Implementation Plan – Wiltshire Section

WJLHWS commitments by Integrated Care Strategy theme	Meeting	What we will do in the next twelve months	What will be different for our population in 5 years time?	Metric (specific measure)	Target (including timescale)	Most recent position (dates) plus relevant commentary
Cluster 1: Prevention and early inte	rvention		umer			
Lay the foundations for good emotional wellbeing whilst young – by developing a coordinated approach and promoting a core offer in schools across Wiltshire	Integrated Care Alliance	Recommission children's community health services, ensuring they are inclusive of a coordinated approach and core offer for emotional wellbeing in schools; and public	There will be improved levels of wellbeing in schools in Wiltshire There will be increased	ICB/CAMHS/HCRG measures Overall attendance for all	To be set and confirmed during Q4 23/24 To be set and confirmed during	
		health nursing services.	school attendance and a reduction in suspensions.	pupils	Q4 23/24	
	SEND board	Support those with SEND and respond to Ofsted inspections.	Children and young people with SEND will have improved outcomes and	Overall attendance for EHCP and SEN Support pupils	To be set and confirmed during Q4 23/24	
			life experience.	SEND outcomes at KS4 (G5+ in both English and Maths)	Between 8.5% and 10.5%	9.9% (Mar 23). The national level for 2022 was 7%
Empower individuals across the life course – in all schools, with working age adults and older	FACT	Evaluate the findings of the safe outside the home pilot in Wiltshire.				
people – with advice focusing on healthy lifestyles, smoking cessation, alcohol and substance	Consider the findings of the latest pupil survey and the implications for work to reduce risky behaviour in schools.	pupil survey and the implications for	There will be reduced levels of risky behaviour in schools	% of secondary pupils offered illegal drugs	To be set in Q1 24/25	80% (2021)
misuse			% of secondary pupils that have not tried illegal drugs	To be set in Q1 24/25	93% (2021)	
Combatting Drugs Partnership		There will be reduced levels of obesity and substance misuse in adults	% of children and young people (aged 5-16 years) estimated to be physically active	60% by 2032	47.8% (2022) Wiltshire now shows slightly better levels of activity than the England (44.6%) but now below the South West average (49.1%), the activity level has decreased in Wiltshire for the first time in 21/22, and it is currently unclear why, this may be an impact of the Covid-19 pandemic and recovery.	
				% of persons aged 18 years and over estimated to be overweight or obese	75% by 2032	72.9%. Small improvements in each of the last three years put the activity levels in adults in Wiltshire above the national (65.9%) and regional (70.5%) average. Wiltshire figures are not quite on target but trend is indicating it is on track to be achieved
	Combatting Drugs Partnership Healthy Schools as part of education risk of smoking and vaping. Wiltshire Primary Care and Wilts Council health coaches delivering	Roll out PSHE materials as part of Healthy Schools as part of education on risk of smoking and vaping.		Proportions of secondary and year 12/FE pupils reporting vaping weekly or daily	To be set in Q1 24/25	9% (2021) Increase from 6% in 2020
				smoking on a weekly/daily basis for year 12/FE pupils over the years	To be set in Q1 24/25	11% (2021) Decrease from 17% in 2020
		Wiltshire Primary Care and Wiltshire Council health coaches delivering targeted work on healthy lifestyles and smoking cessation.		Quit rate of Health Coach service	To be set in Q1 24/25	55%
				Quit rate of smoking cessation in Primary Care	35% or over (4 weeks after seeking support)	43.5% (Dec 22)

