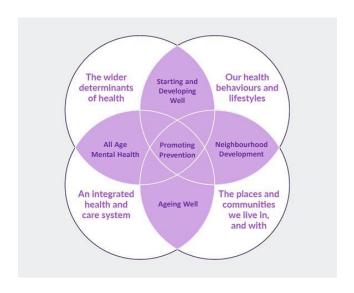
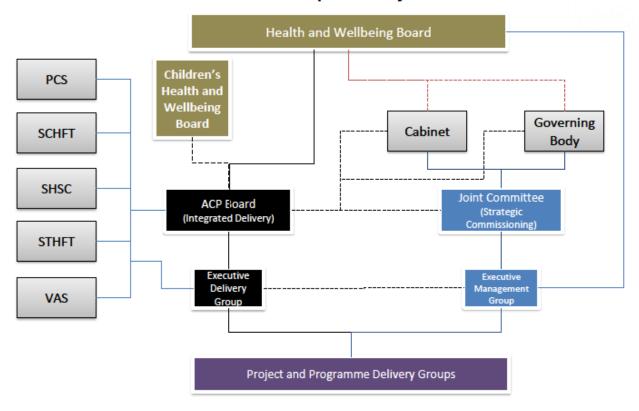
Shaping Sheffield Delivery Plan Overview



ACP Governance Structures

Accountable Care Partnership Summary Governance Structure



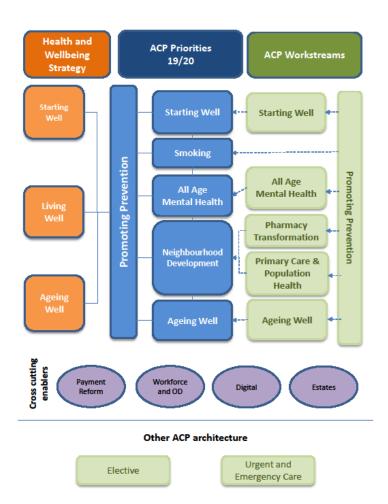
The relationship between the programme delivery groups is shown on the next page

The diagram to the right shows how the ACP programme of work has been broken down into delivery workstreams and its cross cutting enablers.

Each workstream has reporting lines up to the Executive Delivery Group and ACP Board (shown in the governance diagram on the previous page. Each workstream has both an executive and senior clinical lead from one of the ACP partner organisations

Each workstream can be mapped onto one or more of the five ACP priorities and as their work plans develop, they will demonstrate their contribution to them. High level summaries of the work plans are provided in the following pages.

The workstreams will work closely with the ACP Programme Management Team to ensure pieces of work that sits across multiple workstreams/priorities are coordinated to avoid duplication of effort and maximise integrated working opportunities.



ACP Workstreams Plans on a Page

WORKSTREAM OVERVIEW CHILDREN'S HEALTH AND WELLBEING TRANSFORMATION BOARD

Purpose We want all children in the City to have the best life chances and families to be empowered to provide healthy, stable and nurturing environments. We want to connect people to the right levels of support at the right time through universal and targeted prevention, early identification and early support. We want:

- . Every child to achieve a level of development in their early years for the best start in life
- Every child included in their education and accessing their local school
- Every young person equipped to be successful in the next stage of their life.

Key Partners

vas





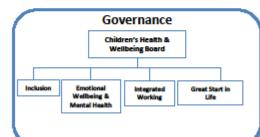


Co- production

The CH&WB Board membership consists of key partners across the City who will share responsibility for decisions made and share their knowledge and experience to shape the delivery of services.

Key Outcome Measures

Measures to be agreed - draft as follows:	
Increased life expectancy at birth	Increase in children who are School ready at age of 5
Reduced waiting list for access to CAMHS and neuro-disability.	Reduction in inequality gap at the end of Foundation stage.
Number of schools teaching lifestyle skills to prepare children for role as parents.	Funding in place to enable establishment of local community hubs to enable tailored approaches and engagement.
Named support workers to assist negotiating various pathways.	Agreed integrated budgets across partners.



Programmes of work

Priorities for 2019/2020		
 Implement the Written Statement of Action following the inspection of SEND. 	 Support the delivery of a new all age eating disorder pathway. 	
 Implement a community nursing model to support the development of locality based working with a focus on 	 Review and refresh the city's 'Great Start in Life Strategy'; recognising what has been achieved to date. 	

