14 but the data has yet to be nationally validated
- A review of all activities relating to childhood obesity has almost been completed. Three of the locality partnerships have chosen child obesity as a priority and links have been strengthened between the Locality Partnerships and Public Health.
- National guidance on evidence based practice issued by NICE will inform the revised child obesity strategy
- A wide range of initiatives continue as part of the action plan – more detail on progress will be given at future meetings
- A programme of work on a series of evidence based child obesity pathways has been completed. These will be incorporated into practice wherever possible within existing resources.
- The LARCO project is coming into its final phase. A number of projects will be funded in the Sale Moor area which is the third area with higher levels of child obesity where LARCO has had a focus. An evaluation report will be available in the summer of 2014.

## 2. Upcoming Key Activities

- Completion of the scoping of child obesity initiatives
- Preparation of the draft child obesity strategy
- On going projects in various organisations

## 3. Key Areas of Concern Risk/Issues

3. Key Areas of Concern Risk/Issues	
Description:	Actions to Mitigate:
Peer support worker breastfeeding project unable to continue due to funding which could lead to a fall in breastfeeding rates	Meeting to be held with local maternity services and children's services to look at alternative ways of supporting peer support

**Trafford Health and Wellbeing Action Plan****Highlight Report**

<b>Priority lead</b>	<b>Jill Colbert</b>	<b>Date of Report</b>	<b>17<sup>th</sup> June 2014</b>
<b>Priority 2</b>	<b>Improve the emotional Health and wellbeing of children and young people</b>	<b>Period Covered</b>	<b>January 2014 – June 2014</b>
<b>RAG Status</b>	<b>Green</b>		

**1. Highlights**

**Details of highlights from the period are shown below:**

- We are now eight months into the implementation of IAPT for children and young people in Trafford. This is transforming our CAMHS (Child and Adolescent Mental Health Service) and delivering earlier access.
- The CAMHS CQUIN has been successfully achieved which has resulted in a range of self-help materials aimed at Trafford families with emotional health issues. This will ensure that children, young people and their families have access to evidence based and locally appropriate materials.

**2. Upcoming Key Activities**

- We have worked with schools to invite them to procure with us on the Early Help Framework. This ensures that, as a partnership, we commission high quality services that provide evidence based interventions. We will build on this work to engage more schools.
- We are holding an Early Help Workshop for CYPS (Children and People's Service) and wider partners to ensure that the processes are in place to make certain that children, young people and families receive the right help at the right time. This will build on the work carried out by the Early Help Coordinators to map current work against NICE guidance and evidence based provision.

<b>3. Key Areas of Concern Risk/Issues</b>	
<b>Description:</b>	<b>Actions to Mitigate:</b>
The key concern is whether we are able to successfully engage with the full range of schools and education settings.	Continued discussions and open dialogue building on an understanding of the needs of schools and their pupils.

**Trafford Health and Wellbeing Action Plan****Highlight Report**

<b>Priority lead</b>	<b>Kylie Thornton</b>	<b>Date of Report</b>	<b>17<sup>th</sup> June 2014</b>
<b>Priority 3</b>	<b>Reduce alcohol and substance misuse and alcohol related harm</b>	<b>Period Covered</b>	<b>January 2014 – June 2014</b>
<b>RAG Status</b>	<b>Green</b>		

**1. Highlights**

**Details of highlights from the period are shown below:**

- Annual Action plan agreed with Alcohol Steering Group.
- Training Day held with GP's across Trafford to raise confidence of GP's when dealing with patients with Alcohol issues.
- GMW (Greater Manchester West) started to delivery Community Alcohol Detoxification Service from 1<sup>st</sup> May.
- New Alcohol Treatment pathways developed and currently being consulted upon with key partners.
- Performance indicators agreed around Alcohol Misuse for 2014-2015.
- Young Persons substance misuse service carried out awareness raising sessions with Safer Communities and GMP to encourage referrals at an early stage.
- All Locally Commissioned GP and Pharmacist services concerning Alcohol have been reviewed with new specifications and contracts being provided to all who are signed up to the scheme
- All Tier Four providers informed that Trafford has joined the Tier Four Framework which has created greater choice for clients when accessing Residential Provision.
- Trafford RAID service fully staffed
- Successful recruitment to Trafford RAID Consultant Psychiatrist post
- 2 alcohol workers funded by TMBC recruited
- Manchester Pilot agreed to enable RAID service to gauge demand from Manchester registered patients and begin to deliver liaison psychiatry services to