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		Implement a new whole life substance misuse service and evaluate its performance.		Rates of hospital admission episodes due to poisoning by illicit drugs	31 per 100,000 (England average) by 2025	35 per 100,000 New substance misuse service contract commenced in April.
Prevent ill health - through increased uptake of screening, health checks and immunisations as well as tackling antimicrobial	Health Protection Assurance Group	Continue to support and work with the lead organisations (NHS, UKHSA) to improve immunisation and screening uptake, in particular	There will be improved vaccine and screening service uptake across the local population as a	% uptake of different vaccines across the life course	As per national requirements	Public Health Outcomes Framework - Data - OHID (phe.org.uk)
resistance through the best use of antibiotics		through local community engagement and addressing place level health inequalities.	whole, and reduced inequalities in uptake by e.g. geography, ethnicity, deprivation	NEW TARGET – As of October 2023 new targets introduced – 75% diagnosed within 28 days of referral.	Diagnosing 75% of cancer cases within 28 days by 2028	35 per 100,000 New substance misuse service contract commenced in April. Public Health Outcomes Framework - Data -
				% uptake of screening programmes (cancer and non-cancer)		
		Promote antimicrobial stewardship with the public and through professional networks	Public and professionals understand the need to optimise use of antibiotics	Numbers of prescribed antibiotics per 1000 population	ers of prescribed tics per 1000 tion To be set in Q4 23/24 BSW HCAI collaborative – working reducing HCALs this includes AMR 2039 (2021)	=
Adopt a proactive population health approach – rolling this out	Living Well	Population health management approach will be applied to areas	Health professionals will have a better	Falls in over 65 year olds per 100,000 population	To be set in Q4 23/24	2039 (2021)
to new areas (such as moderate		such as moderate frailty, diabetes,	understanding of	Prevalence of asthma	6.4% (England average) by 2025	7.1%
frailty) each year to enable earlier detection and intervention		deprivation, air quality, CVD, cancer, maternity and infant health, mental illness, end of life and chronic illness. This sits with Public Health	predictors of disease and implement appropriate preventative and predictive capability	Hospital admissions due to mental health conditions in under 18 year olds per 100,000 pop. BSW ICB data	87.5 (England average) by 2025	108 (2021)
Cluster 2: Improving social mobility	and tackling inequalities					
Promote health in all policies – including housing, employment and planning. This will include the development of sustainable communities, whole life housing and walkable neighbourhoods.	ADG	Publish a new Local Plan and Local Transport Plan outlining measures for the development of sustainable communities, whole life housing and walkable neighbourhoods.	It will be easier to move around local communities in a sustainable manner	% adults estimated to walk for travel at least three times per week ? source? Not from LA	13.1% by 2025	11.7% (2021)
		Develop health and care campuses that transform healthcare, employment and economic opportunities (e.g. HEAT project in Salisbury)		HEAT project delivered	HEAT project delivered by 2024	HEAT project underway
Support healthy home settings – with action on fuel & food poverty, help to find stable well paid work, mental health and loneliness and by increasing digital inclusion	Integrated Care Alliance	Continued provision of the warm and safe service	There will be fewer experiencing fuel poverty	% in fuel poverty Client referrals to warm and safe (availability and uptake of warm housing interventions)	To be set in Q4 23/24	10% (2020)
		Employment support team will help those with mental health or learning disabilities gain employment		% gap in the employment rate between those with a learning disability / mental health and overall employment rate – this measure is being dropped by DHSC – we are reviewing its	To be set in Q4 23/24	

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				continuation as a local measure Client referrals to WEST		
		Area Board health and wellbeing champions and grants will undertake a range of activity to tackle loneliness, alongside measures in the adult social care prevention strategy		Narrative update		
Give children the best start in life – with a focus on the whole family, family learning, parenting advice, relationship support, the first 1000 days/ early years and community health services	FACT for ICA/ HWB	Deliver the Families and Children Transformation programme and Family Help Strategy 2023-27	More children will achieve a good level of development before starting school	% of children at good level of development when starting school % of children at good level of development with Free	To be set in Q4 23/24 To be set in Q4 23/24	72% (2019) 66% for FSM in 2019 7% for SEND
recutif services				% EY Entitlement take-up 2 yr old child development outcomes overall score (%) for 5 domains.	To be set in Q4 23/24 To be set in Q4 23/24	
		Launch and embed a pilot area (Warminster and Westbury) including Family Help Practitioners; Launch Online platform and branding;Initial interim report September '24: Final report	A clear unifying brand for Family Help Online database of services, community resources & activities Co-ordinated whole system workforce development offer	Pilot outcomes framework under development as part of commissioning the new service offer Narrative update detailing take up	Updates to be shared with Alliance Delivery Group and into the Partnership Committee and Health and Wellbeing Board	
Target outreach activity – identifying particular groups to improve access to services and health outcomes and tackle root causes	WHIG	BSW Inequalities Strategy details Wiltshire adult PLUS group to be GRTB (adults) and children of GRTB families (Children and Young People). Wider determinate priority for Wiltshire is connectivity and transport. The Wiltshire Health Inequalities Group oversees the implementation of the strategy and receives reports on activity aligned to these priority groups.	Reduction in health inequality demonstrated through the JSNA. Key metrics include: difference in life expectancy and healthy life expectancy across areas of highest and lowest deprivation. PLUS populations: Gypsy Roma, Traveller and Boater, Routine and Manual workers. Wider Determinant priority: Connectivity and transport -	Demonstration of investment and impact of Wiltshire Health Inequalities funding across BSW and Wiltshire priority themes and CORE20PLUS5 groups	Updates to be shared with Health and Wellbeing Board and ICA Partnership Committee.	Not applicable
Improve access through online services and community locations	ADG	Support the development of the BSW estate strategy	People will find services easier to access with increased co-location and online booking facilities	Estate capital receipts retained locally and used for transformation		
		Support increased usage of online booking facilities	Reduced digital exclusion and maximised opportunities technology can bring to improve			

