

Status	Definition
Red	Below target
Amber	On track to deliver
Green	Delivered

Priority	Goals	Plans (Key Actions)	Outcome Measures	Targets	Responsible person	Links to...	Timescale	Progress (RAG rating)
Key priorities outlined in the Joint Health and Wellbeing Strategy 2013-16								
<u>Obesity</u> Childhood and adult obesity prevalence poses a significant risk to the health of the population and the increased use of health services	To increase the percentage of children and adults who are a healthy weight by providing a range of interventions focussed on physical activity and healthy eating	1. Physical activity: Targeted programmes, new resources and training for children incl. physical literacy and activity programmes.	We will reduce the prevalence of overweight and obesity in 4-5 and 10-11 year olds (PHOF 2.06)	Implement the Change 4 Life Programme for 10-11s in 10 schools in 2013-14; Develop the Five60 programme for 4-5s in 2013-14; Implement to 10 schools in 2014-15	Rob Clayton (Culture & Leisure, Rutland CC)	Maggie Clarke (Health visiting, Leicestershire Partnership Trust) Chris Thomas (School Sports & Physical Activity Network)	2013-2015	Amber
		2. Physical activity: Programmes targeting patients with medical conditions.	We will reduce the proportion of physically inactive adults and increase the proportion of physically active adults (PHOF 2.13)	Ensure delivery of Heartsmart and Exercise Referral Programmes in 2013-14; Increase uptake by 3% in 2014-15; Expand to include Stroke and Cancer Rehab in 2014-15		Mark Braham (Public Health, Leics CC)	2013-2015	Green
		3. Weight management: Sustainable delivery of weight management programmes for adults and children.	We will reduce the prevalence of overweight and obesity in adults (PHOF 2.12)	Deliver Weight Loss Clinic through Catmose Sports in 2013-14; Design entry level weight loss programme for lower BMI levels in 2014-15		Public Health Operational Group, Rutland CC	2013-2015	Amber (adults green, children amber)
		4. Food and nutrition: Developing networks to improve food culture and promote benefits and skills of growing food to local communities.	We will reduce the prevalence of overweight and obesity in adults (PHOF 2.12)	Investigate potential to run Food for Life programme in Rutland Schools in 2013-14; Agree and implement programme in 2014-15		Mark Braham (Public Health, Leics CC) Food For Life Network Master Gardeners Programme	2013-2015	Amber

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		5. Explore the use of community facilities to improve the offer	We will reduce the proportion of physically inactive adults and increase the proportion of physically active adults (PHOF 2.13)	Deliver programme of physical activity engagement through community venues in 2013-14		Catmose Sports Centre Uppingham School Sports Centre Kendrew Barracks Parish Councils / Halls Visions	2013-2015	Green
<u>Smoking</u> Smoking remains the largest preventable cause of ill health and premature death in Rutland	To further reduce the prevalence of smoking by helping smokers to quit and influencing young people not to start in the first place	1. Maintain active membership of Tobacco-free Leicestershire & Rutland (TLR) and contribute to the action plan.	We will reduce the proportion of adults that smoke (PHOF 2.14)		Aaron Bohannon (Public Health)	Tobacco-free Leicestershire and Rutland		Amber
		2. Provide accessible, evidence-based smoking cessation services across Rutland.	We will reduce the proportion of children that smoke (PHOF 2.09)			Aaron Bohannon (Public Health, Leics CC)		Green
		3. Support implementation of the Tobacco Free Young Person (Whole School Approach) program across schools and young person oriented venues across Rutland.	We will increase the proportion of adults that are able to access smoking cessation services			Kevain Parsons (Lifelong Learning, Rutland CC)		Implementation in schools = Red; in youth clubs = Amber/Green
		4. Support implementation of Step Right Out (smoke-free environments) campaign across Rutland.	Cessation - green TLR representation - Amber Step Right Out (SRO) - Amber			Belinda Child (Peterborough Shared Services, Local Authority)		Amber
<u>Alcohol</u> Excessive alcohol consumption is associated with significant short and long term harm to health.	To reduce the harm caused by alcohol, tackling both binge drinking and longer term drinking in excess of recommended levels.	1. Understand and build community resources that support the recovery and reintegration of people moving on from alcohol misuse.	We will increase the number of people effectively engaged in structured alcohol treatment.	72	Julian Mallinson (Public Health, Leics CC) Debra Cunningham and Mark Thomas (Public Health, Leics CC)	Leicestershire County and Rutland Substance Misuse Board Debra Cunningham and Mark Thomas (Public Health, Leics CC)	March 2014	Q1- 44 (Green)

