



AGENDA ITEM:

13 APRIL 2010

HEALTH SCRUTINY PANEL

**STRATEGIC PLAN 2010:
PROMOTING ADULT HEALTH AND WELLBEING, TACKLING EXCLUSION
AND PROMOTING EQUALITY THEME /
SUPPORTING CHILDREN AND YOUNG PEOPLE: BE HEALTHY PRIORITY**

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Purpose of the report

1. To advise the Health Scrutiny Panel of the outline content of (i) the *Promoting Adult Health and Wellbeing, Tackling Exclusion and Promoting Equality* sub-section, and (ii) the *Be Healthy* strategic priority of the *Supporting Children and Young People* sub-section of the 2010/2011 revision of the Council's Strategic Plan, and to seek comment.

Recommendation

2. That the Panel notes and comments on the outline content of the attached sub-sections of the 2010 revision of the Council's Strategic Plan.

Background

3. The Strategic Plan is the Council's overarching plan and is central to planning across the organisation. The Plan provides a strategic overview of the business of the Council that brings clarity of purpose to the organisation and offers a coherent framework for financial and service planning and for performance management.
4. In 2008, the Council published a three-year Strategic Plan for 2008-2011, in line with the period of the current Local Area Agreement for Middlesbrough.
5. The plan is revised on an annual basis to ensure that it remains fit for purpose. The Deputy Mayor approved an outline structure and development timetable for the 2010 revision of the Strategic Plan on 10 February 2010.

6. The timetable provides for CMT and Overview and Scrutiny Board to consider drafts of the Plan at appropriate intervals, prior to endorsement by Executive and approval by Council in June 2010.
7. Relevant sections of the revised Plan are considered by Scrutiny Panels before the first draft of the Plan is prepared and circulated.
8. The outline content of (i) the *Promoting Adult Health and Wellbeing, Tackling Exclusion and Promoting Equality* sub-section, and (ii) the *Be Healthy* strategic priority of the *Supporting Children and Young People* sub-section are attached at Appendix A and Appendix B for consideration.
9. The outline content is divided into the following sections: -

Section	Purpose
Overarching vision and aims	Describes the vision for the thematic area, as developed by the Middlesbrough Partnership.
Strategic priorities	Breaks down the vision into a number of strategic priorities, which are the areas of focus for the theme.
Key performance targets	Sets out the key performance indicators used to measure progress against each strategic priority, with most recent performance and future targets.
Local delivery arrangements	Describes how the strategic priorities will be delivered within Middlesbrough.
The Council's contribution to this theme and performance in 2009/2010	Summarises the Council's specific contribution to delivering the strategic priorities and major achievements in the last year.
Action Plan 2010/2011	Sets out key activity planned over the next year to progress the strategic priorities.

10. This information will be refined in the coming weeks through internal debate and discussions with partners where appropriate. Final performance targets will be added into the draft following the annual data return, commencing in April 2010.
11. At this stage, comments are sought on the general approach to addressing the strategic priorities for this theme and the plausibility of the proposed actions for 2010/2011.

Background papers

Strategic Plan 2008-2011 (2009/2010 revision)

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Promoting adult health and well-being, tackling exclusion and promoting equality

Overarching vision and aims

The overarching vision for adult health in Middlesbrough is as follows:

Improve the health of the population generally, while narrowing the gap between the most disadvantaged communities and the town as a whole. This will not only mean longer life expectancy, but also ensure that people benefit from improved lifestyles.

Strategic priorities

Middlesbrough experiences greater levels of deprivation than the national average, and a greater burden of poor health within the population. People living in material or social disadvantage are likely to have the greatest need for health and social services, and are more likely to suffer from ill-health and die as a consequence of the disadvantage they experience. Although life expectancy continues to increase year on year, life expectancy for both men and women living in Middlesbrough is lower than the average for England and Wales; within Middlesbrough it is estimated that, on average, people in the least deprived areas live nine years longer than people in the most deprived areas.

Although there have been improvements in health over the past ten years, these are consistent with progress at a national level, and so the gap between Middlesbrough and the rest of the country remains. Lifestyle has an important part to play in people's health. Middlesbrough rates of smoking, alcohol and drug misuse are significantly higher than the national average. Poor diet and low rates of physical activity contribute to higher levels of obesity, which increase the risk of cardiovascular disease and some cancers. Cardiovascular disease, which includes heart disease and stroke, accounts for 30% of the life expectancy gap in Middlesbrough. In 2008/2009, the PCT launched one of the first Vascular Risk Assessment Programmes in the country. This was rolled out to Community Pharmacies in 2009. The programme has demonstrated significant success in identifying those at risk of developing CVD, and offering preventative/early intervention services.

