

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
7		Learning Disabilities JSNA The initial scoping is focusing this JSNA on those with a learning disability aged 16+.		X	X	X	X	X	TBC	TBC	JSNA Strategic Group	WCC	Currently being scoped with stakeholder group	2024	not yet started	
8		LGBTQ+ JSNA The scoping is initially looking at what data we are able to pull together on the protected characteristics of our population in relation to LGBTQ+ and producing a literature review on the health needs of this population.	X	X	X	X		X	TBC	TBC	JSNA Strategic Group	WCC	Currently being scoped with stakeholder group	2024	not yet started	
9	Development and delivery of Better Care Fund Plan for 2023-25	Joint activity through the Better Together Programme is delivered and supports more people to <ul style="list-style-type: none"> •live independently at home for longer; and •receive the right care in the right place at the right time. 			X		X	X	2	4	Joint Commissioning Board (transitioning to Warwickshire Care Collaborative)	WCC/ICB	2 Year BCF Plan produced and met national moderation and assurance requirements, supported by a 2 year section 75 agreement. Good progress made implementing priorities, particularly the new Community Recovery Service. Q3 Performance against national metrics: - Admissions Avoidance - Over/worse than target. - Discharge to usual place of residence - On target - Residential admissions - Over/worse than target - Reablement - On target - Falls - Over/worse than target but much better than previous years	2023/24	in progress	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
10	Delivery of Joint Health and Housing Action Plan	a. Ensuring there is an integrated approach to Housing, Social Care and Health where housing is embedded into health and social care pathways					X	X	2	3	Housing Partnership Board	WDC / NWBC	The 2 year Housing Partnership Board details the joint and integrated approach between health, housing and social care. Central to this are the Housing Hospital Liaison Officers, with funding from the BCF now extended to March 2025.	2023/24	in progress and on target	
11		b. Early intervention activities before the point of crisis			X				2	3	Housing Partnership Board	WDC / NWBC / WCC	The switchover from analogue to digital for lifeline and other assistive technology devices provided by the District, Boroughs and County Council is in progress to meet the 2025 deadline. In addition, AT pilots continue to test new ways of working and evaluation will inform future options.	2023/24	in progress and on target	
12		c. Supporting people smoothly transition into more appropriate housing			X				3	4	Housing Partnership Board	WCC	Significant progress has been made in 2023/24 to provide targeted support and housing for people with more complex needs including: -transient and newly arrived communities through workforce training and development to understand their specific needs, - the development/maintenance of a pipeline of housing options, - regular demand and capacity mapping (including inpatient mapping) to meet more specialist needs, particularly for people with LDA/PD or those supported through the Transforming Care Programme, - resolution of issues with the DFG Protocol for individuals with LDA.	2023/24	in progress	
13		d. Improving choice and access to appropriate housing support, advice and information			X				3	4	Housing Partnership Board	WCC	As part of our focus on Green Homes we have been working together to prevent ill-health caused by poor housing and living conditions by providing practical advice and information relating to damp and mould, working on ensuring homes have EPC certificates and promoting information and advice provided by Act on Energy. The Accommodation Related Support Service has been re-designed and re-tendered ready for a new contract to commence later in 2024. Hoarding, deep cleaning due to self-neglect is also becoming more of an issue.	2023/24	in progress and on target	
14		e. Increasing Housing Adaptations through effective use and monitoring of the Disabled Facilities Grant (DFG)			X				2	5	Housing Partnership Board	NWBC	Following extension of the multi-agency HEART Partnership for a further 5 years in April 2023, housing adaptations using the DFG continue to support both discharge, which is not means tested, and people in the community. Work is also underway to maximise use of the DFG in 2024/25 by increasing staff resources.	2023/24	in progress	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
15		f. Co-ordinating homelessness prevention activities			X				3	5	Housing Partnership Board	WCC	The Homeless Strategy Group are/has: - reviewing the dual diagnosis policy, new dual diagnosis workers are in place, - completed the call for evidence for the Drug Needs Assessment, - focussing on expansion of the Physical Health Nursing Outreach Service, - evaluating impact of the GP drop in clinic - refreshing the Preventing Homeless Strategy, - have finalised and rolled out training on the Warks Young Person's Protocol, - established a Drug and Alcohol Strategic Partnership Board, and are now implementing the priorities in this plan	2023/24	in progress and on target	