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			equitable access to services.			
Support local community action – through initiatives such as neighbourhood collaboratives allied to the development of Primary Care Networks, community based programmes and social prescribing, the community mental health model, area board activity,	Neighbourhood Collaboratives / Connecting With Our Communities (CWOC) Programme Local MH, LD and Autism sub group	Launch Neighbourhood collaboratives across Wiltshire April 2023 – Pathfinder site launched. May 2023 – Onboarding Launch programme agreed and online portal established June 2023 – Devizes and Chippenham, Corsham, Box areas commence launch, first pathfinder report. July 2023 – First Wiltshire Collaborative event; share learning; and Pathfinder report. By April 2024 all neighbourhood areas will be on their collaborative journey and will have completed or commenced the Launch programme.	Every area (13) will have a mature and well-functioning neighbourhood collaborative	Number of launched neighbourhood collaboratives Number of mature and well functioning neighbourhood collaboratives Co-production training sessions fully attended. Specific KPIs developed through each collaborative.	Every area (13) will have an established neighbourhood collaborative by 2025	Collaboratives in Melksham and Bradford on Avon, Trowbridge, Chippenham Corsham and Box, Devizes and Salisbury (across 3-4 PCNs) are in various stages of establishment covering 7-8 PCN areas.
	mental health placements through the Mental Health, Learning Disabilities and Autism sub group of the Wiltshire Alliance. The group will	mental health placements through the Mental Health, Learning Disabilities and Autism sub group of the Wiltshire Alliance. The group will	Community mental health model will see more placements in the community with the Community Services Framework embedded	% of people aged over 14 on GP LD registers receive an annual health check and health action plan by March 2024	75% of people aged over 14 on GP LD registers receive an annual health check and health action plan by March 2024	M4 2023 12.9% M4 88% have HAP in place
			dementia diagnosis rate adults with a learning disability and/or who are autistic per million adults and under 18s with a learning disability and/or who are autistic per million	by March 2024 no more than 30 adults with a learning disability and/or who are autistic per million adults and no more than 12–15 under 18s with a learning disability and/or	M4 2023 60.6% M6 7 Wiltshire adult inpatients M6 6 Wiltshire CYP inpatients (Tier 4 Provider Collaborative Commissioned bed)	
				who are autistic per million under 18s cared for in an inpatient unit	with a learning disability and/or who are autistic per million under 18s are cared for in an inpatient unit	
	cwoc			Number of adults and older adults supported by community mental health services – Health	a 5% year on year increase in the number of adults and older adults supported by community mental health services.	TBC
				Number of adults receiving provision from the LA's MH and LD services		