Finalise the community paediatric pathway with focus on autism and ADHD.

care.

 Undertake stakeholder engagement during 2019 in order to create a Children and Young People's Strategy. Ensure links with other ACP workstreams to ensure C&YP are a priority.

Please note that this is currently a draft plan and has yet to be discussed with the Children's H&WB Board.

ACP priorities



Exclusions

To be confirmed.

PREVENTION WORKSTREAM OVERVIEW

Purpose

Embedding a preventive approach into the commissioning, planning and delivery of health and care systems of Sheffield











Co-production

Working alongside Healthwatch and the ACP Advisory Group, a plan for increased lay membership on the prevention workstream and opportunities for co-design of new approaches will be explored .

Key Outcome Measures

By March 2020

Clear articulation by all ACP workstreams of prevention approach

Clear articulation by all ACP partners of organisational prevention approach and plans

Increased referrals to stop smoking services

Embed actions on preventative risk factors into ACP partner organisations and wider Sheffield economy

Prevention and wellbeing embedded into all health and social care policies and decisions

Governance

Programmes of work

Priorities for 19/20

- Improve work and health programmes interface
- Support and enable a shift to a more person centred approach for our population and workforce
- QUIT programme
- Move More Strategy
- risk factors into the Sheffield health and care system. Healthy catering policies across

Embed actions on preventative

Development of organisational

level plans to embed prevention

- ACP partners · Improved linkage into locality working and Neighbourhood
- development

Additional Programmes / Projects

- Comprehensive programme of public communications and marketing on self care and healthy choices
- Contracts and commissioning plans to promote and resource physical activity as medicine and make referral paths clearer

ACP priorities



Exclusions

The ACP prevention workstream will not supersede work already ongoing through the Food and Wellbeing Board, Tobacco Control Board and the National Centre for Sports and Exercise Medicine Board. They will however, remain closely aligned

MENTAL HEALTH AND LEARNING DIABILITIES WORKSTREAM OVERVIEW

Purpose

To design and implement a transformational programme of work that will improve the quality of mental health, learning disability and dementia services and the experience of those who use them; whilst simultaneously delivering better value for money.

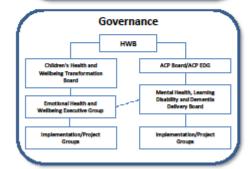


Co-production

Consultation, engagement and co-production activity is a key part of the Mental Health Transformation Programme. During 2019/20 further work will be undertaken to ensure that genuine co-production activity is consistent and sustainable.

Key Outcome Measures

By March 2020 Delivery of LTP for Children and Young People Dementia Strategy Agreed Eating Disorders Pathway Fully Operational Transitions Project Fully Delivered Longer Term Reduction in Mortality Gap Reduction in Suicides New Model of Neighbourhood Health and Wellbeing Fully Enacted



Programmes of Work

Pi	riorities for 19/20		
•	Dementia Care Pathway		Neighbourhood Health and Wellbeing Service
•	Promoting Independence	٠	Better Care (Physical Health)
•	Door 43	•	Transitions
٠	Eating Disorders	٠	Transforming Care
٠	Healthy Minds Framework	٠	Reduced waiting times in CAMHS
A	dditional Programmes/Projects		
٠	Psychological Wellbeing Practitioners (PWP's)		Primary Mental Health Worker (PMHW) Service
•	Section 117 Aftercare	٠	Perinatal Mental Health
	Reducing Anti-Depressant Use		Personality Disorders
•	Developing a Psychiatric Decision Unit	٠	Trauma PTSD
٠	Section 12 Fees	٠	VCF Sector
•	Bespoke Packages of Care	•	Prevention and Early Intervention
	Autism		Access and Waiting Times
•	Mental Health Five Year Forward View	٠	Digital and Data
•	SHSC Service Specification Reviews	٠	Vulnerable Groups
•	Crisis Care Pathway (Inc. 136)	•	Housing, Benefits and Employment
•	Legacy CHC Grant Arrangements		Engagement of Young People Programme

ACP Priorities



Exclusions

There are no specific exclusions, although areas of potential overlap/duplication are routinely raised via the ACP Executive Delivery Group.

