

	A	B	C	D	E	F
1	Actions	SSDG Lead	Partnership (Partnership Lead Officer)	Timescale for delivery	Quarter 3 Progress Update (submitted by 14.02.17)	Quarter 1 Progress Update (submitted by 14.07.17)
2	HWB PRIORITY Support all children, young people and families to make health choices:	Rachel Dickinson	Children & Young People's Trust (Richard Lynch/Alicia Marcroft)			
3	Ensure the 0-19's integrated public health service for children and young people will make a major contribution to the development of self-esteem; positive relationships; and healthy behaviour and lifestyle choices.				The transition of the 0-19 service to BMBC and challenges to future public health funding necessitate a level of service delivery remodelling. The changes present an exciting and welcome opportunity to influence the way in which these services are delivered in the future, taking the national HCP framework and adapting this to meet local needs with a clear vision for improving the health and wellbeing outcomes of our children, young people and families across the Borough. The new service model will be focused on the below high impact areas. The six early years high impact areas are: <ul style="list-style-type: none"> • Transition to parenthood and the early weeks • Maternal mental health • Breastfeeding (initiation and duration) • Healthy weight, healthy nutrition (to include physical activity) • Managing minor illnesses and reducing hospital attendance/admissions • Health, wellbeing and development of the child aged 2: Two year old review (integrated review) and support to be 'ready for school' The six school aged years high impact areas are: <ul style="list-style-type: none"> • Resilience and emotional wellbeing • Keeping safe: Managing risk and reducing harm • Improving lifestyles • Maximising learning and achievement • Supporting complex and additional health and wellbeing needs • Seamless transition and preparation for adulthood 	
4	• A targeted approach to improving the oral health of children.				Since 2007/8 the proportion of 5 year olds free from tooth decay in Barnsley has improved by almost 10%. Although this is still below the England average our rates are improving faster which is closing the gap. A significant amount of work across the borough has contributed to this. An evidence based Action Plan is in place and this work is led by the multi-agency Oral Health Improvement Advisory Group (OHIAG). The work includes all family centres across the borough having set up a brushing club, distributing free toothbrush/paste packs to the most vulnerable families via food banks, and the development of an e-learning package for frontline staff on oral health. The recent superhero campaign has been a huge success, with resources being used by all dentists and primary schools across Barnsley. As part of the campaign a competition was held with primary school children to design a poster. The campaign, using the tag line 'Brushing twice a day is the super hero way', is helping to encourage children to brush their teeth, visit the dentist and to encourage parents to ask for fluoride varnish at the dentist. A consultant from Maxillofacial Surgery at Barnsley Hospital has recently joined the OHIAG, which has opened up opportunities for work targeting the most vulnerable families that are attending for children's dental extractions. An Oral Health Needs Assessment is currently in development and the recommendations from this will be incorporated into the OHIAG Action Plan.	
5	• Reduce childhood obesity starting with a focus on the areas of highest prevalence.				An overview of the National Child Measurement Programme (NCMP) data for Barnsley (2015/16) was presented to TEG on 20th January 2017. Further analysis to understand variation by electoral ward and school is being undertaken by the Research and Business Intelligence Team using an enhanced data set. The output of this analysis correlated with other datasets such as participation in the Daily Mile programme will provide a focus on the areas of greatest need.	
6	• Ensure sexual health services, including contraceptive services, are accessible, personalised and effective, and reduce under-18 conceptions.				Sexual Health services offer a hub and spoke model to ensure equity of access and target those most vulnerable to poor sexual health outcomes and teenage pregnancy. All service meet the 'You're Welcome' Quality Criteria which ensures services are young person friendly in terms of accessibility, environment and monitoring and evaluation of services.	

