

**Borders NHS Board****LOCAL DELIVERY PLAN – ANNEX 6****AIM**

To provide members with an opportunity to review and approve the final version of Annex 6 of NHS Borders Local Delivery Plan 2010/11 (LDP).

**BACKGROUND**

All Boards submit an annual Local Delivery Plan (LDP) with a main focus relating to the delivery of the targets for 2010-11. As part of this process an additional element was introduced last year relating to the role of the NHS Board in the Single Outcome Agreement (Annexe 6). This year Annexe 6 has been revised to reflect the Board's role in the delivery of the SOA specifically in relation to the priority areas of the 3 social policies (Equally Well, Early Years and Achieving Our Potential) and economic recovery, encouraging action beyond the delivery of the HEAT targets. Annexe 6 will be covered in the 2010 Annual Review process self assessment stage and also during the Ministerial Review.

When the 2010/11 Local Delivery Plan was signed off at the April 2010 Board Meeting, it was noted that All Annex 6 sections (Additional Local Commitments to support Single Outcome Agreements) were being reviewed by the relevant policy teams across Scottish Government and SG will be providing specific feedback to all Boards outwith the conventional signing off timeframe of the LDP.

This feedback was received in early May, and while positive, requested further detail regarding some of the NHS actions and performance management arrangements.

The Annex has therefore been updated to reflect the feedback received, and is attached, for information. This was submitted to Scottish Government by 3<sup>rd</sup> June 2010 as per their timetable, as a draft subject to final Board approval.

**RECOMMENDATION**

The Board is asked to **approve** the final version of Annex 6 of NHS Borders Local Delivery Plan 2010/11 (LDP).

<b>Policy/Strategy Implications</b>	Strategy Implications to be led through the Health Improvement Partnership Board/New Ways Partnership /JPDGroup
<b>Consultation</b>	BET members and CHCP Joint Planning and Delivery Committee
<b>Consultation with Professional</b>	See above

<b>Committees</b>	
<b>Risk Assessment</b>	As each item is implemented risk, resource and other assessments are undertaken
<b>Compliance with Board Policy requirements on Equality and Diversity</b>	Has been considered at each local implementation stage
<b>Resource/Staffing Implications</b>	

**Approved by**

<b>Name</b>	<b>Designation</b>	<b>Name</b>	<b>Designation</b>
Dr Eric Baijal	Joint Director of Public Health		

**Author(s)**

<b>Name</b>	<b>Designation</b>	<b>Name</b>	<b>Designation</b>
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**NHS Board: NHS Borders**

**Community Planning Partnerships covered: Scottish Borders Region**

	<b>HEALTH INEQUALITIES</b>		
<p>What are the priority local outcomes for tackling health inequalities?</p> <p>What are the underpinning indicators or targets that support the delivery of the outcome?</p>	<p><b>1. 6.1 There is improved health and well-being of Borders residents (Strategic SOA )</b></p> <p><i>7.6 Health inequalities will be reduced in the Scottish Borders (Full SOA)</i></p> <p><u>Underpinning Outcomes and target for NHS action</u> – under development</p>	<p><b>2.6.2 There is a reduction in alcohol problems amongst young people and adults</b></p> <p><u>Underpinning Indicators</u> 06_2_P03 P05 (See attached)</p>	<p><b>3.8.2 Looked After and Accommodated Children and young people have the same life chances as others</b></p> <p><u>Underpinning Indicators</u> 08_2_P01-P07 (see attached)</p>
<p>What are the Board’s top 3 actions that contribute to each of these outcomes?</p>	<p><b>1a. <u>NHS Actions</u></b> To provide a range of health related programmes in 5 designated health inequalities localities. Borders Healthy Living Network (HLN) provided through recurring NHS/SBCouncil funding and delivered by NHS Staff alongside a range of partners. HLN has provided a lead implementation role in <i>Sharing the Challenge</i> (national initiative on community-led health) by organising a number of local events.</p>	<p><b>2a. <u>NHS Actions</u></b> NHS Alcohol and Drugs Partnership (ADP) commissioned Addaction Borders Family Service to work with families affected by substance misuse from Fairer Scotland funds. This service was developed from a 2008 needs assessment produced by ADP partnership.</p>	<p><b>3a. <u>NHS Actions</u></b> All of new Scottish Borders Council children entering care are appointed to attend the Borders General Hospital for a full health annual Assessment, the under fives with Borders General Hospital Ward 15 and school age children with the appropriate School Nurse. The (NHS) LAC Nurse picks up any children who fall through the net and currently planning a Health Assessment for Kinship Care children via home visits by the LAC Nurse.</p>
	<p><b>1b. <u>NHS Actions</u></b> To implement Anticipatory Care HEAT 8 health checks, Lifestyle Support Advisory Service and Counterweight. Services. These programmes are currently being reviewed with a view to delivery as an integrated service ensuring disadvantaged areas are prioritised. A business plan proposal is currently being produced.</p>	<p><b>2b. <u>NHS Actions</u></b> Addaction is commissioned by ADP to provide a preventative service to support families to deal with a range of issues, including stress and anxiety, nutritional advice, developing parenting skills.</p>	<p><b>3b <u>NHS Actions</u></b> The LAC Nurse provides a drop in clinic in residential and supported learning units as the vast majority of these young people are both vulnerable and LAC.</p>