16	Community Recovery Service	Deliver the Warwickshire intermediate care frontrunner pilot and demonstrate the following outcomes: • Increase the number of people receiving rehabilitation and recovery services after an acute hospital admission • Decrease the need for long term care by decreasing demand and acuity • Reduce the length of stay for people in an acute hospital who should be at home (or in a more appropriate community bed-based care)					X	X	3	5	Joint Commissioning Board	WCC/SWFT	The national front runner pilot was for 12 months to the end of March 2024 and this has now been completed. Lessons learnt from the pilot have been collated and are being shared amongst the 6 pilot areas and with NHSE to continue to inform the development of intermediate care nationally. Outcomes from the pilot currently show: - a significant increase in the number of people receiving therapy, and - a reduced length of time in hospital and in sourcing packages of care In terms of decreasing the need for long term care and decreasing demand and acuity - it is not possible to clearly evidence this yet. The intention is to now locally continue the pilot for a second year, with funding primarily from the Discharge Fund to enable the impact to be properly understood.	2023/24	Completed	
17		Continue operating within current Section 75 arrangements including the Better Together programme, integrated community equipment, RISE, Discharge to Assess and residential care.	X	X	X		X	X	2	3	Joint Commissioning Board	WCC/ICB	Separate section 75s are currently in place. For the BCF a 2 year s75 to March 2025 has been agreed, whilst the new Care Collaborative and Integrated Care System takes more shape.	2023/24	Completed	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
18	Development of section 75 agreements to support joint commissioning activity	Progress the establishment of a Section 75 for Health Visiting Services subject to public consultation and partnership decision making processes.	X		X				4	4	Joint Commissioning Board	WCC	Extension to the current contract has been agreed. Further work underway to support decision making regarding future arrangements.	2023 - 25	Work continues	
19		Progress work to consider the development of an overarching Section 75 arrangement for joint commissioning activity.							2	4	Joint Commissioning Board	WCC/ICB	Area of focus commencing in April 2024	2024/25	Not yet started	
20		Priority 1: Improving access to services Flagship project example - Frailty Community Hub			X				3	4	Warwickshire North Health and Wellbeing Partnership and Place Executive Group	RWN PCN	<ul style="list-style-type: none"> Health Intent frailty dashboard has now been launched, which gives the ability to generate real time lists of relevant patients. The clinic base has now moved to new premises in Hartshill, which has allowed a move to weekday clinic sessions, increasing capacity within the service. Identified patients from all 6 practices in the PCN are being invited in for their assessment and care planning. Recruitment of therapy posts is underway. Plans to support embedding personalisation with the team are progressing. Links have been made with Think Active to explore a potential joined up approach incorporating learning around the role of activity in health outcomes. Initial figures on use of the frailty clinic for proactive care have been compiled. Data on the use of primary care before and after the clinic has been included. Work is underway to match hospital data to the cohort who have completed the proactive care intervention to monitor the impact on secondary care. 	2024/25	On track	
21		Priority 2: Improving mental health & wellbeing Flagship project example - Suicide Prevention			X					3	3	Warwickshire North Health and Wellbeing Partnership and Place Executive Group	PH	<ul style="list-style-type: none"> Service review of existing postvention support service underway. Ongoing development of Suicide Prevention Delivery Plan: 2 year high level actions to support SP Strategy. WCC Suicide Prevention lead (Hannah Cramp) to attend future WN Place Coordination meeting to explore place-based approach to suicide prevention delivery. Permanent recruitment of Real Time Surveillance Coordinator post. Market testing for postvention support service Jan/Feb 2024 - with full tender process. 	2024/25	On track

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
25											Warwickshir		<p>to heart failure patients on virtual wards.</p> <ul style="list-style-type: none"> •5 Successful meeting with wider DNA project – Deep Medical/volunteer team/outpatients team etc to discuss milestones etc. •723 hours of responder volunteer support provided across 653 tasks in most recent month. •26 out of hours driver deliveries of medication. •84 hours of comfort calls volunteer support provided. •850 Patients “successfully” contacted by calls. •5 internal referrals (within GEH). •13 External referrals - Health Exchange, Age UK and others. 			