	A	B	C	D	E	F
7	<ul style="list-style-type: none"> • Ensure physical activity opportunities and healthy eating are embedded in school based programmes 				<p>Physical inactivity is a big problem across Barnsley, with one of the highest levels of inactivity across South Yorkshire.</p> <p>Being physically active in childhood is proven way of reducing the likelihood of a range of chronic conditions such as obesity, type II diabetes and heart disease as well as improves educational attainment.</p> <p>One of the ways we are looking to reverse this trend is by working in partnership with Yorkshire Sport Foundation and Team Active to encourage all Barnsley Primary schools to deliver a 15minute health and wellbeing scheme called the Daily Mile.</p> <ul style="list-style-type: none"> • The Daily Mile is a 15 minute, run, jog or walk outside of the school classroom environment in addition to regular PE lessons and break times. • An awareness campaign will be implemented across the month of March 2017 which includes a visit from the Daily Mile founder, Elaine Wyllie on 23rd March 2017, who will be presenting a question and answer session at Barnsley Town Hall. • We have designed resources to help encourage schools to participate. • We are encouraging all schools to engage with the project and send their experiences, photos and videos of delivering the scheme to #BarnsleyMile. 	
8	<ul style="list-style-type: none"> • Work with early years services to ensure children are ready for school and opportunities are identified to tackle the causes of child poverty. 				<p>Child poverty and deprivation is one of the most important factors determining health inequalities in childhood and throughout life. The 0-19 service promotes and supports parents with early attachment which is critical to the growth and development of babies and children's physical, social and cognitive development which strongly influences their school readiness and educational attainment, their employment chances and general health and wellbeing outcomes through to adulthood and older age. There is overwhelming scientific and research evidence those events which occur when a baby is developing in the womb and in the early years play a fundamentally important part in later life and in the lives of future generations.</p>	
9	<p>HWB PRIORITY</p> <p>Encourage positive relationships and strengthen emotional health:</p> <ul style="list-style-type: none"> • Strengthen and maintain the capacity of the workforce within universal services to promote emotional health and wellbeing and to support all children, young people and their families to respond appropriately. (Delivery of Barnsley's Local Transformation Plan) 	Rachel Dickinson	Children & Young People's Trust (Richard Lynch)		<p>The wider programme on mental health workforce development has not yet commenced. However, implementation of a 'whole school approach' (TRHIVE) to targeted Primary Schools in Barnsley to improve resilience is underway.</p> <p>Since October 2016, 19 brand new Primary schools have signed up for training to enable them to start using the Thrive Approach in their schools. Eight of these schools started their training in October 2016 and the approach is already becoming embedded in their schools. In addition to this, 7 schools who were already actively using Thrive have had additional staff members trained. We also have 5 people (from 3 schools) due to start the Thrive Train the Trainers course in June 2017. This should enable us to provide more cost effective training courses across Barnsley and therefore help to sustain this approach.</p>	

	A	B	C	D	E	F
	Actions	SSDG Lead	Partnership (Partnership Lead Officer)	Timescale for delivery	Quarter 3 Progress Update (submitted by 14.02.17)	Quarter 1 Progress Update (submitted by 14.07.17)
10	HWB PRIORITY: Reduce smoking Create a Smoke Free Barnsley	Julia Burrows			<p>The smokefree Barnsley programme is being led by the Smokefree Barnsley Tobacco Alliance, which includes partners from across Barnsley; working together to see the next generation of children in Barnsley born and raised in a place free from tobacco, where smoking is unusual. The Smoke Free Barnsley Action Plan (2016 – 2018) is currently being refreshed by the Alliance to reflect the work that has been undertaken since its launch. A 10% prevalence ambition will be adopted by the group to match the target set at STP level by the STP Collaborative Partnership Board.