**NHS Board: NHS Borders**

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	<p><b>1c. <u>NHS Actions</u></b>          To implement an Equally Well funded Learning Disabilities health improvement programme through a joint NHS/SBC Learning Disabilities service. A range of innovative health-related programmes have been developed with direct planning involvement and participation of service users.</p>	<p><b>2c <u>NHS Actions</u></b>          Borders ADP plan to host a local event examining the issues of families affected by substance misuse. The focus for the event will be on the needs of those affected by substance misuse problems within the family.</p>	<p><b>3c. <u>NHS Actions</u></b>          Training on a range of health topics for staff and foster carers is made available through NHS. The LAC Nurse provides a telephone link to advise and support those working with this group of children and young people.</p>
<p>How will the Board performance manage these contributions?</p>	<p><b>1d <u>Performance Management</u></b>          HLN monitors performance through a local database and regularly reports go to HI Partnership Board sub-group (Localities Group) which is responsible for performance management. HIPB reports to Joint Planning and Delivery Group (CHCP) which in turn provides regular monitoring reports to Borders Strategic Board.</p>	<p><b>2d. <u>Performance Management</u></b>          Performance is being managed by the Alcohol &amp; Drugs Partnership (ADP) Commissioning Group. ADP (NHS) staff who in turn commission and performance manage a variety of drugs and alcohol projects.</p>	<p><b>3d. <u>Performance Management</u></b>          Performance towards meeting the targets relating to LAAC is managed through the SBC Children and Young Peoples Planning Partnership with monthly monitoring and evaluation and through Children and Y. Peoples Health Network (CYPHN) bi-monthly performance review and bi-annual work plan monitoring and evaluation.</p>
	<p><b>1e <u>Performance Management</u></b>          Anticipatory Care programmes have local databases and are reported and performance managed as a HEAT target (Keep Well) and through HI Partnership Board and CHCP (JPDG quarterly report) This group reports directly to Borders Strategic Board.</p>	<p><b>2e. <u>Performance Management</u></b>          As above</p>	<p><b>3e <u>Performance Management</u></b>          As above</p>
	<p><b>1f. <u>Performance management</u></b>          Equally Well Learning Disabilities Programme/Learning Disabilities Action Plan is monitored through the Disabilities Partnership Board as part of the CHCP infrastructure (Joint Planning and Delivery Group).</p>	<p><b>2f. <u>Performance Management</u></b>          As above</p>	<p><b>3f. <u>Performance Management</u></b>          As above</p>