26		Priority 5: Promoting and improving healthy lifestyles and reducing the burden of long-term conditions Flagship project example - Cardiovascular Disease Checks			X				3	3	Warwickshire North Health and Wellbeing Partnership and Place Executive Group	GEH	<ul style="list-style-type: none"> • CVD Community ‘Healthy Heart Checks’ Weekly Events have now been taking place across Warwickshire North targeted to community venues highlighted as being within CORE 20 LSOAs. September Start. With this patient referrals are continuously being processed through to Primary Care who are picking up patients that trigger further intervention. • As well as outreach events which are already underway, Project Team have now agreed on 3 UCL Cohort Groups to focus Primary Care Engagement. Rolled out best practice guidance and communications to aid PCN targeted approach, led by Primary Care Stakeholders. • Agreed with ICB, project extension to run through 24/25 financial year with available funding to support continuation of services. • Project Outcome Reporting: an outline of required data sets has been agreed by project leads and primary care, to ensure outcome data, timelines etc. support INHIP and NHS England Reporting. • The CVD Project has Evaluation Partner under contract discussions with Warwickshire County Council Business Intelligence Team, with Interim Evaluation Report agreed for March once contract formally signed. • Working with PCNs to share update on project processes and involvement needed in next steps, with continuous GP communications circulated. 	2024/25	Some issues with a plan in place	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
27		Overarching priority: Reducing health inequalities Flagship project example - VISO Hypertension Remote Monitoring			X				3	3	Warwickshire North Health and Wellbeing Partnership and Place Executive Group	N&B PCN	<ul style="list-style-type: none"> • Invoice to the ICB for Health Inequalities funding has been paid. • 121 patients enrolled to Viso up by 24 in the last reporting period. • 3 patients from Groups 2b only from Manor Court & Red Roof's Surgery. • 37 patients from Group 3a covering Bulkington Surgery, Manor Court & Red Roof's Surgery. • 80 patients that are Hypertensive across Bulkington, Manor Court & Red Roof's Surgery. • The number of patients enrolled has now activated access to the Quicksight reporting tool to commence data analysis of enrolled patients. • Developed joined up approach to CVD project; onboarding suitable patients identified through community HC. • Arranging next wave of Viso training for new stater clinical pharmacists to increase resource for managing patients on Viso dashboard. • Care Coordinator process flow is being followed for patient enrolment and engagement. • EMIS protocol now live to alert clinicians when a patient is enrolled to Viso - prompting them to use the Viso dashboard for patients' Hypertension management. 	2024/2 5	On track	
28		Tackling Social Inequalities Strategy (TSI)- producing proposal and allocation of funding aligned to the TSI priorities	X	X	X				2	1	Rugby Health and Wellbeing Partnership	RBC	RBC and WCAVA led on the development of a proposal outlying how the Rugby Partnership would allocate the £28,164. The proposal splits the funding between the three priorities of the TSI Strategy. The funding will support: mental health first aid awareness and the On Track Youth Programme (priority 1), community transport scheme (priority 2) and a DWP Job Fair and Employability Workshop and Hardship Fund to support more disadvantaged areas as identified in JSNA (priority 3). The proposals are now moving into delivery.	2024	On-track	
29	Delivery Rugby Place Plan	Task and Finish Group led by Warwickshire Community and Voluntary Action (WCAVA) looking at children's mental health support provision	X	X					2	3	Rugby Health and Wellbeing Partnership	WCAVA	This has been incorporated into the TSI projects (highlighted above)	2024	some delays	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
30		Alignment of Place Plan priorities (e.g. town centre regeneration and access to services) with Levelling Up/Creating Opportunities Plan			X	X			2	3	Rugby Health and Wellbeing Partnership	RBC	Developed a proposal for health on the high St. Approval of levelling up approach at RBC cabinet. Further work on alignment of Place Plan with LU to be undertaken in 24/25	24-25	On-track	
