

Health and Wellbeing Board

3 March 2014

Review of progress on action plans for Joint Health and Wellbeing Strategy (JHWS) recommendations:

1. Purpose

The Health and Wellbeing Board (HWB) have agreed that progress reports on the agreed action plans for the recommendations within the JHWS will be brought to the Board every 6 months for assurance, noting and comment.

2. Recommendation

That the members of the HWB note, and are assured by, the progress to date on the actions for these recommendations

3. Report detail

The HWB agreed the action plans for the recommendations within the JHWS during two consecutive HWB meetings in June and July 2013. It is the second group of action plans that are reporting on progress during this meeting. They are for the following recommendations:

Recommendation and number in JHWS	HWB lead	Appendix number
6. Reduce youth unemployment by working with partners to provide co-ordinated support to vulnerable young adults and young parents to encourage them into work and to reduce poverty and become capable parents	Director of Regeneration	1
7. Continue to develop and implement a comprehensive Health and Work programme covering Healthy Workplaces, sickness absence and return to work and the health needs of those who are out of work.	Director of Public Health	2
8. Reduce child poverty by targeting workless reduction on parents of young children and enhancing access to childcare; mitigate impact by supporting income maximisation and foodbanks, high quality housing, and fuel poverty reduction	Director of Regeneration/ Director of Children's Services	3

<p>9. Ensure that all organisations involved in giving welfare advice and support to people in Walsall, work together to meet the identified needs in an holistic, collaborative way that makes the best use of all the resources available and provides the best possible support for people and families in crisis or at risk of being so.</p>	<p>Director of Regeneration/ Director of Children's Services</p>	<p>4</p>
<p>10. Develop and implement a comprehensive set of programmes that equip local people and providers, particularly within the Health and Social Care sector, with the knowledge and skills required to maximise their own health as well as those they care for.</p>	<p>Director of Regeneration</p>	<p>5</p>
<p>11. Use a proactive approach to planning, investment and service provision to:</p> <ul style="list-style-type: none"> • promote sustainable development, provide land for the uses and facilities we need, arrange these in a manner that makes the best use of existing infrastructure and maximises accessibility and social inclusion, protect green spaces and the environment and help minimise exposure to pollution • ensure that the health impacts for individuals and local communities of any potentially significant decision are fully assessed and that the results are used in the decision-making process • develop and drive activities that support businesses to thrive and local people to work 	<p>Director Of Regeneration</p>	<p>6</p>
<p>12. Work with the Area Partnerships and through the other community based initiatives to develop and implement an assets-based approach to community engagement and active involvement in the life of their community.</p>	<p>Director Of Neighbourhoods</p>	<p>7</p>
<p>15. Ensure Walsall Clinical Commissioning Group and Walsall Council's commissioning plans take proper account of the priorities of the Health and Wellbeing strategy, in particular actions to improve the health of the poorest fastest and to address the health</p>	<p>CCG Chair and Accountable Officer</p>	<p>8</p>

needs of men in order to reduce the life expectancy gap		
16. Ensure co-ordinated provision of health and social care services to reduce unnecessary admission to hospital and timely discharge focusing on recovery and re-enablement	CCG Accountable Officer / Director of Adult Health and Social Care	9

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Date

Feb 19th 2014

Section 8: Employment and improving employability

Progress report on action plan for Health and Wellbeing Strategy key recommendation number 6

Key recommendation 6:

Reduce youth unemployment by working with partners to provide co-ordinated support to vulnerable* young adults and young parents to encourage them into work and to reduce poverty and become capable parents

Overall named lead responsible for action: Mark Lavender, Head of Strategic Regeneration, Walsall Council

Partners involved: Walsall Council Regeneration Services, Children’s Services, Integrated Youth Persons Support Services, Transitional Leaving Care Team, Prospects Career Service, Jobcentre Plus, Walsall Adult Community College, Walsall College, Performance through People, Training Providers.

* “Vulnerable” groups in this context refer primarily to: Looked After Children, Young Offenders, Young People with a Learning Difficulties and Disabilities, Teenage Parents and Young Travellers.

Action	Intended outcome(s)	By when?	Named responsible lead	Progress to date (or if expected progress not made, give explanation)
Raise the profile of the Health & Wellbeing recommendation to reduce youth unemployment amongst strategic partners and gain commitment to	A targeted and co-ordinated multi-agency approach to tackling the problem of youth unemployment	Ongoing discussions	Mark Lavender (Strategic Regeneration) and Strategic Partners	As part of the development of the Black Country’s European Union Investment Strategy (BC EUIS), we have developed proposals for the delivery of a comprehensive World of Work - Youth Employment Initiative (YEI). This will deliver services to 1000’s of young people each year through to 2020 aged 15 - 24 throughout the Black Country. Outcomes will include: mentoring

deliver appropriate actions				and support, careers advice and guidance, work experience, support to gain qualifications, ultimately achieving sustainable employment as a result.
Walsall Council's Employment and Skills Team to support Personal Advisors (including through Prospects) to offer appropriate employment and skills advice/ support to the vulnerable young people they are in contact with.	Personal Advisors working closely with Regeneration to promote appropriate provision to vulnerable young adults and improving their participation in education, employment or training	Ongoing discussions	Jane Kaur-Gill / Parveen Sangha (Employment & Skills)	Regular meetings with Jobcentreplus, Prospects Careers, and Training Providers etc to agree and plan how forthcoming opportunities can be promoted to front line staff including Personal Advisors. Currently promoting pre-apprenticeship activity to all Personal Advisors to help vulnerable young people gain the skills required for apprenticeship opportunities.
Raise awareness of pre- apprenticeship opportunities to vulnerable young people and increase the numbers participating	An increase in the number of vulnerable young adults starting pre-apprenticeship courses, equipping them with the skills and experienced to continue with education, training and employment	Monthly	Jane Kaur-Gill (Employment & Skills) with IYPSS, Prospects, WACC, Walsall College and PTP	Employment & Skills Team send regular updates on new Walsall Works Pre-apprenticeship courses to young people on those who are vulnerable.
Raise awareness of apprenticeship opportunities to vulnerable young people and increase the numbers participating	An increase in the number of vulnerable young adults accessing apprenticeship opportunities, equipping them with the skills and experienced to continue with education, training and employment	Ongoing	Inderjit Nijjer / Matthew Allmark (Employment & Skills) with training providers and employers	Employment & Skills Team send regular updates on new Walsall Works apprenticeship opportunities to young people on our database including those are vulnerable. Vulnerable young people are identified as vulnerable on the database so that impact can be measured.
Fund Mentor(s) to support vulnerable	An increase in the number of vulnerable young adults	Ongoing	Parveen Sangha (Employment & Skills)	We have funded a mentor to support young people on the pre-apprenticeship academies at WACC. This

young people - keeping them on track with their learning and improving attainment levels on pre- apprenticeships	attaining and completing pre-apprenticeship courses		with IPYSS, WACC, Walsall College and PTP	support is available to all learners on the programme and the Mentor (who is a Prospects employees) is fully aware of those who are vulnerable due to their personal circumstances.
Ensure Transitional Leaving Care Team and Prospects are actively marketing Walsall Works to vulnerable adults	Increase the number of vulnerable young adults participating in Walsall Works	Ongoing	Jane Kaur-Gill / Parveen Sangha (Employment & Skills) with TLC, Prospects	The Walsall Works programme is actively marketed to Prospects and we have met with the TLC Personal Advisors to go through the principles of the scheme. All pre-apprenticeship promotional material has been circulated to the TLC Training and development Officer.
Include projects and interventions to support vulnerable young people in the Black Country Talent Match Programme	More vulnerable young adults being mentored, supported and participating in positive action schemes	September 2013	Jane Kaur-Gill (Employment & Skills) with BC Local Authorities	Talent Match approval now secured and new manager appointed. Walsall Council is a member of the partnership and through these arrangements will ensure that adequate provision is available for vulnerable young adults, who are key feature of the programme.
Walsall Council's Employment and Skills Team to understand the level of assistance provided by the DWP Lone Parents Co-ordinator	Clear understanding on the DWP offer and how other programmes can fill gaps in support and provision, avoid duplication, and maximise benefits by better alignment of activity	September 2013	Jane Kaur-Gill (Employment & Skills)with Jobcentreplus	We have produced a Journey to Work map which clearly sets out the provision offered by DWP.
Walsall Council's Employment and	Increase the understanding of what provision is available to	Monthly	Parveen Sangha (Employment & Skills)	The team has worked with NOVA Training to develop a new Parents to be Programme focussed