Whilst the level of health inequalities in Middlesbrough remains a significant challenge, the additional £4m funding from the Healthy Communities Challenge fund is being used to create more opportunities over the next two years to help people lead healthier lifestyles. A social marketing approach is a core feature of the programme.

A Council/PCT LAA Joint Improvement Programme (JIP), to the value of £1m per year for 3 years, has been created. Specific projects within the JIP include Learn to Swim for over-60s, Up to Dance, and provision of specialist fitness equipment for older people and those with disabilities. These are open-access programmes, but target people with special needs.

The Census 2001 reported that around 1,990 people over 75 years of age with a health or disability problem live alone in Middlesbrough. Middlesbrough has a good track record of providing services for the increasing number of older people in the town, helping people to maintain their independence. For instance, the Independent Living Project for Older People (ILOP), which provides low-level preventative services) has continued to expand.

Middlesbrough Council and Middlesbrough Primary Care Trust prepare the Joint Strategic Needs Assessment (JSNA) for Middlesbrough, which provides a detailed insight into the health and well-being needs of people living in Middlesbrough – now and in the future. The JSNA drives prioritisation and planning for health in Middlesbrough. The strategic priorities of the ‘Promoting adult health and well-being, tackling exclusion and promoting equality’ theme are:

Priority	Rationale
<p>Help promote health, well-being, independence, inclusion and choice.</p>	<p>Middlesbrough has an increasingly ageing population. The shift in the proportion, composition and expectations of the older age group has profound implications for public services. People who experience mental health problems, or who have a learning disability or sensory loss, are more likely to need support to enable them to live independently in the community, to take part in all the varied aspects of community life, and to maximize their lifestyle opportunities. Partners must act now to shape services for the future, by making a fundamental shift from delivering services that create dependency, to providing services that enable vulnerable adults and older people to exercise choice and control over their lives.</p>
<p>Ensure that, when people fall ill, they receive safe and effective services when and where they need help, and are empowered in their choice.</p>	<p>Middlesbrough has a range of services across the spectrum of adult care that aim to provide a speedy response, such as a Crisis Resolution Team in Mental Health and a Rapid Response Team for Older People. Intermediate Care, Mobile Rehabilitation and Enablement Services are geared towards recovery from illness. These services are provided jointly by health and social care staff.</p>
<p>Ensure that the gap is closed between levels of health of Middlesbrough residents and the national average, as well as the gap between priority neighbourhoods and the Middlesbrough average.</p>	<p>People who experience disadvantage, lower educational attainment or insecure employment are more likely to have poorer health outcomes and earlier death compared with the rest of the population. The gap in life expectancy between different Council wards in Middlesbrough has not reduced sufficiently. The reasons for differences in health outcomes are complex, but two key elements are poor access to public services, and the effectiveness with which people use them.</p> <p>Programmes are in place to promote healthier lifestyles that will enable people to improve their health outcomes, particularly linked to participation in physical activity and smoking cessation. Ensuring that the Council and its partners provide services relative to need will make a significant contribution to breaking the generational cycle of poor health.</p>
<p>Improve the quality of life of vulnerable people in Middlesbrough.</p>	<p>People may be vulnerable for a number of reasons – including disability, mental health problems, frailty and lack of access to transport. The Council and its partners are actively working to ensure that people who are vulnerable experience a better life. Partners are helping vulnerable people to achieve or maintain independent living, via initiatives such as the independent living for older people project and extra care housing.</p> <p>A dedicated team has been established to increase the number of people with learning disabilities and mental health problems securing employment. The Council contributes to the mobility of socially excluded residents through the provision of a social transport service.</p> <p>In terms of safeguarding vulnerable adults, amongst other things, the Council leads the development of a Tees-wide Safeguarding Adults Board and raises public awareness of safeguarding issues by ensuring processes are embedded across all agencies.</p>

Priority	Rationale
Address specific community and social housing needs.	The Council has a key role to play in facilitating the provision of housing within the borough for particularly vulnerable groups of people.

The Mayor's agenda

Six of the Mayor's Reduction priorities are supported by this theme. These are:

- Reduce alcohol abuse.
- Reduce smoking.
- Reduce obesity.
- Reduce deaths from heart disease and strokes.
- Reduce stress-related illness.
- Reduce consumption of fatty foods.

Key performance targets

Progress towards these priorities is measured using the key performance indicators set out below.