</p> <p>The smokefree Barnsley programme of work is well underway, starting with the successful launch of smokefree playparks at Locke Park on 25 January 2017. The launch, working in partnership with local schools, received substantial interest from the local press, gaining coverage in the Chronicle, Hallam FM, Dearne FM and Radio Sheffield. Local Primary School children designed the signage that will be used in all the key parks across the borough. The initiative was fully supported by the majority of park users with the consultation showing that 9 out of 10 users want them to be fully smokefree. This message was also used on the signage as part of the social norms approach. Elsecar Play Park went smokefree on 14 February 2017 and it will be rolled out to the rest of the parks across the borough before the end of Easter 2017.</p> <p>Plans for smokefree schools and smokefree town centre zones are under development, working with key stakeholders, to launch these elements of the programme before the end of 2017.</p> <p>In order to ensure the Smokefree Barnsley Tobacco Alliance is working as effectively as possible to reduce smoking prevalence a 'CLeaR' self assessment is currently being undertaken followed by a peer assessment. CLeaR is an evidence based improvement model which helps develop local action to reduce smoking prevalence and the use of tobacco. This will enable the Alliance to evaluate local action on tobacco; ensure that local activity follows the latest evidence-based practice and identify priority areas for development. It is anticipated that the outcomes of the CLeaR assessment will be presented to SSDG in July.</p>	
11			Tobacco Control Alliance (Diane Lee)			
12	HWB PRIORITY: Reduce smoking Reduce the rate of smoking in pregnancy	Julia Burrows	Tobacco Control Alliance, Children & Young People's Trust & BHNFT Board (Diane Lee, Richard Lynch, Bob Kirton)		<p>In 2016, Public Health secured £30,000 funding from Barnsley's CCG to review and improve services in Barnsley.</p> <p>Following an independent review of services in Barnsley, a number of recommendations have been developed to improve the service to women and their significant others, to reduce Smoking at the time of delivery' (SATOD). The recommendations have been compiled into a Smoking in Pregnancy Action Plan, which is being delivered by the Smoking in Pregnancy Task & Finish Group. The next Task & Finish Group is due in early March and this should identify a series of key working themes and identify a number of projects that will receive part of the remaining funding.</p> <p>The current Barnsley CCG 'Midwifery Care Bundle' includes all aspect of midwifery care, except, the provision of stop smoking support. The review suggested there could be further benefits if the specialist provision for smoking in pregnancy be integrated into the range of services offered by maternity services to make it part of the normal care pathway. BMBC and Barnsley's CCG are in discussions to consider jointly funding and co-producing a new model for Barnsley, to include the provision of stop smoking support into the 'Midwifery Care Bundle'. This would enable the delivery of a more efficient and holistic pathway and a better experience for pregnant women in Barnsley.</p> <p>Work in ongoing locally and regionally to review the process for SATOD data collection. At present data submitted by Barnsley's CCG does not include the numbers of women that were registered with a Barnsley GP but had given birth in another hospital/district or; include women registered with a GP outside of Barnsley that had given birth in Barnsley. If the regional data collection process does not follow recommended guidelines, this will mean that all SATOD data within the Yorkshire and Humber region will be affected and not just the Barnsley rate.</p>	
13	HWB PRIORITY : Improve early help for mental health Development of a mental health alliance	Julia Burrows	Mental Health Alliance (in development) (Diane Lee)		Interviews with senior stakeholders will take place in early March to gain views on how we can increase stakeholder engagement at a strategic level and build on our existing structures to bring together prevention, early help and commissioning. A workshop will take place in May to engage wider with stakeholders and communities. Recommendations will go to SSDG in June.	

	A	B	C	D	E	F
14	HWB PRIORITY: Improve early help for mental health Mental Health workforce development	Julia Burrows	Mental Health Alliance (Diane Lee)		Work on mental health workforce development has not yet commenced.	