Skills Team to develop a closer working relationship with the Prospects Career Advice Team	young people and identify areas of support – resulting in better aligned activity and the identification of potential gaps in provision			on the Darlaston area. Proposed programme of activity for the European Union Strategic Investment Framework will seek to address gaps in provision and align support available to young people.
Walsall Council's Employment and Skills Team to work with Walsall Council's education services (formerly Serco) to ensure the ESF Accelerate programme is targeting their assistance to young parents	Increase participation from young parents on the ESF Accelerate programme	Monthly	Parveen Sangha (Employment & Skills)	The contract for the new ESF NEETs programme has only recently been signed off by Prospects to deliver in the Walsall area. The team will engage with the project to ensure adequate support is put in place to support young parents.
Walsall Council's Employment and Skills Team to engage with all four Multi-Agency One Stop Shops to understand what assistance they have on offer to young parents and identify gaps in their provision	Greater understanding of the support currently available for young parents and where there are gaps in provision that may require additional support to be put in place	August 2013	Jane Kaur-Gill (Employment & Skills) with Steps to Work	We are in ongoing discussion with Steps to Work who manage the MAOSS to support their sustainability model but unfortunately two of the four shops will close due to lack of funding. The Work on the Horizon shop will continue to operate through funding secured from BIG Lottery (awaiting an outcome on Darlaston JET). The service in the two remaining shops will continue to provide a service to all residents who are unemployed including those who are young parents.
Strategic	Offer more care leavers	On-going	Mark Lavender	The employment & Skills Team are co-ordinating

Regeneration to lead on the 'Care to Work' initiative	opportunities for work experience and paid employment within the Council and its partners		(Strategic Regeneration)	activities to improve the access of care leavers into works experience placements, Apprenticeships and employment, through initiatives like the Walsall Works Apprenticeship programme.
To actively utilise and secure external funding in support of agreed priorities and actions.	To develop the required Investment Strategies and Plan, that facilitate access to known resources in support of our priorities including; <ul style="list-style-type: none"> - European Union 2014-2020 Funding - LEP Pooled funding - Lottery Funding - Other Programmes as identified. 	Ongoing	Mark Lavender (Walsall Council: Strategic Regeneration) We will require joint support from key internal and external stakeholders, which will vary dependent upon each priority and funding stream.	The draft Black Country European Union Strategic Investment Framework (EUSIF) has now been completed and submitted to Government for appraisal and feedback. The development of projects, interventions and subsequent tenders will be completed prior to October 2014, as we hope that >£200m of funding can be secured through this strategy to benefit the residential and business communities across both Walsall and the Black Country. Delivery is intended to start in early 2015 The ESF element will focus on Social Inclusion, Employment and Skills and will secure £75M of ESF funding matched to a number of opt-in options to tackle issues around social inclusion, employment and skills.

Section 8: Employment and improving employability

Progress report on action plan for Health and Wellbeing Strategy key recommendation number 7

Key recommendation 7:

Continue to develop and implement a comprehensive Health and Work programme covering Healthy Workplaces, sickness absence and return to work and the health needs of those who are out of work.

Overall named lead responsible for action: Barbara Watt

Partners involved:

Walsall Healthcare Trust, whg, Small and Medium sized Enterprises in Walsall, Area Partnerships

Action	Intended outcome(s)	By when?	Named responsible lead	Progress to date (or if expected progress not made, give explanation)
Delay in the start date of the newly appointed Public Health Officer with remit around Health and Work has meant some actions are still in the process of being completed. However now that the Programme Development and Commissioning Manager came in to post on Jan 15 th 2014 there will be more opportunity for this agenda to be developed and faster progress in the future.				
Expand capacity of Healthy Workplace Awards programme commissioned by Public Health to improve the health and wellbeing of employees in Walsall.	Recruitment of 25 additional companies to the scheme (dependent on employee numbers) particularly SMEs employing men in routine and manual occupations.	March 2014	Barbara Watt	<p>The Healthy Workplace Award has currently recruited 28 companies with 6 achieving the Gold level. This includes routine and manual employers such as WHG (Tradesmen), but there is a need to increase engagement with more of these companies.</p> <p>Recently, links have been made with Walsall Council Regeneration Team to access their business database and make use of their existing contacts with local routine and manual businesses. This will</p>

	Improved employee health and wellbeing. Reduced sickness absence rates.			enable the provider of the Healthy Workplace Award to improve engagement with target companies.
Develop workplace health assessment and evaluation framework	Enable systematic base lining of employer workplace health and evaluation of impact of programme	November 2013	Sarah Potter (HR)/Barbara Watt (PH)	<p>The current framework is being developed to include more than just health and wellbeing. Leadership and Health and Safety will also be included to enable a more holistic view of a healthy workplace.</p> <p>The framework will be developed using current best practice and learning from existing frameworks.</p>
Engagement of Area Partnerships in recruiting local businesses to Healthy workplace Programme	Sign up of more target SMEs to participate in the Healthy Workplace awards programme	September 2013	Barbara Watt	The provider of Healthy Workplace Award is represented on the Area Partnerships.
Review of Walsall Council sickness absence and Occupational Health data	Identification of service areas that will most benefit from healthy workplace interventions.	October 2013	Sarah Potter (HR)/Barbara Watt (PH)	<p>The Occupational Health Department has piloted several wellbeing incentives such as weight watchers, cancer awareness, NHS health checks, stop smoking support and worked with the Council's Sport and Leisure department to set up lunch time jogs and weight management programs.</p> <p>HR have provided an analysis of sickness absence across the council. This data will be used to target the most appropriate interventions (such as those referred to above) at the departments with the greatest need.</p>

Walsall Council Employee Survey	Identification of staff needs and views re: workplace health	November 2013	Sarah Potter (HR)/Barbara Watt (PH)	Physical Activity Survey was carried out across council to identify needs around exercise and the appetite for staff to volunteer and lead sessions.
Needs analysis re: workplace health in Walsall	Identification of target businesses	November 2013		<p>Links have been made with Walsall Council Regeneration Team to access their local business database. This has enabled a search of local businesses that meet the following criteria;</p> <ol style="list-style-type: none"> 1) Less than 250 employees 2) Predominantly male workforce 3) Located in deprived area <p>The criteria have been selected due to smaller companies having reduced access to well established occupational health support. Local evidence also shows that men and residents living in more deprived areas are likely to have poorer health outcomes.</p> <p>The initial list of target business has over 150 companies, including a large number of manufacturing and transport/ haulage companies. This will be utilised by the Healthy Workplace Award Co-ordinator to target the most appropriate companies.</p>
Roll out of Healthy Workplace programme for	Improved the health and wellbeing of the	February 2013	Isabel Gillis/Barbara Watt/HR	Aiming to register to Workplace Wellbeing Charter. This is a number of standards which a company's

<p>the main employers in Walsall: WMBC, WHT and whg</p>	<p>workforce of the three big employers in Walsall.</p> <p>Main employers in Walsall acting as role models for other local businesses.</p> <p>Reduced sickness absence rates.</p>			<p>healthy workplace environment is assessed against. The assessment is split into various sections including Leadership, Attendance Management, Health and Safety, Physical Activity, Smoking, Diet and Mental Health.</p> <p>The standards are currently being reviewed with the intention of rolling the new ones out in March – with the Wellbeing Charter being fully endorsed by Public Health England.</p> <p>In the meantime, a self assessment of Walsall Council against the current standards has been completed. This has identified some areas that will be developed in the short term whilst the standards are under review. For example, plans are in place to develop a page on the intranet that will provide employees with access to information on health and well being, including physical activity, drugs and alcohol, smoking, diet and mental health. There will also be access to support services through an on-line self referral. WHG and WHT are in the process of completing their self assessment too.</p>
<p>Promote the Making Every Contact Count (MECC) initiative with Directors and managers within businesses, recognising the links with organisational health as staff relate personally to the advice they are being trained to deliver to service</p>	<p>Staff trained in MECC recognise the effects on their health of their own lifestyles and are more likely to make positive changes and/or access the support services on</p>	<p>On-going - March 2014</p>	<p>Initial introduction given as part of Health and Work programme. Interested parties would be followed up via MECC Programme lead: Cath Boneham</p>	<p>Between April and Sept 2013 1,965 staff have been trained in MECC. The organisations involved are LA, NHS, CAB, Fire Service and WHG. Roll out to other staff and organisations are planned including the voluntary sector.</p> <p>The provider of the healthy workplace award will be</p>

users/clients.	offer. As they become healthier, there is a benefit to the employing organisation			promoting MECC training to some of the small and medium sized enterprises that are involved in the scheme. This will provide a sustainable means of identifying and providing support to employees who have certain lifestyle risk factors, such as a poor diet or they smoke.
Recruit lead for Health and Work to work across PH/HR/OH	<p>Development of Health and Work strategy for Walsall</p> <p>Work with partner organisations to strengthen approach to helping residents currently out of work due to ill health to re enter employment.</p>	September 2013	Barbara Watt	<p>Programme Development and Commissioning Manager (Health and Work) was recruited and started in post Jan 15th 2014.</p> <p>Initial links have been made with Benefits Team and meeting with service lead has been arranged for 24th Feb.</p>