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			We will reduce the proportion of the population that are admitted to hospital for alcohol related causes (PHOF 2.18).	1515			March 2014	Q1- not yet released
		2. Integrate alcohol misuse prevention and early intervention into frontline services and build the capacity of staff to deliver information and brief advice.	We will deliver substance misuse training to relevant frontline staff	Frontline staff trained and competent to deliver brief advice. (No.s to be agreed)		School Nurses	March 2015	Amber Work underway to identify priority staff groups and assess needs of identified staff groups, including provider attendance at RCC meeting of social work team leaders. Delivery due to start Jan 2014
Cancer Whilst we have a good cancer care and screening record across the county generally, we need to ensure this is maintained and is more equitable, especially in the more deprived groups.	To ensure all of our population, but especially those in deprived groups, not only have access to, but also are encouraged to use the health services that address risk factors for cancer and provide both care, early diagnosis, and screening in cancer.	<ol style="list-style-type: none"> 1. Join with Leicestershire County Council colleagues to develop a cancer prevention and early treatment group, linking with work plans of East Leics and Rutland CCG. 2. Work with NHS colleagues to monitor the delivery and equity of cancer care, early diagnosis and screening programmes. 3. Work with CCG colleagues to promote awareness of cancer symptoms and screening and address barriers to early presentation and onward referral. 4. Address the risk factors for cancer, including actions within this plan to tackle obesity, smoking and alcohol misuse. 	<p>We will reduce the rate of premature mortality from cancer (PHOF 4.05).</p> <p>We will reduce the gap in life expectancy and healthy life expectancy between the richest and poorest communities (PHOF 0.2).</p>		Michelle Christie-Smith (East Leicestershire & Rutland Clinical Commissioning Group)	Mike McHugh (Public Health, Leics CC)	2013-15	Amber ELRCGG has clear commissioning intentions for cancer; focus is on improving diagnostics and treatment times. There are plans to recruit a GP cancer lead. Public Health grant has allocated funding for cancer to look at early diagnosis and education/training etc, there has been no progress so far with delivering this.

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<u>Wider Determinants of Health</u> Good quality housing, fuel poverty, homelessness, environmental and social impacts critically affect a person's health and wellbeing.	To ensure that a combination of regulatory powers, partnership working and funding opportunities are used to mitigate and where possible eliminate the effects of the wider determinants of health on the health and wellbeing of our population Continue to recognise the strong links between health and wider determinants, in particular housing.	1. Working with partners continue to provide advice and assistance to our residents on tackling fuel poverty, and energy efficiency	We will reduce the number of vulnerable people in our community i.e., old, disabled and on income restated benefits who are living in fuel poverty.		Belinda Child (Public Protection, Peterborough Shared Services) on fuel poverty and housing. Kevain Parsons (Lifelong Learning, Rutland CC) on education. Jane Clayton Jones (Citizen's Advice Bureau) on debt and welfare.	Executive & Integrated Commissioning Group (EICG) (to ensure strong links between sub-groups) Richard Chubb (Senior Environmental Health Officer, Rutland CC) Maggie Clarke (Early Years Support, Leicestershire Partnership Trust) Rutland Families First group (subgroup of HWB Children's Trust)		Awaiting Update
		2. Actively seek funding opportunities to enable targeted action to deal with the effects of the wider determinants of health on the most vulnerable residents in our County						Awaiting Update
		3. To make effective use of regulatory powers to remedy defective housing and abate environmental impacts such as noise.						Awaiting Update
		4. To ensure that the strong links with the work of other groups such as the Children's Trust and Complex Needs Group are understood to ensure effective and co-ordinated action to tackle the wider determinants of health						Awaiting Update
Other areas that the Staying Healthy Group will monitor								
<u>Sexual Health</u> Poor sexual health poses a number of risks to health and wellbeing, particularly amongst young people. Such risks place a strain on public services and can	To improve the sexual health of young people across Rutland by ensuring all young people have access to good quality service provision, education and advice.	1. Co-ordination of Services: Ensure effective co-ordination of sexual health & teenage pregnancy services across the county, supporting the delivery of one integrated SH service across LLR.	We will reduce the prevalence of Chlamydia amongst those under the age of 25. (PHOF:3.02) We will maintain the current conception rate of those under the age of 18. (PHOF 2.04) We will ensure teenage parents are able to access	Increase Chlamydia screening by 8.5%	Kevin Quinn (11-19 years, Rutland CC)	Maggie Clarke (Health visiting, Leicestershire Partnership Trust) Janet Hutchins and Katie Philips (Public Health, Leics CC) Jenni Scott (Senior Youth Development Officer, Rutland CC)	April 2014	Target 1) Red: 127 screens in quarter 1 (137 target). Q2 data not available at present Green: Integrated sexual health service provider identified (STTP) who will begin 01 January 2014.