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		Develop a Connecting With Our Communities programme. The group is responsible for ensuring best practice against the BSW People and Communities Strategy and will develop a work programme, which will launch in July 2023, having completed the work on a gap analysis and identified priority work areas. Develop and implement a new adult social care prevention strategy	Residents will be able to share their views and thoughts on our work and understand how their opinions can directly shape our work and priorities.	Hold at least 2 Forum events within 23/24, moving to 4 from 24/25.	Able to evidence how feedback has informed our programmes of work.	CWOC group established and developing forward programme of topic areas.
Pilot community conversations – starting with neighbourhoods in Wiltshire that have significant deprivation and roll these out gradually across the county.	HWB	Continue the community conversation pilots in Studley Green and Bemerton Heath and evaluate the early learning for other potential areas	The community conversation approach will have been rolled out to several other areas of deprivation in towns such as Chippenham, Melksham and Calne	Metrics will be defined by communities and shared on an ongoing basis		
Consider the role that procurement can play in delivering social value and the way in which organisations can act as anchor institutions	ADG	Share the learning from work undertaken by foundation trusts on their role as anchor institutions	Procurement exercises will transparently demonstrate the social value of procurement exercises	Local training opportunities created through procurement		
	HWB	Develop best practice based on the Wiltshire Council social value policy		% of spend with SME and VCSEs (LG proc. Index)		32% with SMEs in 2022 14% with VCSEs
Embed Healthwatch Wiltshire and VCS voices in relevant decision-making structures; ensure the results of consultation are	HWB/ ADG	Welcome VCS and Healthwatch reps as full members of the Wiltshire Health and Wellbeing Board.		Full membership	N/A	Complete
reflected in decision papers		Review VCS input to sub groups.		Review conducted by VCS forum	N/A	Complete
		Outline the findings of consultations		Consultation responses embedded into all relevant paper		
Cluster 3: Integration and working t	together					
Provide integrated services at key stages in a person's life – including early years, special educational needs and disability, family help, whole life mental health and LD& A, later life planning, end of life care, and increasing the provision of personal budgets and coproduction of services	Living Well Ageing Well and Urgent Care	Evaluate additional areas suitable for personal budgets	More people will receive personalised care	% of adults with a personal budget % of adults using Direct Payments % people reporting they have agreed a plan with a healthcare professional from their GP practice to manage their condition.		
		Roll out later life plans to everyone over 85 and earlier cohorts as appropriate		Number of later life plans (ICB)		
		Implementing new End of Life care provision model, ensuring people are supported to die in the place of their choosing (launch new model October 2023).		% of patients that die in preferred place of death	90%	Current performance is 96%

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Boost 'out-of-hospital' care, dissolving the divide between primary and community health	Living Well	Review primary care commissioning arrangements and alignment with public health, pharmacy, optometry	Access to NHS dentistry will be improved	Number of NHS dental practices accepting new patients in Wiltshire	Target to be set during Q4 23/24	
services - through community multi-disciplinary teams, clustering services around primary care networks, and guaranteeing support to people in care homes		and dental services alongside local community and social care provision	Primary care will be commissioned alongside other services locally	# accessing D2A beds on discharge from hospital Number of special schools in Wiltshire participating in the	Targets to be set during Q4 23/24	
	Urgent Care and Flow	Ensure each care home has a named GP		special schools sight test service		
		Urgent Care and Flow	Residents requiring	Percentage and number of care homes with named GP		
		Transformation. Over the next 12 month this	support to be discharged from hospital will	Average length of Ctavin	28 days by July 2023	Current I OS is 41 days. An action plan has been
		programme will deliver: - • Discharge Communications Project to improve patient, family and carer experience and reduce discharge delays (resources launching July 2023, full impact September 2023) • Same Day Emergency Care expansion. • Maximising capacity of Home First	experience timely, integrated care and enables as many people as possible to return to their own homes. Residents who experience mental health problems will be able to seek and receive timely support, locally to them — preventing deterioration.	Average length of Stay in Care Homes	28 days by July 2023	Current LOS is 41 days. An action plan has been produced to support an improved performance including:- • A deep dive to determine any trends in outliers • Weekly meetings with providers to share insight and learning. • Self-funding patients creating a delays in discharge – ongoing work with council legal team to aid discharge
				% receiving 2-hour Urgent Care Response seen within 2 hours (ICB) % of LA ASC clients accessing Rapid Response service	70% (by June 2023)	Current position in September 2023 is that 70% of patients are receiving treatment within the 2 hour timeframe. There is an action plan in place to ensure that this performance is consistently achieved
				Virtual Ward 'beds'	136 'beds' by December 2023 180 by March 2024	Current position is that 42 beds are open in September 2023 and is below trajectory. Revised trajectory considered at Ageing well and Urgent Care Group on 29 th September 2023
				length of stay in community hospitals	35 days across all wards by July 2023	Current length of stay is 39.1 days. Weekly MADE events are taking place to expedite discharge where possible
				number of people returning to their own home after a hospital admission		
				% of people who remain at home 91 days after entering the reablement service	Between 80 and 90%	78.8% (June 23)
				hospital trust lengths of stay.	To be confirmed following completion of current demand and capacity refresh	
		A task force drawing on all Wiltshire Alliance subgroups will be	People on the learning disability or autism will be	Number of working-aged adults in residential care	Between 12 and 15	17.5 (June 23)
		developed for community Services	better supported to access health care and support.	((Long-term support needs of younger adults aged 18-64 met by admission		Within Wiltshire there is a lack of alternative provision and this is being addressed as part of the