PHARMACY WORKSTREAM OVERVIEW

Purpose

- Improve system wide medicines optimisation
- Maximise the contribution of pharmacy professionals system-wide
- Support patients with their medicines at all points in their care

Key Partners





Working with the Improving Accountable Care Forum

Workforce engagement event(s) planned

Co-production

S Community Pharmacy Shaffleld



Key Outcome Measures

By March 2020

Established proof of concept sites for community pharmacist and GP joint working

Increase in prescribing pharmacists

A community pharmacy led long term condition management service

Increase in the number of specialist and cross sector posts

Longer Term

Expand the scope of pharmacy practice to ensure all patients receive the benefits from the skills and expertise of pharmacy professionals

Governance

Pharmacy Workstream planning and delivery is implemented by an ACP Pharmacy Transformation Group comprised of members from each ACP partner

Programmes of work

Priorities for 19/20 Set up joint working

- Support pharmacist take up of arrangements between prescribing training across all community pharmacists and sectors general practice
- Develop specific cross sector Develop and test a primary shared care hypertension post opportunities

Establish consultant pharmacists

opportunity to prescribe where

optimisation support within care

e.g. palliative care

appropriate

Expand the medicines

Additional Programmes / Projects

- Large scale commissioning of long term condition management by pharmacy professionals
- · Expand the scope of long term · Offer all pharmacists the
- condition management by pharmacy professionals
- Deliver domiciliary medication reviews
- Increase cross sector posts between interface points e.g. primary and secondary care, child to adult, cross discipline

ACP priorities



PRIMARY CARE WORKSTREAM OVERVIEW

Purpose

To ensure that the people of Sheffield have excellent local, joined up, sustainable primary and community support to enable them to live their lives to the full

Key Outcome Measures

Development of Primary Care Workforce Plan and Strategy

Implementation of GPN VTS Scheme

Evaluation of 7 initial Neighbourhood projects (6 further faster and SCC led SE HUB) with shared learning and duplication across city

Hub implementation across Sheffield

Digital Integrated Care Record accessible to General Practice and Social Care Health Care Professionals

Longer Term

Production of PHM Dashboard at Neighbourhood Level

Mature neighbourhoods delivering multi-disciplinary services to meet address health inequalities and the ACP priorities.

Governance

















Primary Care

Sheffield

Shellfale Children's MILS





Key Partners Sheffield





NH5 Sheffield Teaching Hospitals

Programmes of Work

Priorities for 19/20

- Centre of Excellence in Primary Care - understand future workforce demand, gaps and skill mix and provide training in order to support future demand of primary care
- Population Health Management -Use the 'Infrastructure, Intelligence and intervention' methodology to design care models, outcomes and evaluations
- Digital Integrated Care Record -
- Development of an electronic integrated care record accessible to primary care providers.
- Producing a menu of support options.
- Local First promote person centred holistic care, moving appropriate generalist activity into the primary care setting whilst maintaining provider relationships and developing seamless pathways of

Neighbourhood Delivery of multi-

organisational, multi-disciplinary

patient wellbeing and reducing

service delivery around ACP

priorities

teams, increasing patient experience

health inequalities whilst increasing

Sheffield Brand of General Practice

- Define a vision of sustainable

General Practice delivered across

Primary Care Networks, working

within the New GP Contract and LTP.

Additional Programmes / Projects

- Primary Care Research and Innovation
- Shared approach to non academic
- Development of Digital Primary Care Strategy
- · Universal Offer to Neighbourhoods

Co- production

Development of relationships with ACP Service User group and outreach to recruit a Primary Care Champion

Engagement with patients at a Neighbourhood Level to inform service development priorities and methods of delivery.

ACP priorities



ACP ELECTIVE CARE WORKSTREAM OVERVIEW (Draft pending approval 28/3/19)

Purpose

To implement new approaches to outpatient services and develop a system which integrates provision to maximise seamless general, enhanced and specialist care to happen in the right place, delivered by the right people at the right time.

To develop consistency and quality to ensure right patient, right pathway and a person-centred approach.