Section 8: Employment and improving employability

Progress report on action plan for Health and Wellbeing Strategy key recommendation number 8

Key recommendation 8:

Reduce child poverty by targeting workless reduction on parents of young children and enhancing access to childcare; mitigate impact by supporting income maximisation and foodbanks, high quality housing, and fuel poverty reduction

Overall named lead responsible for action: Mark Lavender, Strategic Regeneration, Walsall Council (Workless Reduction)
Andrea Potts, System Leader Money, Home, Job, Walsall Council (Mitigation)

Partners involved: Walsall Council Regeneration Services, Children Services, Integrated Youth Persons Support Services, Transitional Leaving Care Team, Prospects Career Service, Jobcentre Plus, Walsall Adult Community College, Walsall College, Performance through People, Training Providers, Black Country Food Bank, local retailers, Illegal Money Lending Team, Schools, Utility Companies, Registered Providers, Community Churches

Action	Intended outcome(s)	By when?	Named responsible lead	Progress to date (or if expected progress not made, give explanation)
Strategic Regeneration to take the lead strategic role and responsibility for a joined up approach to tackling unemployment and worklessness	A targeted and co-ordinated multi-agency approach to tackling worklessness – based on evidence of need – that is aligned to ensure resources are maximised, gaps are identified, and duplication is reduced	Ongoing	Jane Kaur-Gill (Employment & Skills Team)	Maintained a strategic role working with BC partners on the development of the BC Talent Match, BC City Deal, BC Strategic Economic Plan and the EUSIF 2014/2020. All these programmes demonstrate a joint up approach to tackling unemployment and worklessness.
Employment & Skills Team to engage	The intelligence gathered can be used to design, deliver and	Ongoing	Jane Kaur-Gill (Employment & Skills	Evidence base for the BC Talent Match, BC City Deal, BC Strategic Economic Plan and the EUSIF 2014/2020

with workless residents (including workless parents) to develop a clear understanding of their barriers to work	manage future activity to meet the identified needs		Team)	will help to inform interventions for delivery. The process to design these programmes is well underway.
To develop, define and promote employment, skills and enterprise provision to workless residents	A clear journey to work or into enterprise (self-employment) is produced – with residents able to follow the pathway into work	Ongoing	Jane Kaur-Gill (Employment & Skills Team)	Journey to Work and Journey to Enterprise has been produced. A summary of these has been included on the Regeneration - People pages on the Council's Website
To support young parents into apprenticeships through Walsall Works	Increase the number of young parents accessing apprenticeship opportunities	Ongoing	Inderjit Nijjer / Matthew Allmark (Employment & Skills) with training providers and employers	<p>Facilitated a session with young parent family, welfare rights team and Prospects Teen Parents PA to help a teen parent family calculate the financial advantages of finding an apprenticeship or employment opportunity. Calculations from the session were used as a case study to help other teen parents understand the financial benefits of finding an apprenticeship or employment.</p> <p>Work has been done as part of the pre-apprenticeship academies to enable young parents to undertake foundation learning and then by the end of the course to begin to apply for Apprenticeships including Walsall Works Apprenticeships.</p> <p>Additional parenting provision has been arranged in Darlaston which will enable young parents and parents to be to access vocational training i.e. Study programmes.</p>

<p>A co-ordinated approach to maximising the economic, employment and training opportunities in all major developments and investments in the borough</p>	<p>Companies investing the Walsall are supported to take on new employees locally, and local residents are supported with the skills and knowledge to take advantage of these employment opportunities</p> <p>For workless parents, this will also include ensuring they have an appropriate package of support to remove barriers to returning to work (including child care, benefits advice etc)</p>	<p>Ongoing</p>	<p>Jane Kaur-Gill / Isobel Woods (Strategic Regeneration)</p>	<p>We currently maximise local training, employment and business opportunities from new investment, developments and growth from existing businesses.</p> <p>Where appropriate, we may also support them with recruitment through working with other partners i.e. Jobcentreplus.</p> <p>We have also put together a targeted supplier, employment and training plan to support planning officers to obtain crucial information on economic benefits on all planning applications including refurbishments, new builds and developments. This will include</p>
<p>Through Strategic Regeneration Service, to engage with employers to unlock new employment opportunities and to support them with recruitment processes</p>	<p>Local businesses are supported to recruit new employees locally, and local residents are supported to take advantage of these employment opportunities</p> <p>For workless parents, this will also include ensuring their barriers to returning to work are addressed</p>	<p>Ongoing</p>	<p>Jane Kaur-Gill / Isobel Woods (Strategic Regeneration)</p>	<p>The team have worked with 179 employers to support their recruitment of apprenticeships through Walsall Works. We also are currently working with Walsall Housing Skills Centre and Job Centre Plus to fill vacancies in the large construction company Kier and British Gas by promoting opportunities to unemployed people. The majority of these jobs were more attractive to young men not necessarily young women but we continue to promote non-traditional job roles to young girls.</p>
<p>Development of a sustainable cross borough crisis food network</p>	<p>Crisis food network is sustainable and meeting the needs of families</p>	<p>September 2013</p>	<p>Andrea Potts (Money, Home, Job)</p>	<p>Significant action has been undertaken to enhance the Black Country Food Bank which has distribution points for families throughout the borough. This has included securing the support of a range of supermarkets in the borough to donate fresh food daily and other goods monthly. The Black Country Food Bank is also creating vital employment</p>

				<p>opportunities for adults with learning disabilities at Links To Work at Electrium Point, Willenhall, who are helping with the packing and distribution of the food.</p> <p>Additional support from Midland Langar Seva Society for vulnerable households is being provided weekly through free hot meals at two housing projects in the borough.</p>
Increase the number of School Breakfast Clubs across the borough	Children have a breakfast and do not start school hungry, therefore supporting improved attendance and attainment	October 2013 and ongoing	Sue Blick (Child Poverty Officer)	<p>An initial profiling exercise of around 50% of primary schools indicated that around three quarters of the schools asked already ran breakfast clubs. There was limited demand in the remaining areas.</p> <p>Building on these findings, a snapsurvey of all Primary School Head Teachers has been completed generating a more comprehensive picture of food poverty and the demand for breakfast clubs. There was a 30% response rate to this survey, of which around 45% of the respondents felt there was a food poverty issue.</p> <p>A working group has been established to understand more fully local food poverty, how it is impacting on Walsall children, and ideas future developments. A report of the combined findings of both pieces of work will be available before mid March.</p> <p>The views of Secondary school age children and young people have been sought through the YOW survey. Initial and partial findings (n1500) show 7.4% of pupils 'always' or 'often' go hungry because there is not enough food at home.</p> <p>The focus of work going forward will be targeted support in strengthening the work of school breakfast</p>

				clubs, and promoting their role in improving attendance and attainment.
Reduce Fuel Poverty	Families can access the support they are entitled to in order to manage their fuel costs – and ensure that children do not go cold.	November 2013	David Lockwood (Money, Home, Job)	<p>Range of complementary support for families:</p> <p>Promotion of collective fuel switching scheme – so households can come together to reduce their fuel bills. Those who have switched are making average savings of £150 a year.</p> <p>Promotion of other fuel switching – highlighting that residents can also fuel switch outside the collective switch and potentially save money off their fuel bills</p> <p>Keeping Warm, Keeping well in Walsall leaflet – 3,350 leaflets distributed to vulnerable households through a range of partners in the borough</p> <p>Energy Company Obligation (ECO) –</p> <ul style="list-style-type: none"> • nominating two major contractors (Keepmoat and whg) who will to seek to help residents throughout the borough with home insulation and heating improvements • development of a loan scheme to help residents fund gaps between the cost of external wall insulation and ECO <p>Development of a safety net loan for those with no access to funding to tackle excess cold and damp in their owner occupied home.</p> <p>Continued prioritisation of advice and support for private rented families to tackle excess cold and</p>