Help promote health, well-being, independence, inclusion and choice.						
LAA	Ref	Definition	Most recent performance	Performance comparison	Progress update	Next target
◆	NI124	People with a long-term condition who consider themselves to have enough support from local services Source: PCT patient survey	74.56% (2007/2008)	Middlesbrough's performance in 2007/2008 was lower median quartile nationally.	Performance in 2007/2008 was marginally short of upper median quartile. The results of the 2009/2010 survey are to be published on 25 April 2010 – commentary will be updated.	76% (2009/2010)
	NI130	Social Care clients receiving Self Directed Support per 100,000 population	TBC% (2009/2010) Q3: 7.3% / on target	The Council's performance of 441 (different measure) in 2008/2009 was top quartile nationally.	The Council's performance in this area far exceeds the national average.	21% (2010/11)
	NI132	Adult social care assessments completed within 28 calendar days	TBC% (2009/2010) Q3: 82.6% / on target	The Council's performance of 85.5% in 2008/2009 was upper median quartile nationally.	The Council's performance in this area exceeds the national average.	85% (2010/11)
	NI133	Adult social care packages delivered within 4 weeks of assessment	TBC% (2009/2010) Q3: 86.9% / on target	The Council's performance of 92% in 2008/2009 was upper median quartile nationally.	Performance trend is positive and performance remains above the national average.	92% (2010/11)
	NI136	Adults supported to live independently through social services per 100,000 population	TBC% (2009/2010) Q3: 5,102 / on target	The Council's performance of 3, 879 in 2008/2009 was top quartile nationally.	The Council's performance in this area far exceeds the national average.	5,150 (2010/11)

Ensure that, when people fall ill, they receive safe and effective services when and where they need help, and are empowered in their choice.

LAA	Ref	Definition	Most recent performance	Performance comparison	Progress update	Next target
	NI125	People aged 65+ discharged from hospital for intermediate care/rehabilitation still living at home after three months	TBC% (2009/2010) Q3: 70% / off target	Middlesbrough's performance of 71.8% in 2008/2009 was bottom quartile nationally.	The number of deaths at home within the three months following discharge has impacted on performance against this indicator.	74% (2010/11)
	NI131	Average weekly rate of delayed transfers of care from NHS hospitals per 100,000 population	TBC% (2009/2010) Q3: 11.3 (NHS cause); 0 (MBC cause) / on target	Middlesbrough's performance of 6.5 in 2008/2009 was top quartile nationally.	The local target of zero delays due to Social Care is being achieved.	0 (2010/11)
	NI134	Emergency bed days per head of weighted population (all ages)	TBC (2009/2010) Awaiting PCT data	Middlesbrough's performance of 0.58% in 2008/2009 was bottom quartile nationally.	2009/2010 data awaited from the PCT – commentary will be updated.	TBC (2010/2011)
	NI135	Carers receiving needs assessment or review and a specific carer's service, or advice and information as a percentage of people receiving community based services	TBC% (2009/2010) Q3: 9.4% / on target	The Council's performance of 28.8% in 2008/2009 was top quartile nationally.	The Council's performance in this area exceeds the national average.	30% (2010/2011)
◆	L2	Reduction in the waiting time for major adaptations to accommodation (weeks).	TBC% (2009/2010) Q3: 12 weeks / on target	None available	The Council's performance far exceeds the targets set out in the 2008-2011 Local Area Agreement.	23.1 weeks (2010/2011)
	BV56	Items of equipment delivered within 7 days	TBC% (2009/2010) Q3: 94.3% / on target	None available	The Council's performance exceeded the 2009/2010 target of 92.5%.	93% (2010/2011)

Ensure that the gap is closed between levels of health of Middlesbrough residents and the national average, as well as the gap between priority neighbourhoods and the Middlesbrough average.

LAA	Ref	Definition	Most recent performance	Performance comparison	Progress update	Next target
◆	NI8	Adults participating in sport and active recreation 30 minutes/3 days per week Source: Active People Survey	18.5% (2009/2010)	Middlesbrough's performance of 21% in 2008/2009 was lower median quartile nationally.	Middlesbrough continues to perform below the national average level.	23.3% (2010/2011)
◆	NI39	Alcohol related hospital admissions per 100,000 population	TBC (2009/2010) Q3: 1,744 / on target	Middlesbrough's performance of 651.35 in Q4 2008/2009 was bottom quartile nationally.	Performance improved from 2008/2009 and on target.	3,019 (2009/2010)

Ensure that the gap is closed between levels of health of Middlesbrough residents and the national average, as well as the gap between priority neighbourhoods and the Middlesbrough average.						
LAA	Ref	Definition	Most recent performance	Performance comparison	Progress update	Next target
◆	NI121	Deaths from all circulatory diseases at ages under 75 per 100,000 population	76.32 (2008)	Middlesbrough's performance of 76.32 in 2008/2009 was lower median quartile nationally.	Performance remains well above the national average, in line with the extent of health deprivation in the area.	87.33 (2009)
◆	NI123	Self-reported 4-week smoking quitters per 100,000 population	TBC (2009/2010) Q3: 694 / on target	Middlesbrough's performance of 255 in Q4 2008/2009 was top quartile nationally.	Performance remains well above the national average rate.	1,100 (2009/2010)