Key Partners





Shefficia Children's MAS

NHS SheHield Teaching Hospitals

Co-production

- Service user input into development of integrated community services via steering groups
- Service user input into cross-cutting themes developments.
- Strategic Patient Engagement, Experience, Equality Committee (SPEEEC) oversight

Key Outcomes

By March 2020 Integrated community Reduction in hospital services & care closer follow up activity to home Benefits realisation of New technology CASES solutions Upskilled clinical Redesigned pathways inc. IAPT & self-care workforce Delivery against and alignment to primary care strategy, new GP contract and NHS Long Term Plan **Longer Term** Redesigned consultant Reduced outpatient to consultant pathways appointment DNA rates



Programmes of work

Priorities for 19/20 Implement Integrated Skin (lesions) Community Service Test of Concept

- of Concept
- Implement Integrated Cardiology (Heart Failure) Community Service Test of Concept
- Implement Primary Care ECG Test of Concept
- Implement ENT Integrated Community Service Test of Concept
- Define and implement integrated care pathway for sustainable allergy services.
- Strengthen Local Authority input to the work of the group

Cross-Cutting Themes

Utilise learning from CASES, RightCare and collaborative working to identity opportunities for:

new/improved pathways, thresholds

redesigned follow-up methods

vague or medically unexplained symptoms (IAPT) support

patient self-management and care

reduction in DNAs in problematic clinical pathways

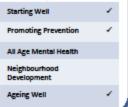
diagnostics referral and access development

consistent approach for consultant to consultant referrals

training and clinical workforce development

Reduction in inequalities of access to elective care pathways

ACP priorities



Exclusions

Gastroenterology has been removed from the work programme due to overlap with Cancer Alliance activities.

Areas of overlap where other ACP work streams are more appropriate to deliver

URGENT AND EMERGENCY CARE WORKSTREAM OVERVIEW

Purpose

To lead city-wide integrated delivery, transformation and improvement of urgent and emergency care through collaborative and supportive actions and behaviours that achieve 'high quality right care, right place'

Key Partners







Co- production

Co-production approach used to identify the problems with Urgent Care in the city. Patient experience of discharge is contributing to the ongoing development of services Voluntary sector support to discharge, informed through a co-production approach

Key Outcome Measures

By March 2020

More effective use of urgent care resources

People are only admitted to hospital when clinically

Increase in the number of patients assessed and discharged

Patients stay in hospital for the minimum time required to manage their presenting problem while avoiding the secondary harms arising from hospitalisation

The majority of patients are discharged back to their usual

Governance

Programmes of work

Priorities for 19/20 Increase effective usage of community urgent care

NGH/SCH only)

- resources
- Reduce ED attendances (Type 1 Improve flow through and out of

Ensure fast assessment directs

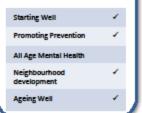
to appropriate response

Improve system resilience

Additional Programmes / Projects

- Urgent Care Review
- Front Door Programme
- Improved resilience of the Mental Health Crisis Care pathway
- **Excellent Emergency Care**
- Flow Overview
- Why Not Home Why Not Today

ACP priorities



Interdependencies

- · Patients at risk of admission model (sits under LTC Board)
- Primary Care 5yr forward transformation (sits under Primary Care Board)
- Mental Health Crisis Care Concordat



Operation al Resilience Group

Urgent Care Program me Board

Flow Overview

Why Not Why Not

LONG TERM CONDITIONS WORKSTREAM OVERVIEW **Key Partners** Sheffield Primary Care NHS Purpose Sheffield Sheffield Health and Social Care SheHield Chileren's MF45 Sheffield NH5 Sheffield Teaching Hospitals Clinical Commissioning Group **Key Outcome Measures Programmes of Work** Co-production Development of By end March 2020 relationships with ACP Blood Pressure The percentage of patients with hypertension in whom the last PAM Service User group and Patient Activation Measure score Themes End of life plan Priorities for 19/20 identification of priority % of people who die with an end of life plan Longer Term areas for co-production Patient sand Carers as Person-centred care Life Expectancy Inequality in life expectancy at birth for females (Slope Index of Experts Development of outcome Engagement with Life Expectancy Inequality in life expectancy at birth for males (Slope Index of focused commissioning Preventable years of Mortality rate from causes considered preventable per 100,000 patients at a Neighbourhood Level Deaths under 75 years Under 75 mortality rate (all causes) to inform service Admissions to care Number of admissions to care homes per 100,000 population development priorities Proportionate of people offered reablement and methods of Proportionate of people still at home 91 days after discharge delivery. Slowing and Managing Hypertension management **Diabetes Prevention** Diabetes Treatment & Care Early help ACP Care planning priorities Governance Starting well Integrated Models of Care Neighbourhood approaches to delivery End of Life Care Prevention Care homes All Age Mental Health Neighbourhood development Ageing Well