31		Carers Place Innovation Fund			X				3	3	Rugby Health and Wellbeing Partnership	RBC/WC AVA	Two bids have been received and circulated for comment. TK and TS have confirmed support for both applications.	24-25	On-track	
32		Recruitment of place officer					X		N/A	1	Rugby Health and Wellbeing Partnership	SWFT/U HCW	Job description for a joint role across SWFT and UHCW has been created and comments from Rugby Partnership received. The role will support Rugby Partnership in delivering on its priorities. Aim is to recruit in next three months.	24-25	On-track	
33		Piloting PHM approaches to identify patients with diabetes and associated conditions to then support through a virtual Multi-Disciplinary Team			X				4	1	South Warwickshire Place Partnership	WCC/ICB	Complete - Final report and next steps produced on pilot which was part of wider system Transformation programme.	23/24	Complete	
34		Piloting of the Tribe digital platform to connect vulnerable people to local services and volunteers	X	X	X				3	3	South Warwickshire Place Partnership	WCAVA	Complete - final report and lessons learned being produced	23/24	Risks, plans in place	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
35	Deliver South Place Plan	Delivery of an Innovation Fund to support all-age carers	X	X	X				3	3	South Warwickshire Place Partnership	WDC/W CAVA/S WFT	Delivery - Application window closed March 2024. Applications currently being assessed	24/25	On-track	
36		Piloting home efficiency grants for patients with long-term conditions		X	X				3	1	South Warwickshire Place Partnership	SDC	Delivery - currently finalising pathway documentation, training and processes	24-25	On-track	
37		Improving respiratory health in Lillington through a new Housing & Health role, improving smoking cessation, vaccine uptake and piloting free swimming for children with asthma	X	X					3	TBC	South Warwickshire Place Partnership	WDC	Delivery - new health and housing role started April 2024	24-25	On-track	
38		Allocation of funding aligned to the Tackling Social Inequalities Strategy to piloting a new CYP MH prevention role within primary care	X	X	X				3	TBC	South Warwickshire Place Partnership	SWGPs	Re-scoping pilot to support TSI objectives and feedback from CWPT. Leamington North PCN identified as pilot area for an initial MH post	24/25	Significant delay, plans in place	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
39		Scoping a proactive care pilot in a rural PCN to support moderate to severe frailty with long-term conditions		X					3	TBC	South Warwickshire Place Partnership	SWFT	Scoping - Reviewing evidence and engagement to inform next steps	TBC	Risks, plans in place	
40		Scoping ways to build MH resilience in communities		X	X				3	TBC	South Warwickshire Place Partnership	TBC	Not started. Due to commence scoping later in Q1	TBC	not yet started	
41		TBC Warwick District Levelling Up Plan			X				3	3	Warwick District Council	WDC	Scoping - Setting out structures for delivery, setting out engagement plan	24	not yet started	
42		Stratford-on-Avon District Growing Opportunities (Levelling Up) Plan			X				3	4	Stratford-on-Avon District Council	SDC	Action Plan live from 1 April 2024 but many green actions	24-25	On-track	
43		Strengthened social, emotional and mental health and wellbeing for Children and Young People	X	X		X			3	1 to 2	Children and Young People Partnership	ICB	Work planned to analyse the relationship between school attendance and the presence of mental health in schools teams. Peer mentoring service established to support children transitioning from children's to adults mental health services	24-25	not yet started	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
44	Oversight of the Children and Young People agenda via the Children and Young People Partnership	Promotion of healthy weight in Children and Young People and reducing childhood obesity	X			X			3	1 to 3	Children and Young People Partnership	WCC	Whole-systems approach to childhood obesity being scoped, with the end product an options appraisal to inform next steps. High priority schools (based on rates of BMI and deprivation) are being targeted for whole-school healthy lifestyle interventions. Pilot of free school meals to all primary school-aged children is in progress and evaluation of initial outcomes expected for September 2024.	2024-25	On-track	