**NHS Board: NHS Borders**  
**Community Planning Partnerships covered: Scottish Borders Region**

	<b>EARLY YEARS</b>		
<p>What are the priority local outcomes for the early years?</p> <p>What are the underpinning indicators or targets that support the delivery of the outcome?</p>	<p><b>1.5.1 Children experience high quality early years provision</b>  <u>Underpinning Indicators</u>            05_1_P01-P09 (see attached)</p>	<p><b>2.8.1 Children grow up in a safe, homely environment</b>  <u>Underpinning Indicators</u>            08_1_P01 –P014 (see attached)</p>	<p><b>3.5.2 Children are fully supported by effective parents</b>  <i>This outcome is not in the strategic SOA but in the full SOA and not seen locally as a key priority. The key priority is LAChildren described in the health inequalities section.</i>  <u>Underpinning Indicators</u>            08_1_P01 –P014 (see attached)</p>
<p>What are the Board's top 3 actions that contribute to each of these outcomes?</p>	<p><b>1a. NHS Actions</b>            To increase Early Years support to vulnerable families through extra Surestart midwife provision (CEL36 funded as part of a co-located Early Years team), Infant Mental Health Worker posts, an Integrated Care Pathway for antenatal, postnatal care. Multi-agency training provided to embed health improvement.</p>	<p><b>2a. NHS Actions</b>            Multi-agency training is provided in child protection to achieve and maintain high levels of confidence and competence amongst staff across services. Supported by effective child protection procedures and policies being operated consistently by staff across NHS/SBC.</p>	<p><b>3a. NHS Actions</b>            A fixed-term parenting co-ordinator was appointed to build capacity through widening the range of parenting support services across SBC and NHS. This enabled links into staff working with vulnerable families including the 5 geographical disadvantaged areas. Each locality integration team has developed a parenting programme following a comprehensive training programme and establishment of a good practice network.</p>
	<p><b>1b. NHS Actions</b>            NHS provides Early Years support to the current SBC Early Years Review and joint work through NHS Children and Young People's network (CYPHN), role of Children's Service Manager and Children's HI post. This provides added value of ensuring health improvement outcomes embedded across priorities, outcomes and strategies developed and implemented within CYPHN workplan.</p>	<p><b>2b. NHS Actions</b>            To provide an integrated and co-ordinated response to domestic abuse in Borders via a service redesign project using the framework of prevention, protection, provision and participation and providing a single point of contact for all affected by abuse. This encompasses multi-agency frontline staff training in responding appropriately in addition to service assessment and redesign.</p>	<p><b>3b. NHS Actions</b>            NHS has a lead role in roll-out of national Play at Home programme through practitioners in NHS, Local Authority and voluntary sector who work in Childcare, Early Education, and Physical Activity. Training started in early February 2010.</p>
	<p><b>1c. NHS Actions</b>            Implementation Phase of Early Years</p>	<p><b>2c. NHS Actions</b>            NHS to implement the Integrated</p>	<p><b>3c. NHS Actions</b>            NHS Lead role in implementation of</p>

