

Review Progress Summary				
R = not on schedule	A = on schedule	B = undeliverable	G =achieved	Total
0	7	0	0	7

Ref	Recommendation	Action	Owner	Timescale	RAG	Progress
A	To ensure that there is an effective launch and continued promotion of the community directory to local people, key stakeholders and providers.	Phase 2 community directory will be tested during June / July 2015. A formal launch date will be established after feedback has been taken account of along with arrangements for on-going promotion and management	Community Directory working group	June / July for testing. Formal launch date tbc. after testing.	G	Procurement has commenced to purchase open objects software to enable development of the community directory to continue. Implementation timetable and plan will be confirmed as part of the procurement process.
B	To explore and understand with key partners how a community connector scheme would operate in the city including issues of promotion, recruitment and training that enables anyone who wishes to take part the opportunity to do so.	Undertake an evaluation of the Community Connectors pilot funded by East Sunderland Area Committee Understand the role of the Integrated teams once they are established and potential to develop a hub to connect existing roles as part of such a scheme. Align different models in place and associated health networks into one scheme where possible to streamline and maximise the role of the voluntary sector Establish lead arrangements for different elements of the model Use the above actions as a basis	Gillian Gibson/ Ian Holliday (CCG)/Graham King/Charlotte Burnham/	March 2016	G	The pilot has been evaluated and a project is being developed to further understand requirements of residents and how best to meet them and subsequently recruiting and training interested VCS organisations in order to better understand and coordinate locality health provision. Further information will be available Jan to march 2016.

		on which to develop a community virtual network to develop the role of community connectors to enable individuals, where appropriate, to be signposted and supported to access and use community resources or services when they don't require professional health services				
C	To look at how to develop arrangements to ensure that activities / initiatives are co-ordinated in order to minimise the potential for duplication and to provide a forum for sharing, learning and good practice.	Explore current network potential for providing suitable forums for sharing good practice including VCS networks, Area Health Champions Network, Adult Partnership Board and Carers' Implementation Network etc.	Graham King/Charlotte Burnham	March 2016	G	Work is ongoing and updates will follow at next monitoring phase.
D	To ensure that a measure of loneliness and/or social isolation is included in the Joint Strategic Needs Assessment.	<p>Looking at the development of a Joint Strategic Needs Assessment (JSNA) that will act as the single vehicle for all strategic intelligence, initially covering health and wellbeing and the wider issues that affect health such as employment, crime and disorder, housing and loneliness.</p> <p>The JSNA will be moved from a static annual publication to a continually evolving on-line resource.</p> <p>In order for the proposal to be</p>	Graham King / Julie Lynn	Dec 2015	G	<p>Meetings have commenced to progress the JSNA's review and maintenance from a static publication.</p> <p>As part of this process loneliness and social isolation will be considered for inclusion in the relevant parts of each JSNA.</p> <p>Updates will be provided on a regular basis on progression.</p>

		progressed a multi-agency steering group (time-limited task and finish group) would need to be established to progress the development and creation of the resource, with practitioner representatives responsible for the ongoing refresh of the resource online.				
E	To look, through integrated care, at the development of shared intelligence and how to ensure the use of all intelligence to help predict the softer issues within communities such as loneliness etc.	The development of integrated care models which bring people together to work in joined up teams will provide the driver for organisations to look at the information and intelligence sharing and breaking down those barriers that currently exist. People's approach to intelligence has been developed; with an initial programme of work that looks to better understand customer profiles and customer journeys; identifying triggers which result in needs – loneliness to be included in the work.	Ian Holliday (CCG)/Shar on Lowes	March 2016	G	Ongoing – updates will follow at next monitoring phase.
F	To explore the potential of an employee volunteer scheme within the council to provide opportunities for employees to volunteer their help to a	Actions will be confirmed with owner(s) prior to presentation at Cabinet	Alan Caddick	By April 2016	G	This is being wrapped up with a wider review of volunteering and a better understanding of the areas of need where volunteers are required. Once there is a better understanding

	local organisations, communities and projects.					of the “ask” of volunteers then specific actions and targets will be agreed.
G	To explore the potential for adoption of the Campaign to End Loneliness evaluation tool on the effectiveness of interventions on loneliness once it is released.	To test out how the Campaign to End Loneliness evaluation tool can be incorporated into future relevant commissioning arrangements with service providers, where appropriate.	Graham King/Ann Dingwall	March 2016	G	Ongoing – updates will follow at next monitoring phase.