				damp – work includes advising residents against renting properties with poor Energy Performance Certificates (EPC) scores.
The need for 'children to live in quality housing' will be embedded as a priority in Walsall's housing strategy (and its relevant action plans)	Local housing strategy supports children and families to live in sustainable and decent homes.	March 2014	Andrea Potts (Money, Home, Job)	The Walsall Housing Strategy 2012-16, the Joint Strategic Needs Assessment, Housing Renewal Assistance Policy 2014-18, Adopted Housing Enforcement Policy and Children and Young People's Plan highlight the importance of good quality accommodation on the health and wellbeing of children, and prioritise a range of assistance and enforcement in this key area.
Families understand and access the childcare available to them, and childcare supports working & workless households	Quality childcare is available to all parents, therefore supports both in -work and out of work poverty and the work agenda.	Statutory Duty September 2013 Ongoing	Kim Stokes	Family Information Service is continually widening their engagement with parents, and now supports Short Term Break bookings for children with SEND. 75% of Private and voluntary providers are judged to be Good or Outstanding with Ofsted.
To actively utilise and secure external funding in support of agreed priorities and actions.	To develop the required Investment Strategies and Plans, that facilitate access to known resources in support of our priorities including; <ul style="list-style-type: none"> - European Union 2014-2020 Funding - LEP Pooled funding - Lottery Funding - Other Programmes as identified. 	On-going	Walsall Council: Strategic Regeneration, Mark Lavender. We will require joint support from key internal and external stakeholders, which will vary dependent upon each priority and funding stream.	We are currently developing and writing the European Union Strategic Investment Framework valued at approx £150m of new EU funding. The ESF element will focus on Social Inclusion, Employment and Skills and will secure £75M of ESF funding matched to a number of opt-in options to tackle issues around social inclusion, employment and skills. The 1 st draft has been signed off and the final draft is in the process of being submitted to Government for approval. Delivery is intended to start in early 2015.

Section 8: Employment and improving employability

Progress report on action plan for Health and Wellbeing Strategy key recommendation number 9

Key recommendation 9:

Ensure that all organisations involved in giving welfare advice and support to people in Walsall, work together to meet the identified needs in an holistic, collaborative way that makes the best use of all the resources available and provides the best possible support for people and families in crisis or at risk of being so.

Overall named lead responsible for action: Mark Lavender, Head of Strategic Regeneration, Walsall Council
Andrea Potts, System Leader Money, Home, Job Walsall Council

Partners involved: Walsall Council Regeneration Services, Children Services, Integrated Youth Persons Support Services, Transitional Leaving Care Team, Prospects Career Service, Jobcentre Plus, Walsall Adult Community College, Walsall College, Performance through People, Training Providers, Citizens' Advice Bureaux, Walsall Voluntary Action, Voluntary Advice Sector, Registered Providers

Action	Intended outcome(s)	By when?	Named responsible lead	Progress to date (or if expected progress not made, give explanation)
Regular meetings between Employment & Skills Team and Welfare Rights Officers to share Welfare to Work programme information	Real time updates and information flow between Regeneration and Welfare Rights Welfare Rights Officers able to help improve employability of our workless residents	Monthly	Employment & Skills Team	We have regular contact with Benefits staff through the Working Smarter – my money my home my jobs pilot project. We have not yet put in place regular monthly meetings with Welfare Rights Officers but the team does engage with the officers as required on the assessment of better off calculations for residents.

Through 'My Money My Home My Jobs', have a clear understanding of the needs our workless residents	Learning captured and understood, providing an overview of the typical and predictable needs of clients (This intelligence then used to support future service provision/redesign)	Monthly	Employment & Skills Team	We have been working with the team to learn and capture evidence and understand the needs of our clients. This intelligence has been evaluated and presented to Head of Benefits and it was through this process that we put in place the provision of a dedicated employer advisor working alongside and support benefits staff to learn.
Through 'My Money My Home My Jobs,' assess gaps in provision to meet the needs our workless residents	Employment advice more targeted to respond to clients' needs (This intelligence then used to support future service provision/redesign)	Monthly	Employment & Skills Team with Working Smarter	Through this process we have worked with the working smarter team to develop the knowledge and resources of the benefits team. Currently we are conducting a pilot whereby a dedicated employment advisor (IAG qualified) sits with the benefits team so that officers can learn about welfare to work provision and best practice in dealing with clients seeking employment. We are currently compiling the evidence on benefit savings in order to justify continuation of the service moving forward.
Through 'My Money My Home My Jobs' put in place interventions to manage gaps in provision to meet the needs our workless residents	Employment advice and support more targeted to respond to clients' needs	Monthly	Employment & Skills Team with Working Smarter	We have put in place a financial fund to respond to clients needs whereby funding is made available for bespoke or one-off training and employment support. The take up of this fund has been very low so we have utilised part of this fund to put in place dedicated resource through a employment advisor working directly with benefit staff and clients.
Produce a 'Journey to Work' that sets out all the support that is available to workless clients in the borough	Organisations providing advice and support are aware of the resources that are available in Walsall and can provide the best possible guidance to their clients	Ongoing	Employment & Skills Team with Working Smarter	Journey to Work has been produced and this has been summarised and is now available on our Council webpages. This document is updated and has been circulated to front line staff and officers.
Support Jobcentre	Organisations are aware of	Ongoing	Employment & Skills with	DWP Partnership Manager has conducted several

<p>Plus Walsall Partnership Manager to visit organisations offering welfare advice to advise on current and new DWP provision.</p>	<p>what DWP provision is available and the impact the provision may have on individuals.</p> <p>Organisations are kept informed of new DWP provision and the impact it may have on their clients.</p>		<p>Jobcentre Plus</p>	<p>presentations to regeneration and frontline benefits staff on the forthcoming DWP changes on benefits including bedroom tax, welfare reform, universal credit etc.</p>
<p>Through Area Partnerships, promote the provision that is available</p>	<p>Ensuring local residents and local organisations are aware of the level of support that is available in Walsall.</p>	<p>Ongoing</p>	<p>Employment & Skills with Area Partnerships</p>	<p>Each officer in the Employment & Skills Team is assigned an Area Partnership and it is this officer's responsibility to ensure that information is cascaded down to these neighbourhood areas. We are currently supporting better marketing and development of the Work Clubs in each area.</p> <p>Held a joint Employment Support Event with Old Hall People's partnership and Darlaston & Bentley Area Partnership on 25th November 2013 to offer residents support in finding employment and to promote the provision that is available in Walsall. Event was attended by a number of organisations.</p>
<p>Information on provision to be made easily accessible to relevant organisations, (including making effective use of the internet)</p>	<p>Individuals and organisations are able to easily access the most up-to-date information in an appropriate format.</p>	<p>Ongoing</p>	<p>Employment & Skills Team</p>	<p>Regeneration people pages have been updated to provide detailed information about the current support that is available in Walsall. A new page has been included to share information of events that are taking place to support people into work. Events and opportunities are actively promoted on Twitter and Facebook. Walsall works database is utilised to promote any other opportunities that young people maybe interested in.</p>

