

# Appendix B

## Somerset Health and Wellbeing Board Scorecard

The Vision for health and wellbeing in Somerset is: 'People Living healthy and independent lives, supported by thriving and connected communities, with timely and easy access to high quality and efficient public services when they need them'

Reporting Period: 2017/18 - Up to 20th November 2017

Statutory Duties and Functions		Health and Wellbeing Board Duties / Requirements		Public Engagement		Workstream 1:		Headlines / Exception Report		
Undertake a Joint Strategic Needs Assessment	Director of Public Health Annual Report 2016/17	↔	G	Annual Health and Wellbeing Conference	↔	G	Action 1 'Ensure that Prevention is effectively addressed in the implementation of the Somerset NHS STP' currently has an Amber RAG status this is because there is currently no evidence available from the STP because of the reset. Action 3 'Support organisations who adopt the charter to develop plans and actions to deliver prevention outcomes' also has an Amber RAG Status - a review of the number of organisations who have a prevention plan in place is currently taking place. Action 4 'Produce further three prevention case studies using the prevention framework to describe the type and level of the intended prevention and its actual outcome' also has an Amber RAG Status - further prevention case studies are to be identified and produced. The measure: 'Evidence of prevention outcomes and plans within the STP' has an Amber RAG status - this is due to the ongoing challenges to obtain evidence of Prevention outcomes being systematically addressed within STP. The measure: 'Number of organisations who have adopted the Prevention Charter who also have a Prevention Plan in place' has an Amber RAG status - a review of the number of organisations who have a prevention plan in place is currently taking place. The measure: 'Minimum of three further prevention case studies produced and disseminated' also has an Amber RAG Status - further case studies to be identified and produced.	Workstream 2: Action 2 'Deliver a new Somerset Strategic Housing Framework to improve housing and related health outcomes for our communities' and associated measure currently have an Amber RAG status - there has been some slippage to the programme due to both complexity of negotiations concerning content of the draft revised Housing Framework, and capacity issues within the project team to District Council Transformation Programmes. Action 4 'To be assured that the Dementia Multi-Agency Strategy is taken forward in Somerset' and associated measures also have Amber RAG statuses - a date for the Dementia Strategy Steering Group is to be agreed, action plan needs coordination and clarity about the number of HWB Board partners who adopted dementia friendly status required. Measure relating to Action 1 'Stronger Communities is an integral element of the new Health and Care System being developed through the STP' has an Amber RAG status because the STP is currently being reset.	Workstream 3: The measure 'Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population' has a Red RAG status. The September 2017 projection shows a potential year end figure of 682.9 per 100,000 compared to the target of 520. Pressures from acute settings has lead to quicker decisions on long term care prior to the 'Home First' D2A model being implemented in Somerset. This should improve these statistics in the future but may still mean a 2017/18 deficit. The Improved Better Care Fund metrics have Amber RAG statuses: Reducing Pressure on the NHS - whilst Q2 has not met the DTOT target, Q3 is indicating that we are moving back on track to local monitoring with our 3 main providers. The effectiveness of community health services has reduced our impact during quarter 2 but intense focus and support is targeting recovery in this area and the IBCF has funded 'Home First' initiative. Provider Market Support - training of reablement care providers as part of a therapy led model has changed the support delivery to a goal focussed independence model. There has also been an introduction and funding a new service provision in Mental Health and Learning Disabilities to change and supplement existing provision. For example, a whole new MH community preventative service has launched in October 2017. Supporting Local Care Systems - A significant campaign to recruit SW and other staff resource is continuing and the funding has allowed us to recruit to vacant posts confidently. The security of funding has also enabled retention of the supply of statutory services supplied by external providers and funding different solutions to the increased demand for adult social care interventions. STP Joint Commissioning Function - phase one metric (c) and phase two metrics - Amber RAG Statuses - there has been some slippage in the completion of phase one which will have an impact on delivery of phase two as there will be slippage in delivering the project to plan.	
	Somerset Children's Trust - Children and Young People's Plan 2016-19	↔	G		Involvement and encouragement with Healthwatch Somerset	↔				G
	Somerset Safeguarding Children Board - Annual Report 2016/17	↔	G							
Undertake a pharmaceutical needs assessment	Somerset Safeguarding Adults Board - Annual Report 2016/17	↔	G	HWB Newsletter / briefing notes	↔	G	Workstream 4: Action 2 'Embed the protocol of Hidden Harm, across adult mental health, domestic abuse and drugs and alcohol services' has an Amber RAG status - an audit is being carried out to evaluate the success and impact of the joint working protocol. To be completed by the end of January. Action 3 'Review Early Help Assessments (EHA) that identify adult mental health, substance misuse or domestic abuse needs' has an Amber RAG status - once the findings of the audit are known and action plan will be developed. The measures relating to the number of staff accessing MFHA and ASSIST training and screening and brief intervention for domestic abuse and substance misuse have Amber RAG statuses this is because training needs will be identified when cases that are being worked under the new joint working protocol are audited in January.	Workstream 5: All Actions, Local Measures and Project Milestones have Green RAG statuses.  Where a (-) is placed in the RAG Status box this indicates that work has not started in respect of this metric yet. Where a (-) is placed in the direction of travel box this indicates that this is the first time reporting this metric and therefore the direction of travel is not available but will be included in the next report. Where a box is blank this indicates that performance information has not been received in respect of this metric.		
	Safer Somerset Partnership 2016/17	↔	G							
Develop a joint Health and Wellbeing Strategy for the County	Joint Strategic Needs Assessment 2017	↔	G	HWB Website	↔	G				
	Health Protection Forum Report 2016/17	↔	G							
To encourage integrated working between health, social care and public health including oversight of the Better Care Fund	Healthwatch Somerset Updates	↔	G		↔	G				