this constituency

- Central Manchester Foundation Trust (CMFT) Trafford Site service launched January 2014
- University Hospitals South Manchester (UHSM) service launched 22.04.2013
- UHSM Joint Operational Procedure established between GMW, MMHSCT and UHSM
- Information Sharing Protocol in place
- Single point of contact for all acute staff to RAID service
- Trafford Site – 128 ward referrals and 198 UCC referrals 01.01.2014 – 25.04.2014
- Training in development with full co-operation of CMFT and UHSM lead nurses

#### **RADAR (Rapid Access Detox Acute hospital Referral)**

RADAR is a UK-first service at the Chapman-Barker Unit in Prestwich. The RADAR ward accepts referrals from a number of A&E departments across Greater Manchester and beyond.

If A&E staff regularly see the same people presenting with alcohol related injury or illness and the individual wants to change and improve their health, they can refer the patient directly to RADAR so long as they are otherwise fit to leave hospital.

The patient then stays on the RADAR ward for five to seven days and undergoes a full detox from alcohol.

This will help the patient be in the best position possible to start their recovery journey and break the cycle of frequently attending hospital due to their addiction.

Ultimately it is envisaged that the RADAR service will align or amalgamate with the Trafford RAID service.

RADAR metrics include:

- A reduction in excess bed day payments paid as a result of admissions to acute hospitals due to alcohol misuse
- A reduction in frequent flyers
- A reduction in A&E breaches
- Deflection away from Acute Medical Unit
- A reduction in readmissions
- Overall reduction in length of stay for RADAR patients
- A reduction in admissions via A&E
- An increase in people returning home from hospital



## 2. Upcoming Key Activities

- World Cup campaign initiatives around Alcohol and linking with the Domestic Abuse agenda.
- On-going awareness session with GMP neighbourhoods to encourage and increase referrals.
- Sessions to be held with youth services to ensure appropriate referrals are made at the earliest opportunity.
- Client Pathways to be developed and published across Trafford.
- Partners to use a new screening tool (short questionnaire) in order to identify young persons at risk from alcohol consumption and refer to providers.
- Use of social media to promote awareness of risky behaviour and dangers of alcohol during the summer holiday period.

First performance reports to be produced

- § Reduction in Frequent Flyers
- § Reduction in A&E Breaches
- § Deflections from AMU (patients appropriately discharged from A&E/UCC or diverted directly to the appropriate ward)
- § Reduction in re-admissions
- § Reductions in LOS
- § Reduction in Admissions via A&E
- Development of balanced performance scorecard including PROMS, PREMS, Clinical and Environmental outcome measure

3. Key Areas of Concern Risk/Issues	
Description:	Actions to Mitigate:
Increase in waiting times (per NDTMS reporting)	Working with providers to ensure staffing levels are appropriate and assessment times improved.
Number accessing A&E due to alcohol has increased within Trafford.	Through the development of RAID and the new Alcohol Treatment Pathway those presenting at A&E should be directed into appropriate support.
Performance deficits within UHSM impacting on performance of RAID service	NHS Trafford CCG Head of Unscheduled care liaison with UHSM and RAID senior

through delayed referrals etc

Due to unavailability of SUS data (CSU performance deficit) performance reports have been delayed and remedial actions made more difficult to gauge.

staff to ensure full involvement in discharge planning protocols.