Payment Reform (to be developed)

WORKFORCE AND ORGANISATIONAL DEVELOPMENT WORKSTREAM OVERVIEW

Purpose

To create a flourishing and thriving Sheffield by developing our people in a joined up way to deliver holistic, personcentred and integrated care

Key Outcome Measures

By March 2020		
Workforce Strategy	Leadership development	
Clear all-age plan in place and in progress	100 staff accessing system leadership development	
Executive development	Clear plan in place	
Longer Term		
Workforce strategy	Staff absence rates at B2 / equivalent	
Diversity of leadership across the system	Staff engagement rates at B2 / equivalent	
Measurement against the workforce maturity matrix	Ability to accurately predict demand	

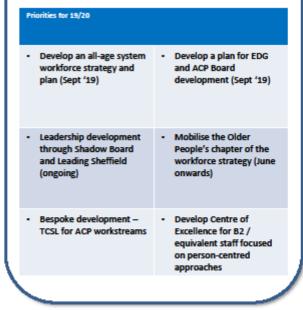




Co-production

Members of the public will be routinely consulted when new systems and processes are being developed, and will be an integral part of all OD interventions.

Programmes of work



ACP priorities



This workstream focuses on workforce and OD work across the system, intending to complement internal organisational processes and resources

DIGITAL WORKSTREAM OVERVIEW

Purpose

To deliver the digital capabilities that support the 'Shaping Sheffield' ACP transformation.

Key Outcome Measures

By March 2020

Reduced time spent on administrative activity across ACP Partners

Longer Term

Reduced length of stay

Reduced number of non elective admissions

Increased adherence to End of Life and Do Not

Resuscitate preferences

Reduced number of citizens in crisis

Overall satisfaction of people who use services with

their care and support

Workforce satisfaction - overall organisational position for staff engagement from staff survey

Support reduction of Suicide rate over 100,000

population

Reduced number of all types of attendances at A&E

Reduced Delayed transfer of Care - Delayed Days (rate per 100,000 18+ population)

Reduced number of admissions to care homes per 100,000 population

Governance

ACP Board

ACP EDG

ACP Digital

Key Partners vas





Sheffield



NHS



South Yorkshire and Bassetlaw Integrated Care System 3333333333333

Co- production

Significant user research and engagement has taken place in the last 6 months across ACP settings. Digital leads have supported several Shaping Sheffield events too. Healthwatch Sheffield has been engaged to understand the public's view of shared records. Engagement has been completed with other places, such as Rotherham, Doncaster, Leeds and Manchester. Work is ongoing with the Yorkshire and Humber Care Record team to ensure any Sheffield solution integrates with the

Engagement and research activities will continue to ensure user needs are understood and the right digital and assisted digital service is delivered.

Priorities for 19/20

Deliver a Sheffield Shared Record

- 1. Integrating health and care data across Sheffield for direct care.
- 2. Giving professionals in Sheffield access to a shared record to support integrated working and reduce administrative burden
- 3. Giving citizens access to their health and care records to increase self care and reduce inequalities
- 4. Connecting Sheffield Shared Record with South Yorkshire place based shared records, e.g. Rotherham Health Record and the Yorkshire and Humber Care Record (YHCR) to support integrated working
- 5. Enabling other Sheffield health and care providers, e.g. Community Pharmacy and St Lukes Hospice (Palliative Care) access to Shared Record for purposes of direct care

Connectivity to support Shaping Sheffield

Enabling secure, performant IT access for staff working across all partner sites.