45		Targeted support at the most deprived populations, suffering the most health inequalities.	X		X	X			3	-	Children and Young People Partnership	WCC	Maternal Circles pilot launched (March 24) in Nuneaton & Bedworth. To improve access and support for new parents most at risk of health inequalities.	2024-25	On-track	
46		Closer alignment of services (joined up working) and collaborative models of support including health, education, and voluntary/third sector. With an emphasis on social support and addressing stigma.	X			X			3	3 to 4	Children and Young People Partnership	WCC	Development of the Early Years Integrated Delivery Plan (see line 52).	24-25	On-track	
47		Health promotion/very brief advice is utilised as a key tool for early intervention and prevention.	X			X			3	2 to 3	Children and Young People Partnership	WCC	Children and Young People Making Every Contact Count training programme developed and first set of training has taken place with front line staff in different settings. Timetable to roll out the training further has been developed.	2024 - 2025	On-track	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
48	Development of Warwickshire Special Educational Needs and Disability (SEND) and Inclusion Strategic Partnership Group	Co-production and feedback from children, young people and parent carers is evidenced at individual and strategic levels.	X		X				4	5	Children and Young People Partnership	WCC	Warwickshire Parent Carer Voice and IMPACT (young people's group) are both part of the SEND & Inclusion Strategic Partnership Board. At project level, parents are engaged and represented on projects affecting changes to services and approach, as well as feedback from young people as appropriate. At an individual level, views are gathered through the family conversation at the point of the EHC plan being issued and each annual review.		On-track	
49		Co-ordination of the Self-Evaluation Framework	X		X				3	3	Children and Young People Partnership	WCC	The Local Area SEND Self-Evaluation has been drafted and presented to the Partnership Board. This has included feedback from parents and carers and young people. The document will continue to be reviewed and updated.		On-track	
50		Delivery of the SEND & Inclusion Local Area Strategy, building on the SEND needs assessment and self-evaluation.	X		X				3	2 to 3	Children and Young People Partnership	WCC	The Children and Young People's Strategy and Education Strategy include priorities and performance measures for children and young people with SEND. The SEND & Inclusion Strategy is in development to add further to these strategies.		On-track	
51		Develop a Local Area Inclusion Plan to deliver the vision and aims of the strategy; to strategically plan and deliver services and assess the quality and sufficiency of all elements of the SEND Local Offer.	X		X				3	2 to 3	Children and Young People Partnership	WCC	Based on the Self-Evaluation and the work from the Delivering Better Value Programme, a Local Area Inclusion Plan has been drafted.		On-track	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
52		Provision of strategic leadership to prepare for the Ofsted/CQC Area SEND Inspection.	X		X				2	1	Children and Young People Partnership	WCC	A logistics plan has been developed as preparation for inspection.		On-track	
53	Development and delivery of the Integrated Early Years Delivery Plan	Establishment of the Education Services Early Years Integrated Planning Group and accompanying Early Years Integrated Delivery Plan. This is in response to the Early Years Remote Peer Challenge Review (2023) and the 0-5 JSNA (2022).	X		X	X			3	3-4	Children and Young People Partnership	WCC	The first meeting on the IPG has taken place and terms of reference has been drafted collectively. A timeline for the development of the IDP has been created, with the aim of having the IDP prepared to take to CYP Partnership at the end of August, and HWBB in September. Delivery of the IDP will commence in the second half of this financial year. Prior to this, engagement will be undertaken with a range of key stakeholder including Parent Carer Voice, Early Years hubs, maintained nurses and schools with nurseries, and childminders	24-25	On-track	