### Priority Workstreams

Workstream 1: To provide joint leadership for prevention across the County		Workstream 2: To give system leadership to build strong, resilient and healthy communities		Workstream 3: To drive and oversee new, integrated and sustainable models of care across the county		Workstream 4: To further develop work to improve identification and early intervention to prevent Hidden Harm of Children		Workstream 5: To identify and address the impact of housing on health			
Lead Manager: Trudi Grant		Lead Manager: Teresa Harvey, Chris Phillips, Pip Cannons, Carolyn Arscott and Mark Leeman		Lead Manager: Stephen Chandler		Lead Manager: Alison Bell / Dorothy Musaka		Lead Manager: Tracy Aarons			
<b>Actions</b>		<b>Actions</b>		<b>Actions</b>		<b>Actions</b>		<b>Actions</b>			
Ensure that prevention is effectively addressed in the implementation of the Somerset NHS Sustainability and Transformation Plan	↔	A	To develop asset based approaches to support stronger communities in Somerset	↔	G	Embed the ability of adult mental health services to identify if patients are being identified as parents with dependent children	↔	G	Create more effective housing outcomes for people living with mental health issues	↔	G
Promote the Somerset Prevention Framework and Charter to local organisations	↔	G	Deliver a new Somerset Strategic Housing Framework to improve housing and related health outcomes for our communities.	↔	A	To have effective oversight of the Better Care Fund and Improved Better Care Fund	↔	G	Embed the protocol of Hidden Harm, across adult mental health, domestic abuse and drugs and alcohol services	↔	A
Support organisations who adopt the charter to develop plans and actions to deliver prevention outcomes	↔	A	To develop the Let's End Loneliness In Somerset Programme through District Councils and Somerset VCS Forum	↔	G	To have effective oversight of the Joint Commissioning Function	↔	G	Review Early Help Assessments (EHA) that identify adult mental health, substance misuse or domestic abuse needs	↔	A
Produce further three prevention case studies using the prevention framework to describe the type and level of the intended prevention and its actual outcome	↔	A	To be assured that the Dementia Multi-Agency Strategy is being taken forward in Somerset	↔	A				Support the work of the Positive Lives Programme to improve the health of adults with complex needs through more appropriate housing related supported solutions	↔	G
<b>Local Measures:</b>		<b>Local Measures:</b>		<b>Local Measures:</b>		<b>Local Measures:</b>		<b>Local Measures:</b>			
Evidence of prevention outcomes and plans within the STP	↔	A	Establish a Somerset Fund	↔	G	<b>Better Care Fund Indicators</b>	↔	G	Quarterly report of the number of parents being supported by each service individually and collectively	↔	G
All local authorities in Somerset to adopt the prevention charter	↔	G	Establish a Strong Communities Stakeholder Forum and progress agreed actions	↔	G	Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population	↔	R	Number of staff within SDAS accessing MHFA and ASSIST training and screening and brief intervention for domestic abuse	↔	A
All Foundation Trusts and other Health and Care Providers in Somerset to adopt the Prevention Charter	↔	G	Stronger Communities is an integral element of the new Health and Care System being developed through the STP	↔	A	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services	↔	G	Number of staff within SIDAS accessing MHFA and ASSIST training and screening and brief intervention for substance misuse	↔	A
Number of organisations who have adopted the Prevention Charter who also have a Prevention Plan in place	↔	A	Housing Framework Stakeholder engagement event	↔	G	Delayed transfers of care from hospital per 100,000 population (bed days per calendar day per 100,000 population)	↔	A	Percentage of EHAs that identify mental health, substance misuse or domestic abuse where appropriate screening tool used	↔	G
Minimum of three further prevention case studies produced and disseminated	↔	A	Carry out data research and collation to enable development of strategic framework	↔	A				Work with Mental Health Commissioners and providers to map mental health pathways	↔	G
<b>National Measures</b>		<b>National Measures</b>		<b>National Measures</b>		<b>National Measures</b>		<b>National Measures</b>			
None		Draft document out for consultation		↔		↔		Work with housing authorities and providers to map housing pathways		↔	
		Strategy Framework formed following consultation responses		↔		↔		Hold a joint workshop to share an understanding between housing and mental health practitioners of each other and collectively identify areas for improvement		↔	
		Strategy through council governance structures		↔		↔		Produce a Positive Lives Strategy		↔	
		Focused publicity campaigns focused on reducing loneliness to raise awareness through local media and press.		↔		↔		Deliver the actions coming from the Positive Lives Strategy		↔	
		Each District to implement the action plan from their loneliness conference		↔		↔		<b>National Measures</b>		PHOF 1.15 Statutory homelessness	
		Seek broader VCSE sector support regarding the proposal and the need to consider common language and the development of a pledge / commitment and continue to develop a more coordinated / joined up approach to support initiative		↔		↔		Percentage of re-referrals to Children Social Care		↔	
		Dementia Multi Agency Strategy Steering Group continues to meet		↔		↔		PHOF 1.11 Rate of domestic abuse incidents recorded by the police per 1,000 population		↔	
		Multi Agency Dementia Steering Group reports positive progress against action plan		↔		↔					
		Health and Wellbeing Board Partners have adopted dementia friendly status		↔		↔					
		<b>National Measures</b>		<b>National Measures</b>		<b>National Measures</b>		<b>National Measures</b>		<b>National Measures</b>	
		None		↔		↔		PHOF 4.11 Indirectly standardised percentage of emergency admissions to any hospital within 30 days of the previous discharge from hospital		↔	
				↔		↔		NHSOF 3.2 Emergency readmissions within 30 days of discharge from hospital		↔	
				↔		↔		PHOF 4.15i Excess Winter Deaths Index (Single year, all ages)		↔	