**NHS Board: NHS Borders**

**Community Planning Partnerships covered: Scottish Borders Region**

	framework part I and II demonstrating short term actions and medium term priorities and encompassing longer term objectives driven by CYPPP and CYPHN.	Assessment Framework with SBC. IAF Coordinator and IAF trainer have been appointed and the use of Integrated rolled out to all localities by February 2010. Multi-agency training has taken place fully supported by the NHS.	CEL 36 Infant/Maternal Nutrition Programme. Staff now in place developing Healthy Start and a revised Breastfeeding Strategy. Strategic group to be established to drive this work forward as multi-agency approach to this work is key.
How will the Board performance manage these contributions?	<b>1d. <u>Performance Management</u></b> SBC Children and Young Peoples Planning Partnership, (CYPPP) monthly monitoring and evaluation.	<b>2d. <u>Performance Management</u></b> The Child Protection Committee reports directly to SBC Children and Young People’s Planning Partnership through monthly monitoring and evaluation. NHS Director and Senior Management representation on CYPPP.	<b>3d. <u>Performance Management</u></b> Parenting Strategy Group and Strategic early year’s group report to SBC Children and Young Peoples Planning Partnership with monthly monitoring and evaluation.
	<b>1e. <u>Performance Management</u></b> SBC Children and Young Peoples Planning Partnership with monthly monitoring and evaluation and Children and Young Peoples Health Network (CYPHN) bi-monthly performance review and bi –annual work plan monitoring and evaluation.	<b>2e. <u>Performance Management</u></b> The Domestic Abuse forum reports to Children and Young People’s Planning Partnership with monthly monitoring and evaluation/ NHS Children and Young People’s Health Network bi-monthly performance review and bi-monthly bi–annual workplan monitoring and evaluation.	<b>3e. <u>Performance Management</u></b> Play at Home Programme is monitored through Physical Activity Forum which produced a 3 yr strategy that includes Sport, PE as well as increasing physical activity. This work will report regularly to Health Improvement Partnership Board.
	<b>1f. <u>Performance Management</u></b> SBC Children and Young Peoples Planning Partnership with monthly monitoring and evaluation and Children and Young Peoples Health Network (CYPHN) bi-monthly performance review and bi –annual work plan monitoring and evaluation.	<b>2f. <u>Performance Management</u></b> The Integrated Assessment Project Board reports to SBC Children and Young People’s Planning Partnership with monthly monitoring and evaluation as well as NHS Children and Young People’s Health Network bi-monthly performance review and bi-monthly, bi–annual workplan monitoring and evaluation.	<b>3f. <u>Performance Management</u></b> The work relating to implementation of CEL 36 is regularly monitored through Public Health Performance management arrangements. HI work will report through governance arrangements of Health Improvement Partnership Board.

**NHS Board: NHS Borders**  
**Community Planning Partnerships covered: Scottish Borders Region**

<b>TACKLING POVERTY AND SOCIO-ECONOMIC INEQUALITY</b>			
<p>What are the priority local outcomes for tackling poverty and socio-economic inequality?</p> <p>What are the underpinning indicators or targets that support the delivery of the outcome?</p>	<p><b>1.3.2 Life circumstances are improved by maximising participation in education, training and employment, especially amongst people who are economically inactive.</b></p> <p><u>Underpinning Indicators</u> 03_2_P01-P17 (see attached)</p>	<p><b>2.7.2 There is a good supply of high quality affordable housing</b></p> <p><u>Underpinning Indicators</u> 07_2_P01-P06 (see attached)</p>	<p><b>3.7.3 There are fewer people living in poverty</b></p> <p><u>Underpinning Indicators</u> 07_3_P01-P07 (see attached)</p>
<p>What are the Board's top 3 actions that contribute to each of these outcomes?</p>	<p><b>1a. NHS Actions</b>  NHS provides support to the SBC Employability pathway through raising the awareness and identifying key role for NHS staff. SB Council currently working on an Employability Pathway. NHS will play an active part in this pathway along with other non-employability services, to encourage NHS frontline workers to refer their clients into the employability pathway and take a holistic approach to recovery.</p>	<p><b>2a. NHS Actions</b>  NHS Borders does not hold areas of surplus land which may be used for housing development, although through the SBC Local Plan, which identifies areas throughout the region where such development will be permitted, NHS Borders does work closely with SBC to ensure Primary Care services will reflect future demand. Any surplus properties, of which NHS have few, the most recent being a number of cottages in Melrose, these were disposed of following the NHS Scotland Property Transactions Handbook, the procedures within same ensure that other public bodies are offered an opportunity to purchase before property is placed on the open market. These properties were sold to a Housing Association for use as affordable housing. The Borders Region is well served by such Associations, (Registered Social Landlords), managing a stock of</p>	<p><b>3a. NHS Actions</b>  Public Health/Health Improvement representation on local Strategic Poverty Partnership Against Poverty in order to identify and embed health anti-poverty actions into Poverty Action/Financial Inclusion and Strategy. Supported Fuel Poverty awareness through NHS Health Improvement contribution to SBC Energy Adviser post. Borders Healthy Living Network (NHS) staff working with Powerdown to address individual home/families fuel bill reductions in designated areas of deprivation. NHS Borders will play a full and active part in implementing Financial Inclusion Strategy for example by promoting Credit Union services to staff and patients.</p>