15	HWB PRIORITY: Improve early help for mental health Implement of the All Age Mental Health & Wellbeing Action Plan: 1. Prevention and early intervention for mental health and wellbeing 2. Improve access to mental health services and reduce waiting times from referral to assessment/ treatment to ensure that the most appropriate support is delivered at the right time, in the right place 3. Reduce stigma and discrimination 4. Improve recovery and resilience – provide service users with the information required for them to be able to make the most appropriate choices in how support is delivered to them to aid their recovery 5. To improve the support provided to families and carers 6. Mental Health Outcomes	Julia Burrows Rachel Dickinson & Wendy Lowder	Adult Joint Commissioning Board (Patrick Otway), Children & Young People's Trust, (Richard Lynch) & Stronger Communities Partnership (TBC)	2015 -2020	The All Age Mental Health Commissioning Strategy and supporting action plan are in place. The intention is to review the strategy on an annual basis and the supporting action plan bi-annually. Areas of progress (work on track) identified in the most recent update of the action plan (Feb 2017) include: • The commissioning of a Specialist Mental Health Midwife role. • Review and Implement the Perinatal pathway. • Development of a Community Eating Disorder Service. • Developing Peer Mentoring within College / Secondary schools. • Increased awareness of H&SC professions of the needs of Armed Force Veterans and their families through professionals having access to : HEE on-line resource & HEE free study day • Work in schools (Future in Mind; Samaritans) – publish a report which highlights the work undertaken in schools to promote resilience and mental wellbeing Areas identified in the action plan as halted/not on track include: • Psychological Therapies – reduce waiting times • Publish an evaluation of the 'Employment Advisors' pilot (linked to IAPT) being commissioned to commence April 2017	
16	HWB PRIORITY: Improve services for older people - Falls Develop integrated care pathways for the prevention and management of falls and osteoporosis that is clinically and cost efficient and has sufficient capacity to have a population impact	Rachel Dickinson	Adult Joint Commissioning Board (Brigid Reid)		In Barnsley a new concept is in development to utilise universal services to provide a more efficient effective falls prevention and intervention pathway borough-wide. This is done by conducting more detailed assessments and intervention options at an earlier stage (where appropriate), thus diverting the need for specialist services and treatment, and enabling Barnsley residents to live a fuller and more active life. A workshop for engagement of stakeholders will be held in March to proof the concept. Invitees will be from across the health and social care system, voluntary sector and other provider services. Following this event a project plan will be developed to deliver a new Falls offer for Barnsley commencing with pilot proof of concept working with selected care homes and neighbourhood nursing teams. The Falls and Bone Health Group will go on hold until work on the proofing of the new concept is complete. Other developments include: • The launch of the Fire Service's Safe and Well Checks in Barnsley has been postponed until October 2017. The checks will incorporate a falls assessment and onward referral if required. • Work is continuing on a pilot protocol in care homes. This work is to support care homes with the process of falls assessment and management, and is being supported by a clinician in SYWPFT Falls Service. • Public Health colleagues are currently submitting an expression of interest to Sport England for funding to support Strength and Balance Training in Barnsley. • Independent Living At Home Service (re-enablement/assistive living) are in the process of developing protocols for early assessment and intervention option.	

	A	B	C	D	E	F
17	<p>HWB PRIORITY: Improve services for older people - Dementia</p> <p>Further develop services for people with dementia in order to deliver an integrated pathway for dementia ensuring high quality care throughout the pathway that reflects the priorities within the Prime Minister's Challenge on Dementia 2020.</p>	<p>Rachel Dickinson</p>	<p>Adult Joint Commissioning Board (Brigid Reid)</p>		<p>The memory assessment and support service (MASS) has achieved a 79% dementia diagnosis rate in Barnsley. This exceeds the national average of 67%. National guidance is awaited on standards and measures for Evidence Based Treatment Pathways to change the focus from diagnosis to post diagnosis support.</p> <p>The MASS is increasingly supporting integrated pathway through the dementia advisor (DA) roles within the service. DA's are co-located in GP practices and their role is to help with early identification, support pathways to early diagnosis and remain as a support to the person and their families throughout their life journey. This enables the person with dementia and their families/careers to connect with other wide ranging support services/resources in their communities.</p> <p>Other developments include:</p> <ul style="list-style-type: none">• The Mayor focus on dementia has raised fund to support one off projects/seed investments within the community, to improve quality of support. Some of these seed investments and services will become part of an integrated pathway (for example, the support in care homes) and other will inform the range of future options.• The Barnsley Dementia Action Alliance brings together organisations and businesses in Barnsley including statutory, non-statutory, VCS and private sector to promote dementia awareness and dementia friendly communities.• Barnsley's Alzheimer's society continues to be active through supporting (signposting, information and advice, carers support) people with dementia and their careers.	