Issue raised at UHSM Urgent Care Board and will be part of the agenda for Trafford's new Urgent care Board.

Trafford RAID staff pro-actively meeting with UHSM operational staff to support effective referral and discharge pathways.

Iss

**Trafford Health and Wellbeing Action Plan****Highlight Report**

<b>Priority lead</b>	<b>Julie Crossley / Linda Harper</b>	<b>Date of Report</b>	<b>17<sup>th</sup> June 2014</b>
<b>Priority 4</b>	<b>Support People with long term health and disability needs to live healthier lives</b>	<b>Period Covered</b>	<b>January 2014 – June 2014</b>
<b>RAG Status</b>	<b>Green</b>		

**1. Highlights**

**Details of highlights from the period are shown below:**

**To commission a Patient Care Co-ordination Centre on which the Hub will be based**

- Trafford CCG commenced in 2013 the process to procure a Patient Care Co-ordination Centre which will act as a hub for integrated care by delivering seamless and co-ordinated care services and ensuring Trafford patients receive the right care at the right time and right place.

To date the CCG has received agreement from the governing body to support the centre and a visioning document has been formally agreed and published as part of the commencement of the procurement process.

**2. Upcoming Key Activities**

**To commission a Patient Care Co-ordination Centre on which the Hub will be based**

- Early 2014 will see the Patient Care Co-ordination Centre procurement enter into competitive dialogue comprising of 14 individual dialogue stages, following the dialogue stages a draft service specification will be created and the successful bidding organisation confirmed. Following the competitive dialogue the CCG will work with the successful organisation to develop the service specification further in order to ensure the core services and deliverables are met which are tracking patient journeys, close monitoring of vulnerable patients and patient transportation.
- The procurement process is on track with timescales which have been presented to CCG governing body and H&W Board

### 3. Key Areas of Concern Risk/Issues

<b>Description:</b>	<b>Actions to Mitigate:</b>
<p>Withdrawal of competitive bidders during the procurement process</p> <p>Centre does not deliver envisaged benefits as articulated in vision</p>	<p>Procurement process is well managed and led by the CCG with the creation of a task and finish group as part of the competitive dialogue process to engage with bidders and provide clarity/ information as and when requested.</p> <p>Full benefits realisation is being undertaken as part of the competitive dialogue process</p> <p>There will be KPIs built into the contract to ensure delivery and performance of the preferred solution</p>

**Trafford Health and Wellbeing Action Plan**

**Highlight Report**

<b>Priority lead</b>	<b>Kay Statham</b>	<b>Date of Report</b>	<b>17<sup>th</sup> June 2014</b>
<b>Priority 5</b>	<b>Increasing Physical Activity</b>	<b>Period Covered</b>	<b>January 2014 – June 2014</b>
<b>RAG Status</b>	<b>Green</b>		

**1. Highlights**

**Details of highlights from the period are shown below:**

- School Leavers project running currently to specifically target 16-18 year olds. Offers free/ discounted sessions over the summer period while students have free time before starting the next step of their education. This is funded through Sportivate. We aim to have accurate data on usage to share with the group in September.
- Learning through adventure programme has run through the primary schools this academic year and the plan is to continue next year.
- Healthy Hips and Hearts – Currently 32 sessions taking place per week. Training is ongoing for volunteers to lead these sessions. We also presented at the Residential Care Service Improvement Partnership and have taken several phone calls since with homes expressing an interest.
- 3-2-1 running route planned and funding secured to place a route in Longford Park.
- Work taking place internally to improve an offer for GP's to refer into.