Improve the quality of life of vulnerable people in Middlesbrough.						
LAA	Ref	Definition	Most recent performance	Performance comparison	Progress update	Next target
	NI141	Vulnerable people moving from supported accommodation in a planned way to independent living	TBC% (2009/2010) Q3: 63.53% / on target	The Council's performance of 45.92% in 2008/2009 was bottom quartile nationally.	2009/2010 target of 59% exceeded.	64% (2010/11)
	NI142	Vulnerable people supported to maintain independent living	TBC% (2009/2010) Q3: 98.4% / off target	The Council's performance of 98.27% in 2008/2009 was lower median quartile nationally.	Commentary will be updated when year-end figure available.	99.00% (2010/11)
◆	NI146	Adult clients with learning disabilities in employment	TBC% (2009/2010) Q3: 9.4% / on target	The Council's performance of 7.5% in 2008/2009 was upper median quartile nationally.	2009/2010 target of 8.3% exceeded.	10.5% (2010/11)
◆	NI150	Adult clients in contact with secondary mental health services in employment	TBC% (2009/2010) Q3: 4.5% / on target	None available	Commentary will be updated when year-end figure available.	6% (2010/11)

Address specific community and social housing needs.						
LAA	Ref	Definition	Most recent performance	Performance comparison	Progress update	Next target
	NI145	Adult clients with learning disabilities in settled accommodation	TBC% (2009/2010) Q3: 70% / on target	The Council's performance of 69.5% in 2008/2009 was at the national average level.	Commentary will be updated when year-end figure available.	70.5% (2010/11)
◆	NI149	Adults receiving secondary mental health services in settled accommodation	TBC% (2009/2010) Q3: 53.8% / on target	The Council's performance of 41.6% in 2008/2009 was upper median quartile nationally.	Commentary will be updated when year-end figure available.	58% (2010/11)
	NI156	Number of households living in temporary accommodation in the final quarter of the year (snapshot)	1 (2009/2010)	Middlesbrough's performance of 4 in 2008/2009 was top quartile nationally.	Significant improvement on 2008/2009 figure achieved.	18 (2010/2011)

Local delivery arrangements

The Middlesbrough Health and Social Care Partnership (MHSCP) leads the health-related theme, having developed out of several years of joint working and investment planning across health and social care services. In recent years the focus of the partnership has broadened to encompass the wider public health agenda, which is laid out in a Joint Public Health Strategy between Middlesbrough Primary Care Trust and the Council. Membership of the MHSCP is diverse and includes key statutory agencies and relevant council departments, the voluntary sector and local community representatives.

The JSNA identifies the key issues Middlesbrough faces in improving the health and well-being of its population. Updated information will be gained from the JSNA refresh and will be used by the MHSCP and its partner agencies to help inform service development, commissioning and spending priorities over the next ten years. It will enable a holistic response to tackling health inequalities in Middlesbrough, with services effectively meeting the needs and wants of local people.

The Council's contribution to this theme and performance in 2009/2010

The Council is a major contributor to this theme, through its provision of adult social care services (older people and physical disabilities, and mental health and learning disabilities), the Supporting People programme and housing support services, health improvement initiatives and leisure services.

The Social Care Department leads on the 'Promoting adult health and well-being, tackling exclusion and promoting equality' theme within the Council.

The Council's progress in delivering its contribution to these targets in the last year is set out below.

Help promote health, well-being, independence, inclusion and choice.

- Introduced user-led assessments of Older Persons Home Care Services.
- Introduced preferred providers of Older Persons Residential Care.
- Reduced the reliance on Residential Care by increasing the availability of Independent Supported Living for people with Disabilities.
- Piloted Local Area Coordination (an initiative designed to enhance social inclusion by community networking).
- Developed social enterprise initiatives to provide employment and work training for people with a disability.
- Amalgamated Day Services and Community transport functions, increasing availability of community transport.
- Increased the number of Telecare packages through implementing a range of actions in the Telecare Action Plan.
- Established an integrated Transitions Team for 14-24 year olds.

Ensure that, when people fall ill, they receive safe and effective services when and where they need help, and are empowered in their choice.

- Introduced user-led quality assessments of Domiciliary Care services.