	A	B	C	D	E	F
18						
19	Actions	SSDG Lead	Partnership (Partnership Lead Officer)	Timescale for delivery	Quarter 3 Progress Update (submitted by 14.02.17)	Quarter 1 Progress Update (submitted by 14.07.17)
20	Establish an Alcohol Alliance and a comprehensive programme which creates a culture where sensible drinking is the norm.	Julia Burrows	Alcohol Alliance (in development) (Diane Lee)		Work is underway to refresh the existing alcohol strategy. This will be done through the development of an alcohol alliance to ensure a systematic and coordinated approach. Several programmes of work are underway in relation to alcohol related crime and a sensible drinking culture.	
21	Implement a work place health charter across the public sector and other local businesses	Julia Burrows	More & Better Jobs Taskforce (Tom Smith - with PH Support from Julie Tolhurst)		<p>The support offered under workplace health is to assist employers across Barnsley to improve the health and wellbeing of their employees. The support offered to a business will depend on what the business already has in place and what the issues are that the business wants to address. This could range from a business starting by making small changes such as supporting health campaigns or alternatively progression to the new national award 'Workplace Wellbeing Charter National Award for England'.</p> <p>To enhance business engagement with employers the Barnsley offer includes the following :-</p> <ul style="list-style-type: none"> • Sharing of workplace health information eg local events, newsletters, local activities, health campaigns • Free workplace health visit – following an initial assessment a business will be advised on how it can make changes to fit the business • Model policies and procedures –designed to help businesses particularly with accreditation to the national award • Provision of training through courses and workshops . This training is 'in house' such as health champion training, Mental Health First Aid and Absence Management training or bespoke training commissioned through external providers . <p>To keep up momentum with businesses on the work and health agenda workplaces are encouraged to appoint workplace health champions. The workplace health champions receive training and are invited to quarterly network meetings which share good practice and also provide information and advice on public health topics. The inaugural network meeting was held in October 2016 and there have been three health champion training courses held since April 2016. The next workplace health champion network meeting is due to be held in March.</p> <p>Two Mental Health First Aid Training Courses have been offered to local businesses since April 2016 and currently engagement is taking place with the local area councils and the police to deliver this training to them.</p>	
22	Increase/enhance support for people with mental health problems and learning disabilities to stay in and get into work	Julia Burrows	More & Better Jobs Taskforce (Tom Smith - with PH Support from Julie Tolhurst)		<p>Links have been made with the Clinical Commissioning Group (CCG) and Health and Wellbeing Board to ensure employment is on the health agenda at a strategic level. A paper was well received at the Senior Strategic Development Group (SSDG) and a further paper is going to the Health and Wellbeing Board in April to take the work forward.</p> <p>Coordinated and led locally on the development and implementation of the following employment pilots:</p> <ul style="list-style-type: none"> • Health Lead Innovation Trial (SCR): Work and Health Unit (WHU) funded pilot across SCR for people unemployed by virtue of MSK / Mental health conditions - £10m over 3 years. • Building Better Opportunities (BBO): Big Lottery Funded project using Individual Placement Support (IPS) approach, supporting those with mental health conditions / complex needs into employment. <p>Links have been made with learning providers, adult social care and local businesses to improve opportunities for work placements, in work support and mentoring, support more appropriate placements develop referral pathways for vulnerable people, building on skills and expertise from each area and support referrals into new pilot projects.</p> <p>Continued to build links with SWYT, BMBC commissioners and local providers looking at opportunities and referral pathways for people with mental health problems, focusing on Individualise Placement Support (IPS).</p>	
23	Implement Making Every Contact Count	Julia Burrows	TBC Cath Bedford			

	A	B	C	D	E	F
24	Redesign homecare support	Rachel Dickinson	Adult Joint Commissioning Board (Jane Wood)		Procurement nearing completion. Further details to be provided in the next update.	
25	Develop consultant advice and guidance to GPs • Implement Map of Medicine • Support the development of RightCare Barnsley • Continue to enhance direct access to diagnostics and the clinical interpretation and management advice on reports	Lesley Smith	Clinical Transformation Board (under review) (Katie Roebuck)		MoM: Map of Medicines implementaion underway across primary care. Detailed mobilisation plan in place, key actions: application integration across primary care,updated referral forms for all pathways, comms and engagement across primary care.	