**2. Upcoming Key Activities**

- Junior Active Trafford is now live and a big push will take place in September when the Schools start back.
- An improved offer for referrals coming from GP's will be presented to partners

**3. Key Areas of Concern Risk/Issues**

<b>Description:</b>	<b>Actions to Mitigate:</b>

**Trafford Health and Wellbeing Action Plan**

**Highlight Report**

<b>Priority lead</b>	<b>Julie Crossley / Lisa Davies</b>	<b>Date of Report</b>	<b>17<sup>th</sup> June 2014</b>
<b>Priority 6</b>	<b>Reduce the number of early deaths from cardiovascular disease and cancer</b>	<b>Period Covered</b>	<b>January 2014 – June 2014</b>
<b>RAG Status</b>	<b>Green</b>		

**1. Highlights**

**Details of highlights from the period are shown below:**

- a) Design and implement a clinical education programme in Primary Care
- b) Develop and deliver primary care cancer strategy across whole population

**a) Design and implement a clinical education programme in Primary Care**

- Education and Training is a key priority for the Trafford CCG and as such a new strategy has been developed. The CCG has a dedicated in house team who are responsible for delivering the education and training programme. The Education and Training programme will deliver an agreed local curriculum which includes training on Cardiovascular Disease (CVD) Risk Assessment, Long Term Conditions and training on the Map of Medicine system which is the local evidence based tool supporting our Primary Care Clinicians. The education and training programme will also be working with McMillan Nursing to ensure general practices receive regular training and refresher training in relation to patient management and care.
- The Trafford CCG continues to work with the Trafford Council in the delivery of the local CVD Health Check Programme by providing dedicated project support and indirect support through data quality checking via the Primary Care team. The health check programme promotes and supports general practices in the early identification and management of patients at risk of CVD.

**b) Develop and deliver Primary Care Cancer Strategy across the whole population**

- The 2 year Operational Plan for NHS Trafford CCG has cervical cytology screening as the local measure for the quality premium. As part of this the CCG will monitor an improvement programme across all practices to ensure an increased number of patients receive cervical cytology screening and reporting. As part of this there will be an enhanced training programme to ensure that the skills and expertise are provided across Trafford within GP practices and access

is increased as appropriate.

## 2. Upcoming Key Activities

### a) Design and implement a clinical education programme in Primary Care

- The Education and Training programmes will continue to deliver regular quarterly events and in-house training to GP Practices which take place on a month by month basis. The Trafford Education and Training Programme will also seek to provide more online access to training and education via the newly developed GP Extranet.
- Trafford CCG and Trafford Council will collaboratively review the general practice performance reports on a quarterly basis for the number of health checks completed by each general practice. This review will also include a review of patient engagement by way of Did Not Attend (DNA's) and failures to respond to written and verbal communications.

### b) Develop and deliver Primary Care Cancer Strategy across the whole population

- Specific action plans with every single Trafford GP practice that are not currently achieving the national target for screening will be in place. This will deliver improvements in quality, reductions in inequality and improved outcomes for patients. This work will also incorporate breast and bowel screening.

## 3. Key Areas of Concern Risk/Issues

Description:	Actions to Mitigate:
Failure to deliver a current, safe, fit for purpose education and training programme to the Primary Care Workforce by 2014.	Dedicated clinical leads will manage and deliver the education and training programme through a series of quarterly events, online training, practice visits and face to face training as part of a competent staff appraisal and development plan.
Failure of primary care staff to take up training offer	Primary Care team working with engaged stakeholder organisations to ensure general practices have specific action plans and support to deliver improvements.
General Practice's not achieving national screening targets due to varying screening rates, this carries a risk not just to the CCG but to all engaged stakeholders.	

**Trafford Health and Wellbeing Action Plan**

**Highlight Report**

<b>Priority lead</b>	<b>Ric Taylor</b>	<b>Date of Report</b>	<b>17<sup>th</sup> June 2014</b>
<b>Priority 7</b>	<b>Support people with enduring mental health needs, including dementia to live healthier lives.</b>	<b>Period Covered</b>	<b>January 2014 – June 2014</b>
<b>RAG Status</b>	<b>Green</b>		

**1. Highlights**

**Details of highlights from the period are shown below:**

To facilitate the development of an integrated service model with shared performance indicators across the health and social care economy, following a partnership review of current spend and activity. NHS Trafford CCG investment agreed to enable progression of community services redesign for period 2014 – 2015.

