Health and Wellbeing Strategy Action Plan

Goal: B – Healthier Environments

OBJECTIVE: B3 – Build Strong, well-connected communities		OBJECTIVE LEAD: Kristina Jackson and Les Billingham				
Action		Outcome		Action lead	Delivery Date	Reference to existing strategy or plan
	Γο increase time bank facility by I0%	Increasing the number of timebanl exchanges will help to stimulate volunteering and reduce isolation experienced by citizens who join	ς	Jacqui Payne, nGage	April 2016	
F fe	Further develop existing Community Hubs as they become focal points for supporting the delivery of priorities in their area.	Community Hubs will become the points for resilient communities in Thurrock. Creating community hub are that are self-managing will ens their positive impact upon health a well-being is sustained.	os that sure	Natalie Warren	Ongoing	
c t	To integrate a range of services for children, young people and families hrough the development of the 0-19 Wellbeing Offer	weil-beilig is sustained.		Roger Edwardson / Tim Elwell Sutton / Sue Green	August 2017	
c a - - - L c	As a part of creating a twenty-first century wellbeing offer for children and young people, explore opportunities to deliver a range of 0 - 19 services through Community Hubs and the Integrated Healthy Living Centres, including services currently housed in Children's Centres.			Roger Edwardson / Tim Elwell Sutton / Sue Green	Review completed by March 2017 Changes to buildings to be implemented on a	

				phased approach from April 2017 – March 2018	
E.	Promote and encourage volunteering e.g. Raise awareness of volunteering week, providing publicity to existing volunteers by acknowledging their ongoing community commitment	Potential increase in volunteering	Natalie Warren		
F.	Undertake feasibility study focussing on developing Thurrock's 'Giving' Initiative	Establish a fund across business and communities which helps meet local priorities, bringing communities together to build stronger neighbourhoods	Kristina Jackson / Natalie Warren		
G.	Increase awareness of Small Sparks Grant Funding	Increase in people undertaking small projects of no more than £250 monetary value to improve their neighbourhood	Kristina Jackson		
H.	Develop and deliver a pilot on Social Prescribing in the areas of Aveley, Purfleet, Tilbury and East Tilbury	Members of the public who do not require medical support will be signposted to other activities to support them and reduce the likelihood of isolation and loneliness	Kristina Jackson	Pilot to commence in October 2016 and will conclude in October 2017	
Ι.	We will work to facilitate the creation, development and sustainability of a Dementia Action Alliance in Thurrock. We will invite organisations across all sectors to join the DAA to ensure that there is a broad commitment across statutory and voluntary sector organisations as well as community groups.	This work will reinvigorate the Dementia work across Thurrock and ensure we can meet the national target set for Dementia Friendly Communities. By ensuring the development and sustainability of the DAA it will enable Thurrock to reach the 2021 target of 3750 dementia friends. The current number is 2564 (May 2016), this is an increase of 1180 dementia	Kelly Redston, Adult Social Care Commissioner. Gemma Tomsett, Alzheimer's Society Thurrock	Alliance formulated and initial plan agreed June- Dec 2016 Implementation January 2017 onwards.	Code of practice for the recognition of dementia friendly communities in England.

	friends over this 5 year period.			
J. To review and revise the current Strategy to include the creation of the DAA and to ensure that it fits with the development of the Thurrock market in line with the Market Development Strategy and the recent development of service provision around older peoples care including the BCF.	The review and revision of the Strategy will ensure that a clear plan is set in line with the current market development for services in Thurrock. The plan will ensure that the asset based community development and the community offer is at the heart of Thurrocks commitment to its population that have dementia and the carers of these residents. The revision of the strategy will also enable Thurrock to support the set-up and the sustainability of the Thurrock DAA.	Kelly Redston, Adult Social Care Commissioner		Essex Thurrock and Southend Dementia Strategy 2012. Improving Support for people with Dementia and carers in Thurrock, LB 2014. Dementia Specialist Topic Needs Assessment, Essex CC May 2015. Thurrock Better Care Fund Plan. Living Well in Thurrock Pilot, MT 2016 ????
K. Adopt the Thurrock Design Strategy SPD as part of the Borough's Development Plan	 New developments with better layouts and improved functionality Improved connectivity between existing and new developments Increased public pride Creation of more cohesive communities 	Kirsty Paul – Principal Planning Officer	October 2016	Core Strategy and Policies for the Management of Development Local Plan (Core Strategy) Design Strategy SPD
L. Ensure that all 'major' planning applications for new homes are reviewed by the Housing and Planning Advisory Group	 Delivering an appropriate mix of new house types across the borough New developments with better layouts and improved functionality Improved connectivity between existing and new developments 	Kirsty Paul – Principal Planning Officer	Ongoing	Core Strategy and Policies for the Management of Development Local Plan (Core Strategy) Design Strategy SPD South Essex Strategic Housing Market Assessment (2016)
M. Create a Local Plan Residents	Increased public pride	Kirsty Paul – Principal	September 2016	Thurrock Local Plan:

Forum N. Ensure that Local Plan Youth Forum	 Increased sense of ownership and responsibility in relation to the built environment Creation of more cohesive communities Increased public pride 	Planning Officer Kirsty Paul – Principal	(NB: Meetings are intended to be held on a quarterly basis) Ongoing	Statement of Community Involvement Thurrock Local Plan:
continue to be engaged in local planning, housing and regeneration matters	 Increased public pride Increased sense of ownership and responsibility in relation to the built environment Creation of more cohesive communities 	Planning Officer	(NB: Meetings are intended to be held on a quarterly basis)	Statement of Community Involvement
O. Ensure that policies and site allocations in the emerging Local Plan support the delivery of Objective B3	 Delivering an appropriate mix of new house types across the borough New developments with better layouts and improved functionality Improved connectivity between existing and new developments Increased public pride Creation of more cohesive communities 	Kirsty Paul – Principal Planning Officer	Ongoing - 2020	Emerging Thurrock Local Plan. For key consultation stages in the emerging Local Plan please refer to the Council's Local Development Scheme.
P. Undertake work to identify options and the feasibility of expanding the Local Area Coordination Service	 Reduce the number of people requiring a service Reduce the number of people reaching crisis point before receiving an intervention Giving more people an opportunity to live a 'good life' Enabling more people to connect within their communities Reduce isolation and loneliness 	Tania Sitch – Integrated Care Director Thurrock Council/NELFT Les Billingham – Head of Adults and Communities	March 2017	Living Well in Thurrock Programme Stronger Together

Outcome Framework

Indicators	2016 Baseline	2017	2018	2019	2020	2021 Target
Number of weekly hours of volunteering time. This indicator quantifies the total number of hours that volunteers working in Thurrock's voluntary sector workforce give per week. Volunteering can yield benefits both for the person volunteering and the people/organisations they support. These include benefits to mental health and wellbeing, improved relationships and better social opportunities, as well as reduced burdens to carers and other formal services. The source for this indicator is the State of the Sector Survey produced by CVS.	19,069 (2014/15)					Target to be confirmed
Number of micro-enterprises operating in the area. Micro-services or enterprises provide support or care to people in their community. To be a micro -service provider they must have eight or fewer paid or unpaid workers and be totally independent of any larger organisation. This is a new initiative being rolled out in Adult Social Care and as such there is no baseline yet.	0	25 by February 2017				25 by February 2017
Estimated Dementia Diagnosis Rate for people aged 65+ This indicator quantifies the proportion of those aged 65+ estimated to have dementia who have been formally diagnosed by their GP. This indicator is included as it provides a guide to the effective recognition and diagnosis of dementia patients in Thurrock. The national target has been set at 67%.	66.4% (April 2016)	66.52%	66.64%	66.76%	66.88%	67%
% of patients diagnosed with dementia whose care plan has been reviewed in a face-to-face review in the preceding 12	70.7%	71.96%	73.22%	74.48%	75.74%	[77.0%

months. This indicator quantifies the proportion of those diagnosed with dementia who have a care plan that has been reviewed in the last 12 months. This review should address four key issues: an appropriate physical and mental health review for the patient if applicable, the carer's needs for information commensurate with the stage of the illness and his or her and the patient's health and social care needs if applicable, the impact of caring on the care-giver communication and co-ordination arrangements with secondary care (if applicable)	(2014/15)		was national average in 2014/15]
co-ordination arrangements with secondary care (if applicable). This indicator is measured as part of the Quality Outcomes Framework for Mental Health (DEM002) and is also a measure on the CCG Outcomes Framework.			