				Information is also cascaded to partners and training providers.
Organisations from all sectors work together in a co-operative partnership agreed within Walsall's revised Child Poverty Strategy to ensure residents' needs are understood and met in the most appropriate way.	Families, children and young people are supported to meet their needs and understand what is available to them. Organisations from all sectors work within the consulted strategy framework.	Dec 2013	Andrea Potts Lead Sue Blick CP Strategy Lead	The revised Child Poverty Needs Assessment is within final stages of completion, drawing on evidence from the refreshes of the Joint Strategic Needs Assessment and the Local Economic Assessment (and supplemented with additional analysis). It is recommended the CYPB considers a two strand approach to tackling Child Poverty Mitigation and Child Poverty Reduction as the best way forward. There is ongoing work across all sectors (see above) to ensure awareness of welfare reforms, impacts and how to address needs through services and partnerships: Food poverty – school and pupil surveys and mapping, working group taking work forward. Increased food bank network Fuel Poverty- joint work with Housing Standards and Improvement team as reported to CYPB Welfare Reforms- sessions arranged for staff, partners and foster carers on DLA/PIP transition, CS Welfare Reform Focus Group formulating a uniformed response to changes based on impact and need utilising internal and external partnerships, development of WCSS, area of work includes money management and debt advice Early Help – strategy supports mitigation of Child Poverty utilising partnerships and workforce development to assess and meet needs through appropriate agencies and services
Identify and deliver	Joint working maximises the	In progress -	Strategic lead Early Help –	This action summarises a range of complementary

support to vulnerable families through a range of Children's Services programmes including Early Help and Troubled Families Programmes	impact of support to vulnerable families	ongoing	Isabel Vanderheeren	<p>activity which is currently being led by Children's Services – each with its own identified outcomes, measures and risks.</p> <p>This activity falls under the scope of the Children and Young People's Partnership Board, which has its own processes in place to monitor progress.</p>
To actively utilise and secure external funding in support of agreed priorities and actions.	<p>To develop the required Investment Strategies and Plans, that facilitate access to known resources in support of our priorities including;</p> <ul style="list-style-type: none"> - European Union 2014-2020 Funding - LEP Pooled funding - Lottery Funding - Other Programmes as identified. 	Ongoing	<p>Walsall Council: Strategic Regeneration, Mark Lavender.</p> <p>We will require joint support from key internal and external stakeholders, which will vary dependent upon each priority and funding stream.</p>	<p>We are currently developing and writing the European Union Strategic Investment Framework will draw in approx £150m of new EU funding. The ESF element will focus on Social Inclusion, Employment and Skills and will secure £75M of ESF funding matched to a number of opt-in options to tackle issues around social inclusion, employment and skills. The 1st draft has been signed off and the final draft is in the process of being submitted to Government for approval. Delivery is intended to start in early 2015</p>

Section 8: Employment and improving employability

Progress report on action plan for Health and Wellbeing Strategy key recommendation number 10

Key recommendation 10:

Develop and implement a comprehensive set of programmes that equip local people and providers, particularly within the Health and Social Care sector, with the knowledge and skills required to maximise their own health as well as those they care for.

Overall named lead responsible for action: Mark Lavender, Head of Strategic Regeneration, Walsall Council

Partners involved: Walsall Council Regeneration Services, Neighbourhoods (Public Health), Walsall College, Walsall Housing Group, plus a range of external partners and stakeholders within Health Sectors and NHS, as dictated as the pilots develop and move into the implementation stages.

Action	Intended outcome(s)	By when?	Named responsible lead	Progress to date (or if expected progress not made, give explanation)
The development of a flexible menu of Learning & Development programmes, tailored to meet the Health Sectors Employment and delivery needs.	A flexible set of Accredited Learning & Development programmes, which truly meets the needs of customers, ensuring that their individual and/or business needs are truly met.	September 2013 With on-going development.	Joint: Walsall Council: Strategic Regeneration, Mark Lavender. Walsall College: Commercial Development, James Norris.	Walsall College Launched its Social, Care and Medical Health Academy in September 2013. This flexible approach to learning supports and now delivers a flexible menu of Learning & Development programmes, tailored to meet the Health Sector's employment and delivery needs. This approach is now being implemented and marketed to the sector.
The launch of the Walsall College Health, Social and Medical Academy.	The launch of the New Academy, which brings together Employers, Employees and those within Communities who care for	September 2013 With on-going development.	Joint: Walsall Council: Strategic Regeneration, Mark Lavender. Walsall College:	Academy launched in September 2013 – action achieved.

	<p>themselves and others.</p> <p>With the aims of ensuring that:</p> <ul style="list-style-type: none"> - Their collective employability and skills delivery needs are met - The Sector has the workforce it requires - Patients are receiving the services they need - Through the application of innovation costs are reduced and care levels / quality is increased. 		<p>Commercial Development, James Norris.</p>	
<p>The implementation of a Digital First - Community Health & Wellbeing Pilot</p>	<p>The delivery of a successful pilot which tests out the use of Digital Technologies, Platforms and Media linked to a pilot group of residents, with the following objectives;</p> <ul style="list-style-type: none"> - The further development of a community’s ability to care for itself and others - The pilot use of new Digital platforms, techniques and opportunities - The development and accreditation of materials / qualifications and learning initiatives in support of the above - Improved health and 	<p>On-going</p>	<p>Joint:</p> <p>Walsall Council: Strategic Regeneration, Mark Lavender.</p> <p>Walsall Housing Group: Carole Wildman Director of Regeneration:</p> <p>Walsall College: Commercial Development, James Norris.</p> <p>Walsall Council: Public Health, Cath Boneham.</p>	<p>The Digital First - Community Health & Wellbeing Pilot consist of 4 phases, which are:</p> <p>1: The Discovery Phase</p> <ul style="list-style-type: none"> • User Centered Research (Residents/providers) conducted • User Needs evaluation established • Vocational qualification requirements established • Proposition scoping for Phase 2 <p>2: Prototype Development Phase</p> <ul style="list-style-type: none"> • Proposition iterations developed and validated • Prototype development, completed & tested <p>3: Piloting & Evidence Gathering Phase</p> <ul style="list-style-type: none"> • Prototype implementation • User training • Roll-out of the digital intervention prototype • Piloting of “new techniques”

	<p>wellbeing levels within local communities</p> <ul style="list-style-type: none"> - Identified savings and operational / clinical improvements as a direct result of the above albeit they may be in terms of the ‘invest to save’ model that is based on medium and long term outcomes. 			<ul style="list-style-type: none"> • “Life in Beta” evolutions implemented • Evidence gathering bought together <p>4: Evidence Reporting on Impact</p> <ul style="list-style-type: none"> • Qualitative user research gathered • Evidence analysis secured • Report drafted, completed & published <p>Funding (£20k) has been secured to deliver the first phase from the NHS Tender programme, which will complete in March 2014, partners are seeking funding to deliver the subsequent phases, at an estimated cost of £250k.</p>
<p>To actively utilise and secure external funding in support of agreed priorities and actions.</p>	<p>To develop the required Investment Strategies and Plans, that facilitate access to known resources in support of our priorities including;</p> <ul style="list-style-type: none"> - European Union 2014-2020 Funding - LEP Pooled funding - Lottery Funding - Other Programmes as identified. 	<p>On-going</p>	<p>Walsall Council: Strategic Regeneration, Mark Lavender.</p> <p>We will require joint support from key internal and external stakeholders, which will vary dependent upon each priority and funding stream.</p>	<p>Draft BC EU Investment Strategy now completed and submitted to Government for appraisal and feedback.</p> <p>The development of projects, interventions and subsequent tenders will be completed prior to October 2014, as we hope that >£200m of funding can be secured through this strategy to benefit the residential and business communities across both Walsall and the Black Country.</p> <p>Officers are also working to access and secure other alternative sources of funding, including Lottery and the NHS.</p>

Section 9: Creating and developing healthy and sustainable places and communities

Progress report on action plan for Health and Wellbeing Strategy key recommendation number 11

Key recommendation 11:

Use a proactive approach to planning, investment and service provision to:

- promote sustainable development, provide land for the uses and facilities we need, arrange these in a manner that makes the best use of existing infrastructure and maximises accessibility and social inclusion, protect green spaces and the environment and help minimise exposure to pollution
- ensure that the health impacts for individuals and local communities of any potentially significant decision are fully assessed and that the results are used in the decision-making process
- develop and drive activities that support businesses to thrive and local people to work

Overall named lead responsible for action: David Elsworthy, Head of Planning & Building Control, Walsall Council
Mark Lavender, Head of Strategic Regeneration, Walsall Council

Partners involved:

Regeneration (Planning & Building Control: Planning Policy, Planning & Building Control: Development Management, Strategic Regeneration, Development and Delivery, Housing, Asset Management); Neighbourhoods (Public Health, Pollution Control, Green Spaces, Countryside Services, Leisure Services, Environmental Health); Resources (Finance, Legal); Environment Agency; Natural England; Health and Safety Executive; Highways Agency.