**NHS Board: NHS Borders**

**Community Planning Partnerships covered: Scottish Borders Region**

		housing transferred from the Local Authority some years past .	
	<p><b>1b <u>NHS Actions</u></b>                  An NHS Borders Health and Well-being Working Age Strategy is in final stages of production. This has links to employability through getting people back to work and raising the profile of the health benefits of work.                  NHS continues the development of an Occupational Health Vocation Rehabilitation project. Marketed as Working Health Services (WHS) and now in its second year</p>	<p><b>2b. <u>NHS Actions</u></b>                  Public Health collaborates with SBC Housing Strategy Team and roles to improve the matching of housing supply and population’s needs, now and for the future. Work with partners in local Housing Strategy Partnership Group to plan new housing developments in response to future population needs taking account of demography, prevalence of LTCs and disabilities.</p>	<p><b>3b. <u>NHS Actions</u></b>                  Scottish Borders Council supported by NHS Borders produced in 2009 a ‘Welcome to Scottish Borders’ guide for migrant communities moving into the area. NHS Borders produced the health section.</p>
	<p><b>1c. <u>NHS Actions</u></b>                  Plans to Identify adults through local Keep Well Service in need of literacy and numeracy support and refer to local courses. Referral of suitable clients directly into the Employability Pathway when developed</p>	<p><b>2c. <u>NHS Actions</u></b>                  Public Health and Health Improvement to work with SBC Planning and Housing staff to ensure new residential developments support an increase in activity and reduction in carbon footprints</p>	<p><b>3c <u>NHS Actions</u></b>                  Fairer Scotland allocation to NHS enabled commissioning of activities free at the point of entry for target groups e.g. vulnerable families within supported Family Centres, young people with physical disabilities and older people in isolated rural communities</p>
How will the Board performance manage these contributions?	<p><b>1d <u>Performance Management</u></b>                  Local Employability Group reports to CPPartnership ‘Competitiveness’ theme Group which in turn reports to Borders Strategic Board</p>	<p><b>2d. <u>Performance Management</u></b>                  The Director of Estates provides regular reports through NHS Board Executive Team which reports to NHS Borders Board</p>	<p><b>3d. <u>Performance Management</u></b>                  Strategic Poverty Partnership Against Poverty regularly reports the progress on Poverty Action Plan to Borders Strategic Board</p>
	<p><b>1e. <u>Performance Management</u></b>                  NHS Borders Health &amp; Well-Being Working Age Strategy will be approved and performance managed by Health Improvement Partnership Board who in turn reports to Joint Planning &amp; Delivery Group (CHCP).                  WHS Voc. Rehabilitation Project links directly to actions from Adult Rehabilitation Framework and National</p>	<p><b>2e. <u>Performance Management</u></b>                  LHS Partnership Board – Joint Planning &amp; Delivery Committee – Borders Strategic Board. Also reporting through Planning &amp; Economic Development – Strong and Safe and Competitive Borders – Borders Strategic Board.</p>	<p><b>3e. <u>Performance Management</u></b>                  Reporting/monitoring systems through Migrant Support group that regularly reports to Fairer Borders Group</p>

**NHS Board: NHS Borders**

**Community Planning Partnerships covered: Scottish Borders Region**

	Fit for Work pilot. This work is part of Working Age strategic plan and will be accountable to HIP Board.		
	<p><b>1f. Performance Management</b> Keep Well Service performance managed through NHS Board structures and HIP Board.</p>	<p><b>2f. Performance Management</b> Reporting/monitoring systems within Health Improvement Partnership Board and LHS Partnership Group and associated sub- groups which in turn reports to CHCP which reports to Borders Strategic Board.</p>	<p><b>3f. Performance Management</b> Fairer Borders Group which sits within CPPartnership quarterly reports/ FB reports to Borders Strategic Board and annual report to the Strategic Partnership Against Poverty.</p>

