

COMMUNITY / NEIGHBOURHOOD RENEWAL STRATEGIES 2002-2005 – YEAR 1 REVIEW

PROGRESS TRACKER SUMMARY – HEALTH & WELL-BEING

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The Kensington and Chelsea Partnership steering group agreed that a Year 1 review of the Community and Neighbourhood Renewal strategies should take place. The review should

- identify **achievements** to 31 March 2002
- identify **issues** preventing implementation of particular objectives and actions;
- identify **new opportunities** which have arisen since the production of the strategies;
- Present the **priorities** to be adopted to 31 March 2005.

The main product of the review should be:

- a completed progress tracker for each cluster with updates for each target.
- a progress tracker summary for each cluster on achievements, issues, new opportunities and priorities.
- a brief and easy to read general report covering all the clusters .

This is the Progress tracker summary for Health and Well-Being

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ACHIEVEMENTS to 31st March 2003 (* indicates NRF supported)

Community Strategy/Neighbourhood Renewal targets:

- Core standards were set in 2002 for each general practice to improve the quality of service and reduce inequalities.
- Delayed discharges for K&C residents from local hospitals remain low – management effort is focused on improving the care pathways for older people between and across organisations.
- Good progress has been made on implementing priorities in the Quality Protects Plan to improve placement choice and adoption outcomes
- Sure Start Golborne – Plan approved by Sure Start Unit. Director of Programme recruited and Staff recruitment in progress.

NRF funded*

- The Realising the Potential NRF project completed the 'Bridging the Gap research report'. A Stakeholders workshop took place on 28th March. Kensington and Chelsea College recruited a Work Placement Co-ordinator to identify appropriate work opportunities in local NHS for students on its health care courses
- Awareness of dental care was raised amongst children using two healthy diet information sessions organised for workers and parents, facilitated by a dietician and the Oral Health Team. Trainer cups (to improve oral hygiene) being distributed to children through the Family Link visits and breast feeding counsellors.
- A consultant was recruited and an evaluation report completed in March for the Alcohol Referral Service.
- The pre-production for a Peri Natal Depression Video was completed. This involved consultation with community groups and statutory and non statutory organisations, plus research visits. The response to the video was overwhelmingly positive. An accompanying booklet was written in Arabic (and translated into English)

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Primary Care Trust

- The K&C PCT came into being on 1st April 2002. There has been significant organisational change throughout the year to work towards the harmonisation of services.
- In the past year access to primary care services in K&C PCT has improved dramatically. PCT achieved the 24 hour target that 90% of patients should be able to see a primary care professional within 24 hours, and narrowly missed the 48 hour target, that 90% of patients should be able to see a GP with 48 hours.
- There are currently no patients waiting over 9 months for treatment as an inpatient at Chelsea & Westminster Hospital, St Mary's Hospital or the Hammersmith Hospital. There are no patients waiting more than 21 weeks at the Chelsea & Westminster or at the Hammersmith. This is due to careful management of GP referrals and more efficient management of waiting lists.
- Patients who live in K&C with suspected cancer do not have to wait more than 2 weeks from the time they see their GP to having a specialist appointment. Patients with a confirmed diagnosis of breast cancer are treated within one month of their diagnosis.
- The PCT upgraded several wards at St Charles hospital as well as the rehabilitation unit. They have developed new and much improved nursing homes for older people and have undertaken a number of clinic refurbishments. They have invested heavily in the Allen Daley Ward and Therapy areas within the St. Charles hospital. This has resulted in an improved environment and facilities for patients and staff. Two new Nursing Homes at Princess Louise of Kensington and at Woodfield Road are nearing completion. The facilities available within these units will provide improved accommodation for residents and staff.
- The local Healthy Schools Programme has now successfully been accredited. So far 13 primary and secondary schools across K&C are signed up to the programme at Level 3, the highest level of involvement. Remaining schools are being recruited to the programme.