Action	Intended outcome(s)	By when?	Named responsible lead	Progress to date (or if expected progress not made, give explanation)
Plan for new development in locations that are sustainable.	<ul style="list-style-type: none"> • Convenient access to facilities and opportunities for all sections of the community and by a 	Site Allocations Document & Town Centre	Mike Smith Regeneration Manager – Planning Policy With:	Consultations on Issues and Options during 2013. Draft plans currently being worked up in preparation for public consultation in 2014. This will include evidence gathering, assessment and

Including through testing of all potential development sites in terms of accessibility.	<p>choice of means of transport</p> <ul style="list-style-type: none"> • Reduced travel costs. • Reduced vehicle emissions. • Reduced environmental impacts. • Highest practicable standards of amenity. 	<p>Area Action Plan</p> <p>- Preferred Options 2014</p> <p>- adoption 2015</p>	<ul style="list-style-type: none"> - Public Health - Transportation 	discussion with the necessary colleagues.
Plan for numbers and types of housing to meet the borough's needs.	Allocate sufficient land of the right types in the right places to provide the basis to meet the borough's needs for housing.	<p>Site Allocations Document & Town Centre Area Action Plan</p> <p>- Preferred Options 2014</p> <p>- adoption 2015</p>	<p>Mike Smith</p> <p>Regeneration Manager – Planning Policy</p> <p>With:</p> <ul style="list-style-type: none"> - Housing 	<p>Consultations on Issues and Options during 2013.</p> <p>Draft plans currently being worked up in preparation for public consultation in 2014. This will include evidence gathering, assessment and discussion with the necessary colleagues.</p>
Plan for amounts and types of employment to meet the borough's needs	Allocate sufficient land of the right types in the right places to provide the basis to meet the borough's needs for employment.	<p>Site Allocations Document & Town Centre Area Action Plan</p> <p>- Preferred Options 2014</p> <p>- adoption 2015</p>	<p>Mike Smith</p> <p>Regeneration Manager – Planning Policy</p> <p>With:</p> <ul style="list-style-type: none"> - Development & Delivery - Economic Development 	<p>Consultations on Issues and Options during 2013.</p> <p>Draft plans currently being worked up in preparation for public consultation in 2014. This will include evidence gathering, assessment and discussion with the necessary colleagues.</p>
Plan for facilities (including health facilities) and ensure these are	Allocate sufficient land of the right types in the right places to provide the basis to meet the borough's needs for	<p>Site Allocations Document & Town Centre</p>	<p>Mike Smith</p> <p>Regeneration Manager – Planning Policy</p> <p>With:</p>	<p>Consultations on Issues and Options during 2013.</p> <p>Draft plans currently being worked up in preparation for public consultation in 2014. This will include evidence gathering, assessment and</p>

<p>accessibly located to meet the borough's needs. Including through:</p> <ul style="list-style-type: none"> • needs assessments; and • testing of all potential locations in terms of accessibility. 	<p>health, education and other facilities.</p>	<p>Area Action Plan - Preferred Options 2014 - adoption 2015</p>	<ul style="list-style-type: none"> - Public Health (and health providers) - Asset Management - Leisure Services - Transportation 	<p>discussion with the necessary colleagues.</p>
<p>Identify and protect environmental assets, including 'green areas' and open spaces. Improvements in access to open spaces and linkages between them.</p> <p>Serious consideration of measures to provide open space in areas of deficiency or of facilitating access to open space in other areas (recognising this might not be</p>	<p>Protection of all areas of importance for nature conservation. Protection and maintenance of as many open spaces as feasible and protection of as much of the Green Belt as possible.</p> <p>-</p>	<p>Site Allocations Document & Town Centre Area Action Plan - Preferred Options 2014 - adoption 2015</p>	<p>Mike Smith Regeneration Manager – Planning Policy With:</p> <ul style="list-style-type: none"> - Development Management - Development & Delivery - Green Spaces - Countryside Services - Finance 	<p>Consultations on Issues and Options during 2013. Draft plans currently being worked up in preparation for public consultation in 2014. This will include evidence gathering, assessment and discussion with the necessary colleagues.</p>

possible). Establish a Community Infrastructure Levy (CIL) Regime to provide a source of funding for open space maintenance and improvements.	Maintenance and improvement of open space.	<ul style="list-style-type: none"> • Draft CIL 2014 • Introduce charges 2015 		The borough's required infrastructure to be identified (including open space) and viability appraisal to be commissioned early 2014 to inform Preliminary Draft CIL Charging Schedule to go out to public consultation late 2014.
Apply planning policy consistently to support sustainable development for housing, employment, facilities etc. whilst protecting the environment and open space.	Sustainable development and an improving environment.	On-going.	Norman Hickson Regeneration Manager – Development Management With: <ul style="list-style-type: none"> - Planning Policy - Transportation - Development & Delivery - Pollution Control - Green Spaces - Countryside Services - Legal 	Consultation with key contributors continues to take place as part of the planning application process, to support the delivery of permissions in line with these aims, within the adopted policy framework
Ensure that proper account is taken of potential exposure to pollution, including air pollution and noise when taking planning decisions. Identify sensitive	Reduced exposure to pollution.	On-going.	Norman Hickson Regeneration Manager – Development Management With: <ul style="list-style-type: none"> - Planning Policy - Public Health - Transportation - Development & 	Securing specialist advice through the planning application process, to support the delivery of environmentally acceptable permissions in line with these aims continues to be integral to effective Development Management. Schemes resulting in unacceptable impacts will be resisted.

<p>receptors (housing, and health and education facilities and areas where there are existing or potential problems.</p>			<p>Delivery</p> <ul style="list-style-type: none"> - Pollution Control - Environmental Health - Environment Agency - Natural England - Health & Safety Executive - Highways Agency. 	
<p>Ensure that proper assessment of plans and proposals is undertaken where health impacts are likely and assessments are needed.</p> <ul style="list-style-type: none"> • Plans have to be at least screened for Strategic Environmental Assessment and where this is needed Council policy is that normally it should be part of a sustainability appraisal that includes Health Impact 	<p>Proper understanding of cases where there are potentially significant health impacts. Informed decisions.</p>	<p>On-going.</p>	<p>Mike Smith Regeneration Manager – Planning Policy and Norman Hickson Regeneration Manager – Development Management With:</p> <ul style="list-style-type: none"> - Public Health - Transportation - Development & Delivery - Pollution Control - Environmental Health - Environment Agency - Natural England - Health & Safety Executive - Highways Agency. 	<p>The first two stages of the Sustainability Appraisal (Scoping and Options Appraisal) have now been completed (including SEA, EqIA and HIA). The published SA Options Appraisal Report (April 2013) summarises the findings of the sustainability appraisal we have carried on the Issues and Options for the SAD and AAP. Further technical reports relating to the SA will be published when they become available as we progress the draft plans.</p>

<p>Assessment.</p> <ul style="list-style-type: none"> • Large scale developments might require an Environmental Impact Assessment which should include impacts on 'population' wherever relevant. • Many waste management proposals require an assessment under the Waste Regulations. 				
<p>Explore the possibility of making Cabinet decisions subject to a 'Health Impact Assessment' (in a similar way to the current Equality Impact Criteria)</p>	<p>Proper understanding of cases where there are potentially significant health impacts. Informed decisions.</p>	<p>April 2014</p>	<p>To be confirmed</p>	<p>This action has been explored by Planning Policy. However policies and legislation already exist to mitigate any adverse health impacts of development – including regulations requiring permits for potentially hazardous activities. Government's current approach is that development is a good thing, and the vast majority of planning applications do not have demonstrable adverse health impacts. Health Impact Assessments are only applicable in certain circumstances, and elements of these are</p>

				<p>already covered by, for example, Equality Impact Assessments.</p> <p>However, rather than applying this action in relation to planning for healthy and sustainable communities, there may be more merit in considering the addition of a 'Health Impacts' to council reports (CMT, Scrutiny, Cabinet, Council etc)</p> <p>This would require a consideration of the potential Health Impacts of the recommendations contained in the report, in the same way as impacts on resources, citizens, legal, equality etc are already identified. A discussion with Constitutional Services would be required to take this forward.</p>
<p>Deliver the actions to meet the agreed priorities of the Walsall Economic Board</p>	<p>Support businesses to thrive and local people to gain work through:</p> <ul style="list-style-type: none"> - a well developed workforce with the skills employers need; - an infrastructure capable of supporting business growth; - improved business sustainability and growth; - improved external perceptions of the borough. 	<p>Various dates, to be agreed by Walsall Economic Board</p>	<p>Mark Lavender, Strategic Regeneration</p>	<p>The Regeneration Directorate, together with key partners and stakeholders have established and are delivering a range of services, including:</p> <ul style="list-style-type: none"> - Dedicated Employment Growth Team, who work to support the growth of new and existing companies throughout Walsall. - Dedicated Skills & Employment team, who work to reduce unemployment rates and improve work related skills by developing and delivering programmes like: The Walsall Works Apprenticeship Scheme. - Dedicated Development, Delivery and Planning teams, who work to bring forward appropriate sites for active development (e.g. the BC Enterprise Zone) and operate a Business Friendly Planning service for owners and

				<p>developers to maximise take up etc.</p> <ul style="list-style-type: none"> - Transport Teams who develop and deliver schemes to move people and products around and open up land for development, including schemes like: The Darlaston Access Programme associated with the Enterprise Zone. <p>The delivery of the Invest Black Country (IBC) Programme, which raises the profile of Walsall nationally and internationally as an investment location for new businesses and a place to live and do business with.</p>
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Section 9: Creating and developing healthy and sustainable places and communities

Progress report on action plan for Health and Wellbeing Strategy key recommendation number 12

Key recommendation:

Work with the Area Partnerships and through the other community based initiatives to develop and implement an assets-based approach to community engagement and active involvement in the life of their community.