	<b><i>ECONOMIC RECOVERY</i></b>		
<p>What are the priority local outcomes for supporting economic recovery?</p> <p>What are the underpinning indicators or targets that support the delivery of the outcome?</p>	<p><b>1. The physical and communication infrastructure meets the needs of businesses and residents</b></p> <p><u>Underpinning Performance Indicators</u> 01_1 PO1,2,3,4,5 and PO7 (See below)</p>	<p><b>2. There is both sustained and growing business activity in key sectors of the Borders economy</b></p> <p><u>Underpinning Performance Indicators</u> 02_1_P01,2,7,8,9,13,14,31,35,39,41,44,45,P047 (see attached)</p>	<p><b>3. The Borders existing workforce is highly skilled and responsive to the needs of employers</b></p> <p><u>Underpinning Performance Indicators</u> 03_3_P01-P016 (see attached)</p>
<p>What are the Board's top 3 actions that contribute to each of these outcomes?</p>	<p><b>1a. No related NHS Actions to the indicators described:</b> 01_1P01 Supply of service land available 01_1P02 Uptake of land for industrial and business use 01_1P03 Road network requiring maintenance 01_1P04 % of businesses who have broadband connection 01_1P05 % of residents who have broadband 01_1P07 % Of businesses receiving orders via the internet</p>	<p><b>2a. NHS Actions</b> National procurement contracts limit NHS ability to support local sustainability However where there are opportunities NHS follows Govt. guidelines for advertising on Scottish Govt. portal. This encourages small and medium sized businesses to bid for contracts in Borders and local businesses encouraged to access.</p>	<p><b>3a. NHS Actions</b> NHS Borders is linking up with APEX Scotland to provide work experience for vulnerable young adults, and encourage them into the workplace. This is currently in the early stages of development but has the potential to be rolled out across Laundry, Domestic and Catering Services.</p>
	<p><b>1b. See above</b></p>	<p><b>2b. NHS Actions</b> National procurement contracts also limit NHS catering services. However there are</p>	<p><b>3b. NHS Actions</b> .NHS Borders requires Healthcare support workers (HCSW) to deliver safe</p>

**NHS Board: NHS Borders**

**Community Planning Partnerships covered: Scottish Borders Region**

		opportunities to buy locally from suppliers for specialised bread, potatoes for example. In rural areas difficult for small businesses to provide sufficient quantities over a sustained period.	high quality care. Scottish vocational qualifications validate the competence that HCSW demonstrate in their roles. At present 129 HCSW hold an SVQ in Health and Social Care (85 at SVQ level 2 and 44 at SVQ level 3)
	1c. See above	<b>2c. NHS Actions</b> NHS delivers Healthy Working Lives support to local SMEs. 35 award registrations at present, 26 of which are SMEs. A Series of business network events delivered and co-ordination of training on topics: Mentally Healthy Workplaces, Alcohol Awareness for Managers, as well as being pivotal in supported businesses to access other training such as Health For Life.	<b>3c. NHS Actions</b> NHS Borders are working towards a HEAT Target which ensures that at least 80% of Permanent Staff have a Personal Development Review Discussion by March 2011 NHS Borders staff have a Personal Development Plan which identifies development needs –this helps staff and managers ensure they remain up to date with mandatory/statutory training etc.
How will the Board performance manage these contributions?	1d. See above	<b>2d. Performance Management</b> The Director of Estates provides regular reports through NHS Board Executive Team which reports to NHS Borders Board Work is a through procurement assessment through Scottish Govt procurement assessment programme.	<b>3d. Performance Management</b> Workforce planning reports to NHS Workforce Board which has Board Executive team members and representatives from the Clinical Boards
	1e. See above	<b>2e. Performance Management</b> The Director of Estates provides regular reports through NHS Board Executive Team which reports to NHS Borders Board Work is a through procurement assessment through Scottish Govt procurement assessment programme.	<b>3e. Performance Management</b> Workforce planning reports to NHS Workforce Board which has Board Executive team members and representatives from the Clinical Boards
	1f. See above	<b>2f. Performance Management</b> Data is collected through Health Works/Healthy Working Lives national monitoring system. Healthy Working Lives data is also reported through quarterly reports to HI Partnership Board Healthy	<b>3f. Performance Management</b> Workforce planning reports to NHS Workforce Board which has Board Executive team members and representatives from the Clinical Boards