54		Concordat approved by national team		X					3	-	Mental Health Provider Collaborative	CWPT	C&W system sign up approved by national team November 2023	2024	Complete	
55		System sign up to Concordat for better mental health		X					3	-	Mental Health Provider Collaborative	CWPT	Achieved November 2023	2024	Complete	
56		Launch of Mental health inequalities fund		X					3	-	Mental Health Provider Collaborative	ICB	Expressions of Interest launched October 2023	2024	Complete	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
57	Deliver the mental health concordat	Review of adult mental health and wellbeing offer in WCC		X					3	-	Mental Health Provider Collaborative	WCC	Initial review undertaken. Recommendations, report and dissemination process underway	2024	Underway / on track	
58		Launch of Mental Health and Emotional Wellbeing Board		X					3	-	Mental Health Provider Collaborative	CWPT	The MHEWB Board will be called the Coventry and Warwickshire Prevention Concordat for Better Mental Health Delivery Group. This group will be responsible for delivery of the Concordat and will report to the Mental Health Collaborative	2024	Complete	
59		Improving outcomes for people with SMI		X					3	1 to 2	Mental Health Provider Collaborative	CWPT	Annual physical health checks for people with SMI are increasing. Work underway to develop pathways to healthy lifestyle interventions and to pilot additional peer support.	2024	Underway / on track	
60		Wellbeing 4 Warwickshire service		X					3	1 to 2	Mental Health Provider Collaborative	WCC	A Health Equity Assessment is currently being undertaken for Wellbeing 4 Warwickshire, aiming to further address health inequalities.	2024	Underway / on track	
61		Launch place-based approach to suicide prevention and MH&WB		X					1	1	Mental Health Provider Collaborative	WCC	In development, with key links to Creating Opportunities work programme.	2024	Underway / on track	

	A	B	C	D	E	F	G	H	I	J	L	N	O	P	Q	R
62	Addressing health and healthcare inequalities	Refresh of the Integrated Care System (ICS) Health Inequalities Strategic Plan. Refreshed strategy outlines how transformation programmes will seek to reduce healthcare inequalities in line with the NHS CORE20PLUS5 framework.			X				1	1	Health Inequalities Delivery Group	WCC / ICB	All partners within the ICS have adopted a Health in All Policies approach, using key tools such as health equity assessment tool (HEAT) to understand inequalities related to key programmes of work and/or services and how to mitigate against them. The Healthcare Inequalities Strategy reports on specific NHS-led transformation programmes.	2024	Closed	
63		Delivery of the Health Inequalities Transformation Fund. The bidding prioritisation process is agreed through the Care Collaborative. Activity is funded at Place and aligned to place-based partnership priorities and the CORE20PLUS5 framework.			X				3	2 - 4	Care Collaboratives	WCC	Bids funded through Warwickshire Care Collaborative include: dedicated vaccination midwife to improve vaccination rates for pregnant women in Warwickshire North; mobile community clinic to support community access to a CVD secondary prevention heart failure service; enhanced physical health checks for UK armed forces veterans.	2024-2026	Underway / on track	
64		Embed Health in All Policies across HWBB partners this includes an evaluation of the impact to date. In 2024-25 there will be a theme-specific focus on the areas of Children and Young People, Transport, Green Spaces and Housing, to facilitate partnership work for health and health equity considerations.			X				3	1	Care Collaboratives	WCC	HWBB endorsed HiAP in March 2021, following this a number of HiAP workshops were delivered in collaboration with the LGA including to place based Health and Wellbeing Partnerships. HiAP toolkit was developed bringing together a range of resources including the Health Equity Assessment Tool and our local offer. HiAP has been embedded into the Strategic Framework, so all WCC strategies must consider HiAP.	2024	Closed	