Overall named lead responsible for action: Jamie Morris Executive Director Neighbourhood Services

Partners involved: Multi-Agency across each of the six Area Partnerships

Action	Intended outcome(s)	By when?	Named responsible lead	Progress to date (or if expected progress not made, give explanation)
1. Each Area Partnership to identify a health priority specific to their locality and in cognizance with other health actions contained within their refreshed Area Plans.	Evidence based health priority identified.	April 2013	Head of Communities and Partnerships/Partnerships Manager	Each Area Partnership has identified an issue to focus on, based on the Area Health profiles and individual meetings with Public Health colleagues. Completed
2. Each Area Partnership to establish a team/task and finish group to scope and deliver an assets	Multi-agency team established with specific terms of reference.	May 2013	Area Managers/Public Health leads.	Completed - each Area Partnership has established support network in relation to topic.

Action	Intended outcome(s)	By when?	Named responsible lead	Progress to date (or if expected progress not made, give explanation)
based action plan				
3. Multi-agency team to develop an assets based action plan	Draft Action Plan produced (in line with the specific terms of reference for the task and finish group) for consultation with partners	September 2013	Area Managers/Public Health leads	Ongoing discussion within each Area Partnership in relation to their identified issue. Action plans are dynamic Completed
4. Draft assets based action plan finalised.	Draft assets based action plan finalised for consultation with the Health and Well Being Board	October 2013	Area Managers/ Public Health leads.	Completed, as per report to HWB on 21 st Oct 2013
5. Delivery against each Area Partnerships assets based action plan.	Assets-based approach to community engagement and active involvement in the life of their community.	Ongoing	Area Managers/Public Health lead.	Ongoing and progress being made
6 Review of each Area Partnerships assets based action plan	Evaluation of an assets based approach	October 2014	Head of Communities and Partnerships/Partnerships Manager	Ongoing and progress being made
7. Roll out of an assets based approach beyond single identified issues within each Area Partnership.	An assets based approach to improved health outcomes becomes embedded as a way of working	October 2014	Director of Neighbourhood Services/Director of Public Health	Ongoing and progress being made

Section 11: Reducing the burden of preventable disease, disability and death

Progress report on action plan for Health and Wellbeing Strategy key recommendation number 15

Key recommendation: 15

Ensure Walsall Clinical Commissioning Group and Walsall Council's commissioning plans take proper account of the priorities of the Health and Wellbeing strategy, in particular actions to improve the health of the poorest fastest and to address the health needs of men in order to reduce the life expectancy gap

Overall named lead responsible for action: Walsall CCG Chair and Accountable Officer (CCG Improving Outcomes Board)

Partners involved: Public Health, Social Services, Walsall Healthcare Trust, Dudley and Walsall Mental Health partnership Trust

Action	Intended outcome(s)	How will you measure improvement?	Progress
Ensure that people are appropriately supported in both the diagnosis and subsequent management of chronic conditions in order to increase healthy life expectancy	Improved quality of life for people with long term conditions(LTCs) Reduced LTC admissions and Length of Stay in hospital	GP patient survey - measures the proportion of people feeling supported to manage their long term conditions	This measure is based upon a single question in the national GP Patient Survey, and reports the proportion of patients with a long-standing health condition that felt they received enough support to manage their condition. GP Patient Survey analysis for the CCG overall shows that the proportion of people feeling supported to manage their long term conditions improved from 82.88% (June 2013) to 82.99% (December 2013). Nationally for England as whole, results for the same period reduced marginally from 84.47% to 84.45%. There is variable performance across the 4 GP localities in this measure but as a consequence of applying CCG improvement approach, the availability of data at CCG, locality and practice level and clinical leadership the Trans Walsall GP Locality has improved its performance from 73.45% in June 2013 to 77.45% in December 2013, an increase of 4%.

	Improved number of people who have enrolled onto self-help programmes e.g. diabetes self-help programmes	% of newly diagnosed patients with type 2 diabetes in Walsall that are actively involved in diabetes self-care management	<p>This is a local measure, selected for inclusion in the 2013-14 CCG quality premium set, thereby identifying it as a high priority for the CCG, in terms of improving outcomes for patient diagnosed with type 2 diabetes. The end of year target is set at 40%.</p> <p>As of Q3 (end of December 2013). 44.1% of newly diagnosed patients with type 2 diabetes have been actively involved in diabetes self-care management. We continue to explore ways to improve on this % including working with community groups.</p>
	Increased opportunities to improve LTC self-care through patient education programmes and telehealth.	A reduction in the unplanned hospitalisation for chronic ambulatory care sensitive conditions (adults)	The focus of the improvement for this measure is to target patients with a primary diagnosis of COPD as this is the most prevalent condition for patients presenting with chronic ambulatory conditions. Initial data suggests that 17 episodes have been prevented for COPD admissions.
		Number of people with diabetes who have received all nine care processes	<p>The national diabetes audit 2010-11 Report 1 - Care Processes and Treatment Targets (this is the most recent publication available) showed Walsall achieving 56.5% (all ages type 2 diabetes) ranking the CCG below the national quartile , however <u>individually</u> the 9 care processes recorded score well with the exception of eye screening where we scored 76.3% overall all, compared to a national score of 83.4%, thereby ranking us in the 4th national quartile.</p> <p>We are working with GP's to ensure that they are reminding patients about the importance of attending their yearly checks including dietary and podiatry checks .The call and recall appointments for the Diabetic Retinal Screening Service (DRSS) will be generated by the coordinating service which will be commissioned via NHSE. The CCG continue to work with NHS England in ensuring robust systems are in</p>

			place with regard to the call and recall process for all patients diagnosed with diabetes to attend screening. The CCG are confident that the publication of the forthcoming National Diabetes Audit will demonstrate improvement with regard to this standard.
Reduce all age, all cause mortality rates by 7.3% so that these equal the rest of England through early detection and early treatment of disease	Fully developed Risk Stratification process in place across Primary Care	Potential years of life lost (PYLL) from causes considered amenable to healthcare	<p>During 2013/14 the CCG has implemented Risk assessment, risk stratification and active case management for patients in all 11 Walsall PNHs who are at greatest risk of hospital admission.</p> <p>The second stage is to extend this approach to residential care homes in Walsall</p> <p>In addition we are also working with WHT to improve level of community nursing support to primary care and as part of this developing the approach further.</p>
	A Multidisciplinary approach to active case management	Reduction in avoidable emergency admissions	Emergency Admissions have increased by 9.5% in the first 8 months of 2013/14 compared to the same period in 2012/13. A national target reduction of 15% reduction in avoidable admissions has been set for the Better Care Fund and the BCF Plan sets out the approach to this in Walsall.
	Reduce premature mortality from major causes of death	Under 75 mortality rate from cancer	In order to evidence the progress we are making with pathway redesign including early identification of patients at risk, we have introduced a proxy measure based on secondary user service data (data recording tool) that records the actual number of patients who have been admitted with cancer who subsequently died in hospital. This is captured on a monthly basis and is only available from hospital data in year but enables us to track improvement.