26	Improve cancer diagnosis and care: • Work with primary care to increase early diagnosis of cancer • Develop a primary care training programme • Increase screening uptake • Develop shared care pathways across primary and secondary care • Maximise opportunity to further develop the Survivorship Programme (Living with and Beyond Cancer) • Revitalise the Cancer Care Review Process • Implement the End of Life Strategy	Lesley Smith	Clinical Transformation Board (under review) (Katie Roebuck)		Detailed discussions underway with BHNFT to improve cancer diagnosis and care. Work underway across the STP footprint to improve shared pathways. Living with and beyond cancer: BHNFT are considering completing a funding bid to macMillan to further develop this programme of work.	
27	Heart of Barnsley –Diabetes and CVD • a programme of healthy public policies and lifestyle services/interventions • enhanced clinical management of CVD risk factors • the National Diabetes Prevention Programme. • secondary prevention in primary care and secondary care	Lesley Smith	Clinical Transformation Board (under review) (Katie Roebuck)		Service review of the CVD and Diabetes clinical pathways underway in collaboration with service Providers. NDPP: SY&B Wave 2 implementation site. Detailed mobilisation plan in place. Recruitment of NDPP programme manager underway.	
28	Implementation of integrated clinical pathways for musculoskeletal diseases	Lesley Smith	Clinical Transformation Board (under review) (Katie Roebuck)		Service review of the MSK clinical pathways underway in collaboration with service Provider.	
29	Develop/strengthen integrated locality based health and wellbeing teams • Connect primary and community services more closely and support families to manage common childhood conditions in the community	Lesley Smith	Clinical Transformation Board (under review) (Jackie Holditch)			
30	Implement our Local Digital Road Map	Lesley Smith	IT Strategy Group (Chaired by Tom Davidson)		System wide LDR Implementation Group has been created to understand what the key priorities are within each organisation currently and across the system. eMBED have been engaged to develop a plan on a page for the implementation of the LDR in Barnsley over the next 4 years. Both areas of work report into the IT Strategy Group chaired by Tom Davidson.	
31	Implement the GP Forward View to strengthen primary care	Lesley Smith	Clinical Transformation Board (under review) (Jackie Holditch)			
32	Explore the development of an Accountable Care Organisation in Barnsley	Lesley Smith	Accountable Care Partnership Board (Jade Rose / Jeremy Budd)		The ACPB is exploring the creation of an Accountable Care Organisation. A multi-disciplinary Accountable Care Delivery Team has been created to support 4 separate work streams to progress this work further.	
33	Implementation of integrated clinical pathways for: • Respiratory services • Diabetes • Intermediate Care • Community Nursing	Lesley Smith	Accountable Care Partnership Board (Jade Rose / Jeremy Budd)		The Accountable Care Partnership Board will act as the Leadership Board to oversee successful implementation of these integrated clinical pathways. This is supported by the Alliance Management Team which met for the first time in February 2017 with a preliminary focus on Intermediate Care.	
34	Improve personalisation and choice in maternity services	Bob Kirton	BHNFT Board	This is year 2 of a 5 year plan. (2015/16 - 20/21)	Work is on track, key achievements/actions to date include: -Birth plans in place for all women -National maternity information standard in place -Community hubs in place -Confirmed Board lead: Director of nursing and quality -Positive CQC visit for maternity services, rated "good" -Yorkshire and Humber clinical dashboard in place -Neonatal review underway as part of the STP -Maternity/obstetrics STP workstream under way	

	A	B	C	D	E	F
	Actions	SSDG Lead	Partnership (Partnership Lead Officer)	Timescale for delivery	Quarter 3 Progress Update (submitted by 14.02.17)	Quarter 1 Progress Update (submitted by 14.07.17)
35	Increase individual and family capacity for self-reliance and self-care:	Wendy Lowder	Stronger Communities Partnership (Keith Dodd / Mel Fitzpatrick)			
36	• Design an improved information and advice offer that supports self-reliance		Customer Strategy Implementation Board. (Keith Dodd)		This is now under the governance of the Customer Strategy Implementation Board. In terms of progress, a Project Manager has been appointed and a PID is in development. The Early Help (Children) Sub Group have produced an Early Help booklet and circulated to stakeholders setting out the Barnsley model of early help.	