- Developed a web-based Directory of Services to contribute towards a Universal Information, Advice and Advocacy Service, in line with Putting People First.
- Developed a local commissioning strategy for social care services in line with NHS World Class Commissioning standards.
- Expanded the range of carer respite options, increased awareness of Carers' Support Services through a programme of events and identified 174 (final number to be confirmed) hidden carers through a range of projects.
- Improved early diagnosis of dementia and developed an action plan in relation to the National Dementia Strategy.
- All Social Care, Health and Staying Put Agency staff are now co-located, improving access to Health, Social Care and Housing Support Services.
- Significantly reduced the waiting time for major adaptations through the Staying Put Agency to 12 weeks from the 2006/2007 baseline of 27 weeks.
- Worked in partnership with Service providers to deliver 98% of minor adaptations and equipment within the seven-day target period.

Ensure that the gap is closed between levels of health of Middlesbrough residents and the national average, as well as the gap between priority neighbourhoods and the Middlesbrough average.

- Delivered the Healthy Town Programme to help local residents become more active, more often, and to increase healthier eating.
- Introduced a two-year programme of free swimming for under 16s and over 60s.
- Delivered two ten-week swimming programmes for people aged over 60 years, targeting 200 people.
- Introduced an 'Up to Dance' programme, targeting 160 people, delivering eight new weekly sessions and forming four self-supported adult dance groups.
- Delivered the fifth Tees Pride 10k and PCT Fun Run.
- Opened the Youth Zone facility at Southlands Leisure Centre, in order to maximise opportunities for increasing participation in Sport & Leisure recreation.
- Worked with Community Sport Network to create an action plan to deliver the recommendations of the Active Middlesbrough Strategy.
- Assisted four businesses to become accredited to the Regional Workplace Health Award and deliver training to 10 health advocates on the Workplace Health Award Schemes.
- The Smoke free Families Initiative progressed by providing training to frontline health professionals and community groups.

Improve the quality of life for vulnerable people living in Middlesbrough.

- Improved safeguarding arrangements by increasing resources and delivering a comprehensive training programme across all agencies.
- Provided job-coaching support within multi-disciplinary teams.
- Increased the number of disabled people gaining access to work.
- Increased number of residents benefiting from Money Advice Services.

Address specific community and social housing needs.

- The economic downturn has had a major impact on the planned action of establishing a Business Case and sourcing funding opportunities to create additional care-housing

provision in Middlesbrough. However, the Council remains committed to this project and is actively seeking partners.

- Reviewed Day Care facilities for older people.
- Developed a Youth Homelessness Strategy.

Action Plan 2010/11

Help promote health, well-being, independence, inclusion and choice.			
Ref	Action	Deadline	PI links
SC01	Evaluate a range of telecare/telehealth projects that will be implemented during 2010/11 to inform the future prevention and early intervention agenda.	Mar. 2011	NI136
SC02	Extend the availability of Personal Budgets to all client groups with 30% of eligible users being in receipt of a Personal Budget.	Mar. 2011	NI130 NI136
SC03	Promote and increase the number of people using self-assessment and self-directed support to enable greater choice and control.	Mar. 2011	NI130 NI136
SC04	Reduce the reliance on residential care by increasing the availability of independent supported living for people with disabilities.	Mar. 2011	NI130 NI136
SC05	Establish Local Area Co-ordination within two wards and evaluate the impact on the new way of working.	Mar. 2011	-
SC06	Increase the number of young people in transition offered person-centred planning or self-directed support from 9 to 15, through the implementation of the Transitions Team.	Mar. 2011	NI130
SC07	Introduce personal budgets for carers as part of the Personal Budget Implementation Plan	Mar. 2011	NI130 NI135

Ensure that, when people fall ill, they receive safe and effective services when and where they need help, and are empowered in their choice.			
Ref	Action	Deadline	PI links
SC08	Introduce user-led quality assessments of: <ul style="list-style-type: none"> • Enablement and Support Services • Non-Older Person's Residential Care 	Mar. 2011	-
SC09	Implement arrangements to create access to Universal Information, Advice and Advocacy.	Mar. 2011	-
SC10	Develop Commissioning Plans for all client groups.	Oct. 2011	
SC11	Ensure carers remain engaged in planning and development of key priorities.	Mar. 2011	NI135
SC12	Implement the agreed priorities in the Carers Strategy Action Plan 2009.	Mar. 2011	NI135
SC13	Improve access to a range of carers support and improve respite and personalised support.	Mar. 2011	NI135
SC14	Implement the multi-agency action plan to deliver the National Dementia Strategy objectives.	Mar. 2012	-
SC15	Determine the most cost-effective mechanism for the delivery of community equipment to individuals in their own homes.	Mar. 2011	BV56