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also impact upon a number of other life factors such as employment and housing.	To provide good quality provision and support to teenage parents to ensure they are not marginalised and both mother and child are able to meet their full potential.	2. Access to Services: Improve access to effective sexual health/teenage pregnancy services across the county through enhanced services and coverage.	education, training and employment.	Chlamydia diagnosis rate, 1770 for 2013		Teenage Pregnancy and Sexual Health Oversight Group (TPSHOG)	April 2014	Target 2: Amber: Diagnosis rate; 21 in Q1, awaiting q2 figures.
		3. Participation & Involvement: Encourage greater participation and engagement of young people accessing sexual health services.		Under 18 conception rate in Rutland is maintained at 6.2%			April 2014	Green: Under 18 conception rate currently at 6.0%, however increase identified locally which not reflected in these figures.
		4. Prevention & Early Intervention: Build knowledge and resilience amongst young people and staff through the delivery of effective sexual health education and advice, providing a consistent and joined up message.		50% of all Teenage Parents are engaged in Education, Employment and Training.			On-going target.	Amber, EET: Currently 31% of TP in EET and further 30% on Engage alternative learning programme. TPAL project to be delivered in partnership with children centres.
		5. Performance Monitoring: Monitor sexual health data and trends and target resources accordingly.		20% increase in young people in Rutland accessing comprehensive Sexual Health Service			Baseline Year.	390 interventions year to date across CSSP sites. Baseline year.

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Mental Health Promotion	To influence and encourage partnership working across a variety of sectors to promote positive mental health for the people of Rutland.	1. Develop formal links with and maintaining representation from the Leicester, Leicestershire and Rutland (LLR) Mental Health Promotion Group.	PHOF 1.18 Social connectedness		Bernard Powell (Health improvement service, Leicestershire Partnership Trust)	Naomi Edwards (Inclusion Development Worker, Rutland CC)		Awaiting Update
		2. Work to promote positive mental health and healthy lifestyles within the work place setting.	PHOF 2.08 Emotional Wellbeing of Looked After Children			HWB Complex Needs subgroup (anxiety and depression priority)	Awaiting Update	
		3. Improve mental health and emotional health and wellbeing through the other health improvement initiatives described in the staying healthy action plan.	PHOF 2.23 Self-reported wellbeing			Children's Trust Subgroup (Emotional Health and Wellbeing of Children, Young People and their families Priority)	Progress in other areas of the plan, particularly physical activity and alcohol that are closely related	
		4. Ensure that colleagues across health and social care services recognise the link between health improvement initiatives outlined in this plan and the impact of mental health.				Mental Health Promotion Group	Awaiting Update	
		5. Oversee the development and implementation of the suicide prevention strategy					Strengthening links with the LCC public health lead.	