RBKC Social Services

- The Royal Borough's Social Services department achieved a three star rating from OFSTED and the Social Services Inspectorate
- Child and Adolescence Mental Health Services have received beacon status. from the Government
- RBKC successfully bid to be a pilot site to develop an Identification, Referral and Tracking project. The initiative is developing systems and processes to help prevent vulnerable children slipping through the net as they move between agencies or geographical area and as they progress through their lives.

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ISSUES preventing implementation of particular objectives and actions

- The newness of the PCT has created many organisational issues e.g. in management capacity.
- The Charter Mark scheme for family centres has been changed and they are not taking any applications at present. The Royal Borough will apply for its family centres as soon as the new scheme is up and running.
- Sure Start Golborne – lack of office space for Sure Start Golborne Team and general difficulties in recruiting health staff.
- Childcare provision for 0 to 3 year olds
- Possibility there will be no K&C BME Health Forum after December 2003.

New **OPPORTUNITIES** since 31st March 2002

- The Government has allocated the Kensington & Chelsea Partnership an additional £1.081 million from the Neighbourhood Renewal Fund in 2004/05 and £1.081 million in 2005/06.
- The PCT only came into being on 1st April 2002. The PCT being a new organisation, and coterminous with the local authority, has created new opportunities for joint working. Examples of possible areas for development: simplifying health/social care partnerships so the user “sees” one service; establishing further partnership arrangements (i.e. pooling resources, integrated provision and lead commissioning).
- Appointment of Diversity Manager to support GPs using interpreting services
- PCT investing in advocacy and carer support in Mental Health Services
- PCT will commission work with BME groups to discuss concept of more community based care

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- Local Public Service Agreement (LPSA) targets approved for, maximising the contribution adoption can make to providing permanent families, providing high quality pre-admission and rehabilitation care to the elderly and Improving health by increasing physical activity amongst targeted groups
- PCT Public Health department & RBKC Leisure Services will run for 3 years to develop exercise opportunities for 2000 sedentary people (successful joint LPSA target). Activities will focus predominantly on older people, lone parents and cardiac rehabilitation in the community.
- RBKC to pilot the Social Care Institute of Excellence Team Management
- GP retirement and recruitment of new GPs under new GP contracts
- Secure funding for 3 years for the PCT
- Launch of patients forum from 1st December 2003 will provide an opportunity for public and user engagement.
- Overview and Scrutiny Committee sub-committee on Health Inequalities are to investigate access to Primary Care services.
- Realising the Potential project to submit a proposal to the London Development Agency for funding to develop an apprenticeship/intermediate labour market scheme to support long term unemployed residents access employment in the K&C PCT
- Agreement to rebuild part of St Charles hospital as a centre for rehabilitation. PCT will work with our partners to ensure this service supports older people and prevents hospital admission and supports safe discharge when hospital stays are necessary.
- Review of St Charles Hospital to ensure they are meeting the needs of the local community.
- Potential development opportunities in sites at 1) Princess Louise Hospital 2) Westway Health and Social Care Centre

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PRIORITIES to 31st March 2005 *indicates new (not in the strategies)

- The work of the local health and social care network is based on a clear philosophy, sound inter-agency partnerships, effective practical assistance and good planning of service delivery. Both the Royal Borough of Kensington and Chelsea (RBKC) and the PCT recognise the need for closer alignment between health and social care, the latter being delivered not only by RBKC but also by the voluntary and independent sector. Services are developed on the basis of understanding needs, consultation and clarity about desired outcomes.
- *Improve service to house bound in North Kensington. RBKC Education to agree procedure with PCT to track hospital and care leavers and offer library and information services to their own homes. *(from the Learning and Leisure cluster)*
- * Obtain the best picture of health inequalities in the Borough (using in particular new census data)
- Increase in the number of residents involved in healthy living activities.
- Improve access to public sector services that impact on health e.g. health, social care & leisure.
- Better understanding of the health needs of, and engagement with, children and young people
- Follow-up recommendations of the Council's review of consultation regarding engagement of harder to reach and marginalized groups