Ensure that, when people fall ill, they receive safe and effective services when and where they need help, and are empowered in their choice.			
Ref	Action	Deadline	PI links
RG36	Implement mobile working for major adaptations through the Staying Put Agency to reduce waiting times to 23.1 weeks in 2009/10, continuing a reduction against the baseline of 27 weeks in 2006/07.	Mar. 2011	L2
RG37	Work in partnership with service providers to deliver 93% of equipment and minor adaptations within the seven-day target to enable disabled residents to live independently in their own homes.	Mar. 2011	BV56

Ensure that the gap is closed between levels of health of Middlesbrough residents and the national average, as well as the gap between priority neighbourhoods and the Middlesbrough average.			
Ref	Action	Deadline	PI links
SC16	Reduce levels of unemployment amongst alcohol users in treatment by improving referral and take-up rates of clients from the 'Support for Change' service.	Mar. 2011	NI39
SC17	Establish an Alcohol Early Implementers Steering Group, including representation from the Acute Trust and improve carers profile in line with the Carers Strategy.	Mar. 2011	
EN06	East Middlesbrough Pitch provision Artificial Turf Pitch (ATP) replacement at Southlands Leisure Centre and replacement of grass pitches at Unity City Academy.	Dec. 2010	NI8
EN07	Develop policy relating to Department of Culture, Media and Sport free swimming funding (funding ceases March 2011). <ul style="list-style-type: none"> Consult with other LAs and agencies by April 2010 Consult with CMT/Executive by July 2010 Agree Action by December 2010 	April 2010 July 2010 Dec 2010	
EN08	Redevelopment of Changing Village at the Rainbow Leisure Centre. <ul style="list-style-type: none"> Identify available resource with Corporate Asset Manager by June 2010 Work with Transport & Design Services on design by September 2010 Undertake procurement process to begin work in April 2011 	June 2010 Sept 2010 March 2011	
EN09	Complete the Middlesbrough Healthy Town programme, producing quarterly performance reports to Programme Board delivering 38 projects running throughout 2010/2011. Three of the four themes of the Healthy Towns Projects with some specific key projects are as follows: <p>Active Travel Theme</p> <ul style="list-style-type: none"> Implement Incentivised Bike Scheme at Schools and Workplaces (includes cycle training): 1,000 School Children, 500 Employees Complete Phase 2 of Safer Routes to schools/ workplaces <p>Urban Farming Theme</p> <ul style="list-style-type: none"> Completion of Hemlington allotments Hold Town meal Complete Lingfield and Beechwood allotments projects Completion of Lingfield community garden <p>Physical Environment Theme</p> <ul style="list-style-type: none"> Complete Newham Grange as cycling and walking hub Complete phase 1 of West Middlesbrough Urban Safety Management Scheme Complete Prissick Cycle Park (subject to funding from British Cycle) 	March 2011 Sept 2010 July 2010 Sept 2010 Dec 2010 Dec 2010 Sept 2010 June 2010 Dec 2010	NI 8 NI121

Ensure that the gap is closed between levels of health of Middlesbrough residents and the national average, as well as the gap between priority neighbourhoods and the Middlesbrough average.			
Ref	Action	Deadline	PI links
EN10	Produce a Food Sustainability Action Plan for Middlesbrough in partnership with Middlesbrough Environment City and NHS Middlesbrough. <ul style="list-style-type: none"> Working draft produced by September 2010 Publish the action plan by December 2010 	December 2010	NI121

Improve the quality of life for vulnerable people living in Middlesbrough.			
Ref	Action	Deadline	PI links
SC18	Establish a performance framework for the Tees-wide Safeguarding Adults Board, which includes key outcome measures.	Mar. 2011	-
SC19	Audit the delivery of agreed safeguarding training programmes across public and independent sector agencies.	Mar. 2011	-
SC20	Develop a public awareness strategy for safeguarding vulnerable adults.	Mar. 2011	-
SC21	Implement agreed actions plans following Serious Case reviews in Safeguarding Vulnerable Adults.	Mar. 2011	-
SC22	In order to secure safe medication management in care provision, support the delivery of competency-based training.	Mar. 2011	-
SC23	Create new product lines and secure new business at Ayresome Industries, to increase the number of disabled people employed.	Mar. 2011	NI146 NI150
SC24	Work with the Employment Service to increase the number of people with substance-misuse problems supported into and maintaining work for at least 13 weeks from 12 to 24.	Mar. 2011	-
SC25	Amalgamate community and home to school transport services and improve services	Mar. 2011	-
SC26	Introduce less restrictive access criteria for Community Transport and a more equitable contribution policy	Mar. 2011	-

Address specific community and social housing needs.			
Ref	Action	Deadline	PI links
RG38	Review the Private Sector Leasing Scheme to ensure it is fit for purpose to help reduce cases of homelessness.	Mar. 2011	NI 156



Supporting children and young people

Overarching vision and aims

The overarching vision for children and young people in Middlesbrough is as follows:

Middlesbrough's continued prosperity is firmly linked to future achievements of its children and young people. To be successful as a town, it must ensure that its children and young people are able to succeed. Middlesbrough needs to nurture and retain its young talent and, regardless of their background, young people should be able to enjoy their childhood and grow up in a safe environment that prepares them fully for adult life.