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				to residential and nursing care homes, per 100,000 population - ASCOF)		transformation programme, the result of which will be more supported living, independent service funds and direct payment provision.
Enable frontline staff to work more closely together – planning our workforce needs together, developing case studies on front line cooperation, supporting	Ageing Well and Urgent Care (Wiltshire Operational Group)	Develop Wiltshire workforce plans as part of BSW strategy	There will be clear career pathways in place for both health and social care and professional recognition across both	Narrative update		
shared records and IT and sharing estates wherever possible		Enable NHS access to liquidlogic as appropriate and increased shared records We have a ICR product called Carecentric by company called Graphnet which allows health and social care colleagues to view each other's client information (within strict parameters and security arrangements). This bridges LL and SystmOne.	Data is collected once and shared with those who need it	Number of social care plans digitised with appropriate standards, access and interoperability Number of shared care plans recorded on the ICR and the frequency in which these are accessed by multiple front line workers		
		Develop Wiltshire estate plans as part of BSW strategy	colleagues will feel supported in their roles, and able to work with people across organisations, taking advantage of improved training, technology and integrated systems, able to focus on prevention and early intervention	Roll out of BSW population health insights tools to be accessible to all providers including primary care.	100% coverage	Primary care are able to access these tools. Tools are accessible across organisational boundaries to enable shared insight.
Ensure carers benefit from greater recognition and support by improving how we identify unpaid carers	LA Commissioning	Rollout training for GPs and other health professionals on recognising and referring for support unpaid carers	Unpaid carers know how to access support	Analysis of unpaid carers registered and actions to address any gaps / learning. This measure is currently under review by DHSC as measure is not fit-for-purpose and results are not directly attributable to LAs. No update yet on replacement or change in methodology.	KPIs to be set during Q4 23/24 7.2 (average for comparator authorities by 2025)	6.6 (2021)
				% unpaid carers say they find it easy to find information about services	Target to be set during Q4 23/24	58.9% (2021)
Improve join-up of services including specialised commissioning	BSW ICB – commissioner of specialist services eg CAMHS, HCRG plus LA commissioners	Prepare for delegation of specialised services and identify opportunities to improve integration with local services	There is seamless provision in areas such as CAMHS	Children and young people (ages 0-17) mental health services access (number with 1+ contact)	KPI and Target to be reviewed and set during Q4 23/24	

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		Identify opportunities to commission provision for military communities alongside that for spouses and families and local communities	The military covenant statutory responsibilities are fully delivered	Self assessment of military covenant is completed and published	November 2023	Underway
Drive improvement through collective oversight of quality and performance, reconfigurations and recommissioning; overseeing pooled budgets and joint teams together – including the ICA transformation programme and Better Care Plan	ADG	Develop a dashboard of metrics for regular review by the Wiltshire Integrated Care Alliance (drawing on this report) and in turn the Wiltshire Health and Wellbeing Board	Performance is measured in a transparent and understandable way	£ held in pooled budgets Joint teams Joint commissioning exercises	Narrative updates to be provided – linked to development of population health dashboards across BSW. Aiming to have draft in place Q1 24/25	
better care rian						

Sub-groups of the Wiltshire Integrated Care Alliance

ADG = Alliance Delivery Group (sometimes known as Local Commissioning Group, including Better Care Plan provisions)

WHIG = Wiltshire Healthcare Inequalities Group

SEND = Special Educational Needs and Disabilities Group

FACT = Families and Children Transformation Ops Group

CWOC = Connecting with our communities group



Core Work Programmes and Enabling Groups (report directly to Partnership Committee) Health and Care Inequalities

Neighbourhood Collaboratives

Connecting with our Communities