- The redesign will deliver multidisciplinary care around the clock in patient's own homes, with services skilled in crisis resolution and offering genuine alternatives to inpatient care

NHS Trafford Metrix to include:

- Community Mental Health Teams working 9am – 8pm Monday – Friday and 9am – 5pm Saturday and Sunday
- Home based care available from specialist 7 days a week, 24 hours a day with up to 3 home visits in any 24 hour period
- Top 5 – 10% of GP patients with complex long term conditions cross referenced with mental health services and joint care plans agreed
- 10% reduction in A&E attendances by patients of Trafford's mental health services
- Increased patient satisfaction

Deliver the Improving Access to Psychological Therapies Service Improvement Programme.

- IAPT services deliver psychological therapy services. We will be developing a business case which delivers increased access of eligible patients to talking therapies. The investment is targeted to be in the region of £375 - £500K with implementation to be agreed but towards the end of 2014 / 2015.



- Achievement will necessitate significant joint working between NHS Trafford CCG, Trafford Metropolitan Borough Council, Greater Manchester West Mental Health NHS Foundation Trust and Self Help Services.

IAPT is targeted to deliver:

- A minimum of 15% per annum of those in need will be able to access talking therapies
- 50% of those accessing treatment will recover
- Additional ongoing support to SIGN Health, LGBT and Military Veterans
- The Trafford Dementia Kitemark was launched in June which provides increased assurance in relation to commissioned services who are supporting adults with dementia, and their carers.

## 2. Upcoming Key Activities

- Detailed implementation plans will be produced by GMW for scrutiny and agreement by commissioners – July 2014

Deliver the Improving Access to Psychological Therapies

- Submission of business case to NHS Trafford CG governance process for approval

## 3. Key Areas of Concern Risk/Issues

Description:	Actions to Mitigate:
Delay in implementation of new ways of working and knock on in terms of wider integration work within Trafford	Buy in of all stakeholders and active commissioning engagement  Presentation at H&W Board
Retention of staff (GMW)  Timescales and impact on achieving metrix (see above)	Submission of business case to NHS Trafford CG governance process for approval

**Trafford Health and Wellbeing Action Plan**

**Highlight Report**

<b>Priority lead</b>	<b>Helen Darlington</b>	<b>Date of Report</b>	<b>17<sup>th</sup> July 2014</b>
<b>Priority 8</b>	<b>Reduce the occurrence of common mental health problems amongst adults</b>	<b>Period Covered</b>	<b>Jan 2014- June 2014</b>
<b>RAG Status</b>	<b>Green</b>		

**1. Highlights**

**Details of highlights from the period are shown below:**

- Books on prescription has developed into E-books on prescription.
- Old Trafford BME Mental health counselling through Skype.
- Suicide Risk Reduction Strategy 2014: Draft copy produced.
- Links made to the emotional, health and wellbeing review for young people under the research/data collection section, CAMHS have inputted into the intentions section with a focus on how to reduce the risk of suicide in key high risk groups. Input has been provided by the Clinical Commissioning Group, Pennine Care, NHS Foundation Trust, Greater Manchester West and Trafford Council.
- Response to the call for evidence on suicide prevention and self harm completed. Trafford participated in the Greater Manchester sector-led improvement process for Suicide Prevention.

**2. Upcoming Key Activities**

- Life course decisions illustrated using art work as a front cover for the Suicide Prevention Strategy, BlueSCI service users/artist to coproduce.
- Bespoke training sessions agreed around personal resilience/mental health and wellbeing within the work community, contract agreed, MIND recruiting 100 attendees over 10 sessions, ideally from Social enterprise Groups in Trafford that do not normally have access to such a resource. Will be completed by December 2014.

**3. Key Areas of Concern Risk/Issues**

<b>Description:</b>	<b>Actions to Mitigate:</b>