Middlesbrough will therefore ensure its children and young people have the best possible start in life with access to opportunities that will help them develop to their full potential and contribute positively to the local community.

Strategic priorities

Approximately a quarter of Middlesbrough's population is aged 19 or under, a total of almost 35,000 young people. Young people in Middlesbrough are a more diverse group than the population overall – 16% of the school population are from BME communities and 7% of young people have some form of impairment or disability.

Many of the challenges faced by local children and young people are mirrored throughout the country. However, the levels of deprivation in Middlesbrough can make these challenges much more difficult – 31.7% of local children live in households that are dependent on means-tested benefits. This impacts upon attainment and aspiration locally. The percentage of young people leaving school with five A*–C GCSEs (including English and maths), whilst improving, remains below the national average, with the performance of looked-after children lagging significantly behind. Middlesbrough has had one of the highest rates for young people aged 16–18 who are not in education, employment or training (NEET), but this has shown sustained, significant improvement. The rate of under-18 conceptions in 2008 shows good improvement against the 1998 baseline but remains a high priority.

The 'Supporting children and young people' theme aims to promote citizenship and raise the aspirations, hopes and confidence of young people. In December 2007 the government published its Children's Plan, 'Building Brighter Futures', an ambitious ten-year strategy that aims to make this country the best place in the world for children and young people to grow up in. This builds upon the Every Child Matters agenda, introduced in 2003, which identified five key outcome priorities for children and young people.

Priority	Rationale
Be Healthy	Ensure good physical, mental, emotional and sexual health of children and young people.
Stay Safe	Ensure that children and young people are kept safe from deliberate, neglectful or accidental harm or exploitation.
Enjoy and Achieve	Enable children to enjoy and fully participate at school and in registered childcare settings to achieve their full potential.
Make a Positive Contribution	Enable children and young people to contribute positively to their local community.
Achieve Economic Well-being	Ensure that children, young people and their families are equipped to continue into further education, employment or training.

Middlesbrough's Strategic Priorities reflect the local needs as well as the national priorities detailed in the government's ten-year children's plan.

The Mayor's agenda

The foundations of the Mayor's 'Raising Hope' Agenda include the education and care of young people.

Three of the Mayor's Reduction priorities are supported by the 'Supporting children and young people' theme. These are:

- Reduce the number of children leaving school without qualifications.
- Reduce school exclusions.
- Reduce absence from school.

Key performance targets

Progress towards these priorities is measured using the key performance indicators set out below.

Be Healthy.						
LAA	Ref	Definition	Most recent performance	Performance comparison	Progress update	Next target
	NI50	Children reporting good relationships with their family and friends Source: TellUs Survey	59.2% (2009/2010)	Middlesbrough's performance of 65.3% in 2008/2009 was top quartile nationally.	2009/2010 performance above national (56%) and regional (56.7%) averages.	TBC (2010/2011)
	NI51	Effectiveness of child and adolescent mental health (CAMHS) services (score 4-16)	12 (2008/2009)	Middlesbrough's performance in 2008/2009 was bottom quartile nationally.	Commentary will be updated when 2009/2010 figure available.	TBC (2010/2011)
	NI53a	Infants breastfeeding 6-8 weeks from birth	TBC (2009/2010)	Middlesbrough's performance of 28.7% in 2008/2009 was bottom quartile nationally.	Commentary will be updated when 2009/2010 figure available.	32.3% (2010/2011)

Be Healthy.						
LAA	Ref	Definition	Most recent performance	Performance comparison	Progress update	Next target
◆	NI56	Obesity in primary schools: Year 6	21.9% (2009/10)	Middlesbrough's performance of 22.74% in 2008/2009 was bottom quartile nationally. 2009/2010 national average was 18.3%.	Year on year improvement from 2008/2009, reflecting the breadth of activity in place to improve behaviour and tackle underlying attitudes.	22.30% (2010/11)

Local delivery arrangements

The theme is promoted through a number of partnerships, including the following:

Children and Young People's Trust

Middlesbrough's Children and Young People's Trust (the Trust) was formed in 2007 and brings together those organisations delivering services to children and young people in order to improve communication, share information, integrate services and achieve better outcomes for all children and young people.