Data Sharing to support Shaping Sheffield

1. Ensure safe, secure and compliant data sharing agreements and protocols, governance, and compliant systems exists across Sheffield for the use of citizen's health and care data for the purposes of direct care (shared records) and secondary use (population health management).

Population Health Management

 Delivering a population health management capability (business intelligence and analytical capability), including secondary use of citizen data to understand the needs of the Sheffield population and reduce health inequalities. This work will be aligned to the work within the Primary Care Workstream.

ACP priorities



Exclusions

None currently identified, although this will be tested with the other ACP workstreams.

Estates (to be developed)

Organisational Priority Alignment to ACP Priority Areas

PCS Priority Alignment

ACP 19/20 Priorities	PCS Priorities	Other linkage
Starting Well	Delivering new network services ; Vacs' & Imms review	Children's Health & Wellbeing Board
Promoting Prevention	 Supporting care navigation; social prescribing in primary care Social care integration and support 	PCS subsidiary Intercare
All Age Mental Health	 Primary Care Mental Health Service – supporting new model of care for Sheffield 	SHSC Primary Care Mental Health Strategy
Neighbourhood Development	 Supporting the development of 15 Primary Care Networks and primary care resilience across Sheffield Supporting the delivery of primary care at scale Developing and implementing new models of care out of hospital – Tele Dermatology/ENT/Cardiology Improving access to primary care for all age groups through an integrated 24/7 primary care offer 	NHS GP Contract Digital Solutions
Ageing Well	Delivering new network services; Structured medication Reviews; Enhanced Health in Care Homes Service; Anticipatory Care; Personalised Care; Early Cancer Diagnosis; Inequalities	NHS GP Contract Digital Solutions Workforce planning and additional new roles

SHSC Priority Alignment

ACP 19/20 Priorities	SHSC Priorities	Other linkage
Starting Well	A1 04: We will ensure timely access to effective care - Specialist Perinatal Mental Health services expansion	
Promoting Prevention	A3 04: Deliver effective crisis care pathways and services - Learning disabilities and community focussed support for people with complex needs	Physical health strategy Smoking cessation strategy Integrated IAPT IPS & Employment
All Age Mental Health	A3 02: Deliver effective Recovery services A3 04: Deliver effective crisis care pathways and services - Mental Health Crisis hub	Integrated IAPT Eating Disorders Service pathway development
Neighbourhood Development	A3 01: Develop Primary Mental Health and Neighbourhood services	Integrated IAPT IPS & Employment Outcomes Fund re: Alcohol Service developments
Ageing Well	A3 04: Deliver effective crisis care pathways and services – access and support for people with complex dementia	

VCS Priority Alignment

ACP 19/20 Priorities	VCS Priorities	Other linkage
Starting Well	Volunteering	
Promoting Prevention	Resilient communities	
All Age Mental Health	Volunteering	
Neighbourhood Development	Resilient Communities	
Ageing Well	Health and Wellbeing	
	Volunteering	

SCC Priority Alignment 1:

ACP 19/20 Priorities	SCC Priorities	Other linkage
Starting Well	 Promote and support the health and wellbeing of children in case as corporate parents (C&F) Working in partnership to develop and embed improved help and protection (C&F) Ensure sufficient appropriate accommodation for children in care focusing first on prevention (C&F) Support our care leavers journey to independence (C&F) Develop resilience and inclusion (CILS) 	 Children and Families Improvement Plan Inclusion and SEND improvement plan Signs of Safety Early years centres of excellence MAST Future in Mind Family Centres Emotional wellbeing online counselling service (Kooth) Project Aspire

SCC Priority Alignment 2:

ACP 19/20 Priorities	SCC Priorities	Other linkage
Promoting Prevention	 Increasing independence and inclusion (Adults) Increasing shift to prevention (adults) Increasing adults able to live at home (adults) Improved skills for employment (LCLS) Maintain/increase opportunities to learn and enjoy in the community (LCLS) Develop resilience and inclusion (CILS) Increasing shift to prevention (CILS) Person centred approach to delivery (CILS) Promoting positive health and wellbeing (CILS) Working in partnership to develop and embed improved help and protection (C&F) 	 Inclusion and SEND improvement plan Adults Improvement Plan Dementia strategy Vulnerable learner reviews Transitions Children's improvement plan Early years centres of excellence Family Centres

