ADULT SOCIAL CARE AND HEALTH SCRUTINY - ACTION TRACKER

Note - from 5 July 2017 replaced the old <u>Action Tracker</u> which contained actions from Health Scrutiny and Resilient Communities Scrutiny. Numbering retained so does not start from number one. Actions from 5 July 2017 which were amber or new have been included (some are now marked as green).

Colour code: red = significant risk of missing deadline / not being completed (mitigation required); amber = some risk; white = new action; green = complete GREEN ACTIONS ARE ONLY SHOWN FOR THE IMMEDIATE MEETING FOLLOWING COMPLETION OF ACTION (FULL LIST AVAILABLE IF REQUIRED)

AMBER ACTIONS

NEW ACTIONS (OR NOT DUE YET) - THESE ARE NOT COLOUR CODED

REC NO.	DATE OF REC.	RECOMMENDATION	TARGET DATE	RESPONSIBLE OFFICR	UPDATE (NOTE - ANY EXTENSIVE RESPONSES ARE FURTHER BELOW AFTER THE END OF THE TABLE)	RED AMBER GREEN
30	HSC 14.12.16	Update before the March 2017 meeting from Councillor Cross on GP patient referral rates for support to stop smoking.	Mar 2017	Cllr Cross, Cabinet Member for ASC / Health	17.04.17 Reminder to be sent, response expected before 26.04.17. 27.09.17 - a comprehensive report on the new service will be provided as part of the Public Health overview report (Nov 17). 28.11.17 - ref made during 15.11.17 meeting to new service to support smoking reduction to be commissioned in early 2018, Scrutiny will want opportunity to comment. 16.01.18 Potential new service specification / model will be considered at 14.03.18 meeting and can include an update on GP patient referral rates. 14.03.18 Item deferred. 01.05.18 - updated referral rates to be considered at 04.07.18 meeting (smoking service item)	Amber
39	ASCH 27.09.17	Receive a copy of Sustainability and Transformation Plan Impact Report	Oct / Nov 2017	David Bonson, CCG	07.11.17 The impact report won't be available until spring 2018 when Scrutiny is next due to receive an STP update (May 2018). 01.05.18 STP report on agenda, action should be complete.	Green

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41	ASCH 15.11.17	Performance reports to include targets for all indicators in the main pages.	04.07.18 tbc	Ruth Henshaw, Council performance	Note - next report (end year) due July 2018. Interim response from ASC - not appropriate to set targets for every indicator. The performance report will explain where this is the case - Members can discuss and decide whether they still want a target.	Not due yet
42	ASCH 15.11.17	Target-setting methodology to be in performance reports where targets were not being met or where there may be proposals to reset targets.	04.07.18 tbc	Ruth Henshaw Supported by service leads (Karen Smith, Arif Rajpura)	Note - next performance report due July 2018 but if Directorate Overview reports (due March 2018) contain targets off-track / changes proposed then methodology info required.	Not due yet
44	AHSC 24.01.18	'Zero' suicide target should be adopted within Blackpool	14.03.18	Zohra Dempsey, Public Health	06.03.18 To be raised by Public Health (Judith Mills) at the next Suicide Prevention Oversight Group for Lancashire and South Cumbria on 19 March 2018. 01.05.18 Considered by the sub-regional group, recognise the aspiration for no suicides but some concerns that families of victims may feel they are at fault and that NHS England have set an achievable 10% reduction target nationally linked to funding support. Members may wish to consider whether they wish to accept this or reiterate their recommendation to sub-regional group (or higher, e.g. Sustainability and Transformation Partnership at board level) citing other areas which have set themselves a zero target, e.g. Mersey Care NHS, Bolton Council's Public Health. Other factors of interest include changes to Coroners' rules so that deaths may be recorded when suspected suicide (previously had to be no doubt of this) and that there are nearly no suicides within controlled health provider environments.	Amber

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47	AHSC 24.01.18	Consider targeted community options for support and mental health awareness-raising and report back on progress.	14.03.18	Zohra Dempsey, Public Health	06.03.18 This is being considered as part of the scoping work for a local adult mental wellbeing campaign using the five ways to wellbeing - the campaign will link people up with community-based options and there will be some targeting of those at risk of low wellbeing. There are also plans for a national campaign, raising awareness of mental health. The national campaign will concentrate on people without a diagnosis - those coping and those struggling. There will be a strong emphasis on self-care and how we can help other people. It may target particular populations (e.g. perinatal women). The campaign will cover anxiety, depression, sleeping, low mood and stress, debt, building resilience, exercise and mindfulness. It will also show people how to recognise the signs of stress in others, promote good listening skills and how to have supportive conversations. Initial action completed (left on tracker for progress update in summer 2018).	Not due yet
50	AHSC 24.01.18	Invite Blackpool CCG to the Committee's meeting in either March or May 2018 to discuss its 'mapping' of mental health and community services work with particular reference to good access and the range of support options available. PH and BTS' Families and Mental Health Services also to be invited.	09.05.18	Helen Lammond- Smith, CCG Elaine Walker, BTH	06.03.18 - CCG confirmed attendance, other confirmations awaited. 01.05.18 mental health report on agenda, action should be complete.	Green

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51	AHSC 24.01.18	A&E targets, with clear explanations, should be shown in future CCG performance reports	04.07.18 tbc	Kate Newton. CCG				Not due yet
52	AHSC 24.01.18	Dec 17 performance figures for NWAS would be provided by the Committee's next meeting on 14 March 2018.	14.03.18	Kate Newton. CCG	06.03.18 To be chased. 01.05.18 This will be provided before the 9 May meeting else shortly after.			Amber
53	AHSC 14.03.18	Provide written details of sustained employment (35 people recovering	09.05.18	Judith Mills, Public Health	01.05.18 Figures cover Apr 2017 - Mar 2018			Green
		from drugs/alcohol secured work)			Job Starts			
					43	26 still employed (60%)	17 have fallen out (40%).	
					Sustainability rates			
					15 Sustained 26 weeks+ (35%) –13 still going	10 Sustained 13 weeks (23%) – 6 still going	18 employed less than 13 weeks (42%). 11 fallen out, sustainability will be measured for 7 of these after 6/12 months	

					Completed short-term contracts 3 jobs (26 weeks +) - 2 initially started on casual contracts and then became permanent and 1 is currently on a "maternity cover" contract until August		1 (not yet reached 13 weeks) is a casual ongoing contract with the council but is regularly getting 2/3 days per week (14-21 hrs). Expect would apply for a more permanent vacancy when arises.	
54	AHSC 14.03.18	Provide written details of percentage of people entering [drug/alcohol] treatment against those successfully completing treatment	09.05.18	Judith Mills, Public Health	in treatment - this completion period the data here mea	sures both the old		Green