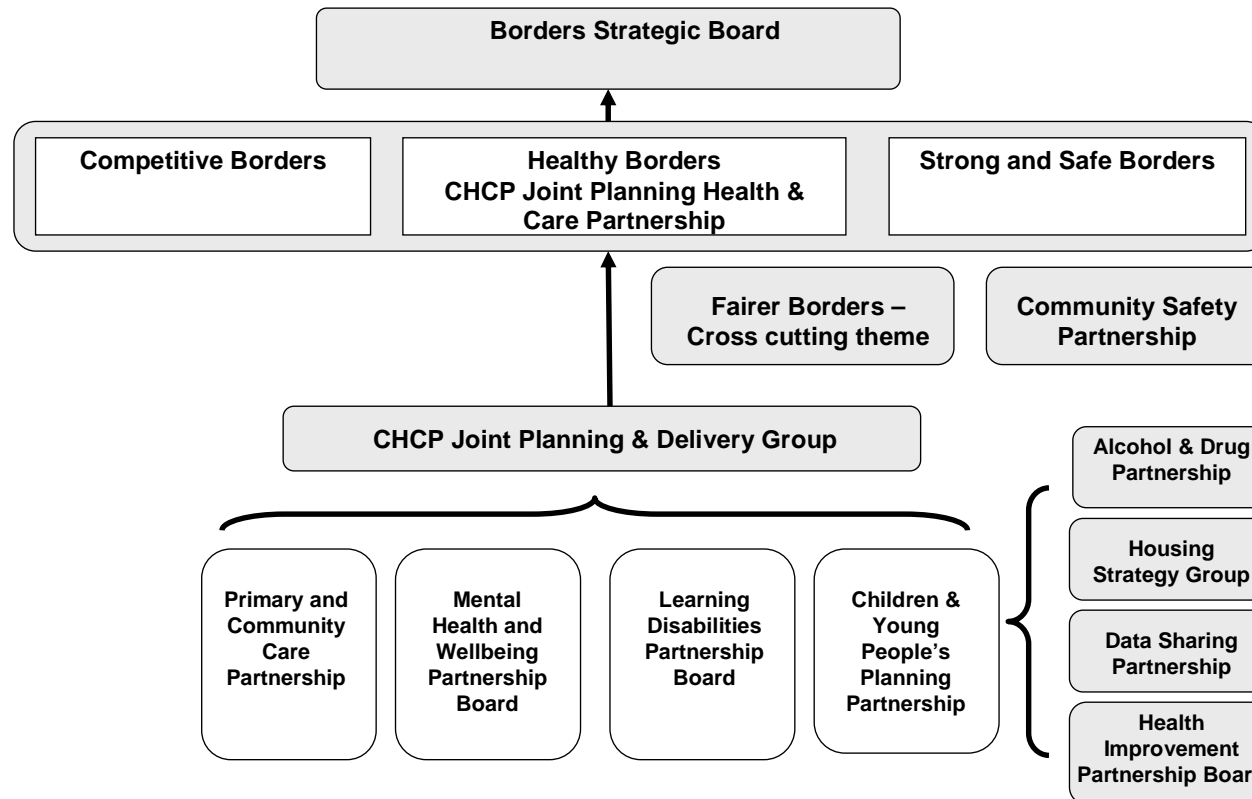
**NHS Board: NHS Borders**  
**Community Planning Partnerships covered: Scottish Borders Region**

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## NHS Board: NHS Borders

### Community Planning Partnerships covered: Scottish Borders Region

#### Structure Joint Health Improvement Partnership Board/Links to Other Structures



#### Strategic Context

##### **Community Planning//CHCP Context**

Borders Strategic Board/CHP membership consists of the two Chief Executives, Chairs of Scottish Borders Council and NHS, Directors, Councillors and Non-Executive NHS representatives. The Community Planning Structures of Competitiveness, Strong and Safe and Healthy Borders form 3 thematic sub-groups from the CHP. The Joint Planning and Delivery Group (CHCP) is accountable to the above and performance manages a range of partnership boards e.g. Alcohol and Drugs Partnership, Mental Health and Learning Disabilities, Primary and Community Care and Integrated Children's Services.

**NHS Board: NHS Borders**  
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