SCC Priority Alignment 3:

ACP 19/20 Priorities	SCC Priorities	Other linkage
All Age Mental Health	 Promoting positive health and wellbeing (CILS) Develop resilience and inclusion (CILS) Increasing the shift to prevention (CILS) Promote and support the health and wellbeing of children in care as corporate parents (C&F) Support our care leavers journey to independence (C&F) 	 Mental Health Transformation Programme Project Aspire Project Apollo Redesign of CAMHS for LAC/edge of care services Emotional wellbeing online counselling service (Kooth) Local transformation plan Inclusion and SEND Improvement Plan
Neighbourhood Development	 Maintain/increase opportunities to learn and enjoy in the community(LCLS) Increase community cohesion (LCLS) Support sustainable local initiatives (LCLS) Increase visibility and opportunities for locally based support (LCLS) Person centred approach to delivery (CILS) 	 Skills strategy AEB devolution Controlling migration fund ESF prep for success and preparing for progress Locality/neighbourhood development

SCC Priority Alignment 4:

ACP 19/20 Priorities	SCC Priorities	Other linkage
Ageing Well	 Increasing adults able to live at home (adults) Increasing the shift to prevention (adults) Increasing independence and inclusion (adults) Promoting positive health and wellbeing (CILS) Develop resilience and inclusion (CILS) Increasing the shift to prevention (CILS) Person centred approach to delivery (CILS) 	 Adults Improvement Plan Joint commissioning frailty programme Dementia strategy

STH Priority Alignment

ACP 19/20 Priorities	STH Priorities	Other linkage
Starting Well	 Compliance with the Local Maternity System target – (Ensure 27% of women in Sheffield are booked into the continuity of care model) Early years – developing more resilient families and communities 	Corporate Objectives 2019/20 Annual Operational Plan 2019/20
Promoting Prevention	 SY&B ICS Quit Programme including In-house Stop Smoking Service A dedicated Promoting Wellbeing Group to be established Reducing smoking prevalence Reducing obesity and promoting physical activity 	CQUIN Update April 2019 People Strategy 2017-2022 Annual Operational Plan 2019/20
All Age Mental Health	 Mental and physical wellbeing initiatives Following the National NHSI Health & Wellbeing Framework 	People Strategy 2017-2022 Annual Operational Plan 2019/20
Developing Neighbourhoods	OK To Stay Plan – Reducing admissions Building community resilience through effective neighbourhood working	BPT May 2019 Annual Operational Plan 2019/20
Ageing Well	Commitment to improve the experience of older people in the care system	Annual Operational Plan 2019/20

CCG Priority Alignment

ACP 19/20 Priorities	CCG Priorities	Other linkage
Starting Well	Complex Child – Continuing Care Children's Safeguarding Review Review of Community Therapy SEND Short Breaks Review Transitions & CYP Journey	ICS – Children's Surgery & Anaesthesia ICS – Acutely Unwell Child
Promoting Prevention	Diabetes Prevention Programme Person Centred Care Personalisation People Keeping Well	Cancer Alliance: Lung Healthcheck FIT Improving access to cervical screening
All Age Mental Health	Mental Health Joint Work Programme	
Developing Neighbourhoods	Neighbourhoods / Primary Care Networks Primary Care Strategy Integrated Community Services GPIT	
Ageing Well	End of Life Care Care Homes Dementia Care Pathway Enhanced health in care homes	

SCH Priority Alignment

ACP 19/20 Priorities	SCH Priorities	Other linkage
Starting Well	Establish pathway to Excellence Programme Co-production of Trust wide quality strategy Develop provision for complex patients Develop and improve care for patients with learning disabilities Deliver clinical transformation programmes Deliver against quality and safety standards and respond to CQC report Review model and reduce waiting times for neurodisability services	
Promoting Prevention	Develop long term strategy Consider NHS Long Term Plan aspirations	
All Age Mental Health	Develop and improve CAMHS provision. Develop integrated physical and mental health pathways Collaborative lead for Tier 3 and 4 CAMHS Develop closer working with SHSC NHSFT	
Neighbourhood Development	Take active role in Shaping Sheffield Implement level 1 hosted network for Acutely III child	