37	• Develop and implement a systematic approach to health literacy and self-care that supports individuals and communities		Cath Bedford			
38	• Review the effectiveness of Be Well Barnsley		Carl Hickman		The service has worked hard to increase referrals from Primary Care and is working with Barnsley Hospital to increase referrals for stopping smoking. We have increased the number of GP practices the service is based in, and set up a number of new groups and projects, including working with a number of primary schools and community organisations.	
39	• Deliver the Anti-Poverty action plan		Anit-Poverty Delivery Group (Andrea Hoyland/Michelle Kaye)		The Anti-Poverty delivery group meets six weekly. The membership has representation from key partners across the borough, and attendance is generally good with key action owners attending and providing regular updates against their contributions to the Action Plan. Colleagues from CCG, Credit Union and Schools Alliance are not regularly represented. The review of the Action Plan has been finalised in October 2016 with completed actions removed, and new and refreshed actions added. KPI's have been agreed and a quarterly performance report is in draft to be agreed in December 2016. Achievements: • The Alexandra Rose Fruit & Vegetable Voucher Scheme is now live • The second Community Shop opened in Athersley in December 16. • On Friday 20th January, members of the Anti-Poverty Delivery group attended a round table facilitated by Dan Jarvis around 'Feeding Britain.' Barnsley may become part of a national pilot around food poverty. This is subject to a further discussion at the Anti-poverty Delivery Group on the 27th February.	
40	Improve the range, availability and coordination of services that provide early help and prevent care and support needs escalating :	Wendy Lowder	Stronger Communities Partnership (Keith Dodd / Mel Fitzpatrick)		The Early Help (Children) Sub Group have: • Produced an Early Help booklet and circulated to stakeholders setting out the Barnsley model of early help. • Launched a Workforce Development Programme, Sept 16 - positive feedback from participants • Begun production of an early help promotional video	
41	• Implement Social Prescribing and evaluate its impact		Lisa Wilkins			
42	• Ensure a cohesive and connected approach to falls prevention (WL to confirm)		Jane Wood/Emma White		See above update (line 16)	
43	• Plan the sustainability and future development of the ILAH service (ALT) and consider integration of other related services (DFG, adoptions, community equipment store)				A revised Business Plan has been produced and is due to be presented to the ILAH Board	
44	• Development and implementation of the Private Sector Housing Plan.					
45	Promote strong and resilient communities	Wendy Lowder	Stronger Communities Partnership (Keith Dodd / Mel Fitzpatrick)			
46	• Procure VCSE infrastructure support & support development of strong challenging leadership in the sector.		Phil Hollingsworth		The Early Help (Adults) Sub Group is commissioning future voluntary sector infrastructure support based around 4 outcomes: volunteering; sector advice and support; maximising funding opportunities; and engagement and leadership.	
47	• Develop a system wide carers strategy.		Elaine Equeall		The Early Help (Adults) Sub Group is progressing the development of a refreshed carers' strategy and co-produced Barnsley Carer Offer	
48						

	A	B	C	D	E	F
49	• Evaluation of Area Governance Arrangements		Phil Hollingsworth		The Early Help (Adults) Sub Group has commissioned and independent evaluation of the Council's area governance arrangements with a view on areas for future development	
50	• Develop/review and implement a system wide volunteering strategy (ongoing)		Phil Hollingsworth			
51	• Map peer support networks, identify gaps and build new networks where required		Phil Hollingsworth			
52	Pilot a place based health and wellbeing approach in one locality (this action requires additional resources to implement)	Wendy Lowder	TBC (Paul Hussey)			
53	Implement a multi-agency public sector hub with South Yorkshire Police and partners	Wendy Lowder & Scott Green	Safer Barnsley Partnership (Paul Branon, Jayne Hellowell & Jakki Hardy)			