			The aim for this measure is to improve on last year (6.4 patients on average/month) the average for the first 9 months for 13-14 = 3.7 showing an improvement.
	Promoting the “wellbeing and prevention of suicide Strategy “ ensuring implementation across the Borough	The proportion of people that enter treatment against a level of need in the general population i.e. the proportion of people who have depression and/or anxiety disorders who receive psychological therapies	<p>This service commissioned from DWMHT, is over performing on the number of people who receive psychological therapies (4631 at end of Dec compared to a target of 4320). In addition the percentage of people completing treatment programmes is 54.6% compared to target of 50.5%.</p> <p>Increasing access to talking therapies has seen the use of not only NHS primary care talking therapies but also the use of the voluntary sector to increase the access and reduce the stigma attached to mental health conditions. For the last 12 months we also trailed the use of online talking therapies for adults however this didn't prove effective for Walsall with the majority of people preferring the face to face contact that traditional talking therapies provides. We have improved access to talking therapies for children and adolescents by increasing the resource to the voluntary sector and investing in technology in providing a 'safe space' on line where children can access peer group support and on line talking therapies</p>
	Reduce premature death in people with serious mental illness	People with severe mental illness who have received a physical health checks	In relation to people who have Severe mental ill health there is a direct correlation between premature death and the severity of Mental Health ill health with increased numbers of those having obesity, diabetes and CHD. To ensure people have access to timely treatment and preventative interventions we have introduced a CQUIN for the last 12 months in partnership with DWMHPT which ensures people who are inpatients have a physical health check at least every 12 months and for those who are patients in the community that the trust facilitates an annual physical health check

			<p>via the patients GP.</p> <p>We have KPIs in place for which the Trust reports monthly on the % of patients who have had an annual physical health check – we are happy to report that this is almost always 100% of patients.</p> <p>We are further exploring options to prevent the onset of disease via new and upcoming drug treatment for psychosis which do not have the side effects that we have seen in the past to cause weight gain and the subsequent co morbidities. We will report more on the outcomes of these new drugs as the pilots progress</p>
Further narrow the gap between male mortality and female mortality rates by targeting services and support accordingly	A reduction in mortality from all cardiovascular diseases (including heart disease and stroke)	Percentage of referrals received via Lifestyle Link resulting from Making Every Contact Counts interactions with WHNHST and DWMHPT frontline staff (excluding WHNHST Lifestyle Services staff) that are for males. Referrals will be for smoking cessation, weight management (including exercise), mental health and alcohol	<p>Making Every Contact Count</p> <p>The target is for 60% of contacts through lifestyle links in the workplace to be male. The baseline was 30% based on 12-13. The trajectory was set at 52.5% and actual performance was 57.9% year to date as at end of Q3 2013/14</p>
		Under 75 mortality rate from cardiovascular	<p>On target for year to date. Monthly average for baseline year was 6.4. Average for first 9 months 2013-14 is 3.7</p>

Section 12: Healthy ageing and independent living

Progress report on action plan for Health and Wellbeing Strategy key recommendation number 16

Key recommendation: Ensure co-ordinated provision of health and social care services to reduce unnecessary admission to hospital and timely discharge focusing on recovery and re-enablement

Overall named joint leads responsible for action: Walsall CCG Accountable Officer and Walsall MBC Interim Director of Adult and Social Care services

Partners involved: Walsall MBC Social Services, Walsall Healthcare Trust, Dudley and Walsall Mental Health partnership Trust

Action	Intended outcome(s)	How will you measure successful completion?	Progress to date (or if expected progress not made, give explanation)
Improve quality of life for older people and enable individuals to be independent for as long as possible in the setting of their choice	Improved quality of life for older people	Percentage of people who leave their homes once a week or less Number of older people 65+ receiving 10 or less hours of care in their own homes	This will be obtained by annual survey. The aim is to reduce the number of people with 10 hours or less, particularly those living in extra care schemes. The ASC&I Directorate is currently identifying these cases with a view to reviewing them to check whether they need this care.
	Reduced excess winter deaths by building on the current work to immunise vulnerable groups	Population vaccination coverage flu aged 65+	After a slow start the coverage improved to be close to the same level as last year. Percentage uptake for everyone over 65 is 70.1% compared to 71.5% in the same period last year (the population has increased by 1,665 in this period). Percentage uptake for those over 65 'at risk' is slightly higher compared to

<p>Develop a systematic and multi-agency approach to falls and fracture prevention through focusing on preventing falls through activities that improve stability, mobility, flexibility and coordination over the life course</p>	<p>Reduced numbers of falls</p>	<p>Incidence of Falls and injuries aged 80+following falls assessment</p> <p>Incidence of Hip fractures in over 65s</p>	<p>the same period last year at 50.8% to 49.9%. National figures for these are 66.5% and 44.0% respectively. ('At risk' refers to those people with chronic/long term medical conditions, diabetes or where there are problems with the immunity system.)</p> <p>There has been a sustained decrease in the number of falls reported by patients whilst in hospital, a total of 400 falls without significant injury were reported by WHT between April 2013 and November 2013, and 11 falls resulting in serious injury between 1st April 2013 and 31st January 2014</p> <p>DWMHT have reported 6 incidents where a patient sustained serious injury following a fall between 1st April 2013 and 31st January 2014.</p> <p>Incidence of falls and outcome of investigations are monitored monthly by WCCG through CQR.</p> <p>A number of apprentice's have been employed by WHT in supervisory roles to assist patients at risk of falling, this work is in its infancy, however to date it appears to have had a positive impact, with no falls resulting in serious injury reported since November 2013.</p> <p>Falls awareness training is provided, and is mandatory for ward based staff.</p> <p>All falls are reviewed by Heads of Nursing and falls resulting in serious injuries or where a patient has a repeat fall are fully investigated.</p> <p>Learning from all investigations is reviewed through the falls steering group which meets monthly, and options for further improvement are identified through this group. A member of WCCG attends the falls steering group.</p> <p>Weekly peer review audits are completed on in-patient wards during which falls assessments and care plans are reviewed to</p>
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<p>Support older people to live more independently and remain in their own homes.</p> <p>Enabling more people to die in the place of their choice</p>	<p>More people dying in place of their choice</p>	<p>Proportion of patients recovering to their previous levels of mobility/walking at 30/120 days(PROMS)</p> <p>Number of delayed transfers of care from hospital which is attributable to adult social care</p> <p>Proportion of people dying in their preferred place of death</p>	<p>ensure that they are appropriate and reflect level of risk to each patient.</p> <p>DWMHT have revised the falls assessment tool in line with the FRASE tool, falls in mental health are mostly reported in the older adult service, where patients have a number of other co-morbidities. It is mandatory for staff to attend falls awareness training.</p> <p>PROMS is published on an annual basis at national level and is not available at regional or local level.</p> <p>Delayed discharges are reported monthly via The Manor and is calculated as the number of acute patients delayed as a % of occupied acute beds at midnight on the last Thursday of the reporting period with a target of less than 3.5%. Walsall's figures have not breached the target for the last three years and the numbers attributed to social care are in single figures each month.</p> <p>We are currently monitoring our achievement of patients preferred place of care retrospectively (post death) for the Community Specialist Palliative Care Team and Specialist Day Hospice. This is recorded via our End of Life Dashboard on a monthly basis and presented to End of Life Strategic Delivery Group and Quality and Safety Committee every three months. We have also begun auditing 20 deaths per month both in the Community and acute setting and preferred place of care is an element of this but we have only begun capturing this a few months ago.</p>
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<p>Enabling carers to feel adequately supported in their role</p>	<p>Enhancing the quality of life for carers</p>	<p>Percentage of carers identified on practice registers</p>	<p>This work hasn't started yet. Carers Partnership Board is to revisit.</p>
<p>Provide the support needed to enable individuals to keep as well as possible in their old age and out of hospital</p>	<p>Reduced hospital admissions and readmissions of older people</p> <p>Patients and carers are adequately supported</p> <p>The healthy body, healthy mind message is reinforced at</p>	<p>The percentage of people who have had a stroke who are discharged from hospital with a joint health and social care plan</p> <p>Emergency readmissions within 30 days of discharge from hospital</p> <p>Emergency admissions of older people (65+) for acute conditions that should not usually require hospital admission</p>	<p>The percentage of people who have had a stroke who are discharged from hospital with a joint health and social care plan is reported via WHT NHS contract score card and has been reported as 100% every month.</p> <p>The number of emergency re-admissions has been increasing over the winter period and key partners are conducting a further audit to identify actions for reducing avoidable hospital re-admissions.</p> <p>Emergency Admissions have increased by 9.5% in the first 8 months of 2013/14 compared to the same period in 2012/13. A national target reduction of 15% reduction in avoidable admissions has been set for the Better Care Fund and the BCF Plan sets out the approach to this in Walsall.</p> <p>Making Every Contact Count The target is for 60% of contacts through lifestyle links in the</p>