The Trust has developed a Children and Young People's Plan 2008–2011, which outlines the priority actions that will be taken to help Middlesbrough's children and young people succeed. Five themed sub-groups addressing each of the 'Every Child Matters' outcomes support the Trust board. Additional groups address communication and engagement and workforce development.

The Trust is committed to investing heavily in the future well-being of Middlesbrough's children and young people, and the Partnership will continue to direct its resources to the identified needs of children and young people in Middlesbrough.

School partnerships

The strong partnership between the Council and schools is developing further with the introduction of an over-arching strategic group that will lead in pushing forward school improvement and raising standards. The group will comprise the Children, Families and Learning Department's senior management team and representative head teachers from the primary, secondary and special sectors. It will build on existing primary and secondary Education Improvement Partnerships that are school-led, with local authority support.

Voluntary and community sector

The part of the voluntary and community sector that supports young people is well developed in Middlesbrough. The sector is closely involved in the development of strategic plans through Middlesbrough Voluntary Development Agency and the Middlesbrough Community Network. There is widespread involvement of the sector in the Children and Young People's Trust themed sub-groups. Sector-led research into the qualities and skills young people value in professionals working with them has influenced the workforce development strategy.

Locality working

A number of services within Children, Families and Learning, health services and the police already operate within four co-terminous localities: East, Central, North and South.

The move towards integrated and/or networked services will build on this to provide services focused around children and their families.

The Council's contribution to this theme and performance in 2009/2010

The Council is a major contributor to this theme, through the work of the Children, Families and Learning (CF&L) Department, which provides safeguarding and children's social care services, provides youth services, leads on teenage pregnancy and works with schools to improve educational attainment. CF&L leads on the 'Supporting children and young people' theme within the Council.

The Council's progress in delivering its contribution to these targets in the last year is set out below.

Be Healthy

Tackle childhood obesity:

- The Nutrient Standards have been embedded in primary schools and were introduced into secondary schools from September 2009 in line with national targets.
- 80% of schools achieved the healthy schools standard against the nationally agreed target of 75%, and participation rates in PE and sport in school are well above comparator averages.
- Established Cooking Together programmes in 12 schools and Hoop-Hop clubs in 10 schools and youth clubs.

Increase the number of new mothers who are breast-feeding:

- Separate breastfeeding facilities are available for mothers who wish to breastfeed in private at all of Middlesbrough's children's centres.
- Middlesbrough's children's centres have adopted the PCT's breastfeeding policy, contributing to its revision, and have been identified as "breast-feeding friendly" venues by the Food For Life partnership.

Improve the availability of mental health services:

- Completed a mapping exercise for all tier 1 and tier 2 mental health services, which is being used to inform actions to improve the effectiveness of CAMHS.
- Developed and implemented a referral pathway into tier 3 Specialist CAMHS for Mind.

Increase the opportunities and services for children with disabilities:

- Established a multi-agency transitions team to improve service planning and delivery for young people making the transition from children's to adults' social care provision.
- Appointed a senior education adviser for vulnerable children who is providing a focus on developing post-16 education opportunities for young people with learning difficulties and/or disabilities.

Action plan 2009/2010

Be Healthy.			
Ref	Action	Deadline	PI links
Tackle childhood obesity:			
CF	Increase the number of sport and physical activity sessions offered during school summer holiday period from 40 to 50.	Sep. 2010	NI56
CF	Support schools in promoting physical activity and healthy lifestyles in line with the health and well-being programme funded by the Big Lottery fund.	Mar. 2011	NI56 NI50, 55, 57
CF	Increase the number of schools involved in the Cooking Together programme for children and their parents from 12 to 20.	Dec. 2010	NI55-56
CF	Increase the number of schools and youth clubs running a Hoop-Hop club from 10 to 20 and organise a Hoop-Hop Festival targeting 100 participants.	Jul. 2010	NI55
CF	Train 95% of school co-ordinators in the new enhanced Healthy School model, enabling schools to develop an outcomes-based model to support local priorities, including tackling obesity.	Mar. 2011	NI55
Increase the number of new mothers who are breast-feeding:			
CF	Work with Middlesbrough and Redcar & Cleveland Community Services (Primary Care Health Trust) to promote, and increase the take up of, the UNICEF "Baby Friendly" accreditation.	Mar. 2011	NI53
CF	Highlight the benefits of breastfeeding during breastfeeding awareness week in May.	Jun. 2010	NI53
Increase the opportunities and services for children with disabilities:			
CF	Develop a transitions database to support the work of the multi-agency transitions team in identifying levels of need and planning service provision to support young people with disabilities.	Sep. 2010	NI54