

Appendix 7

Public Health

INTRODUCTION

- 1.0** In April 2013 responsibility for public health and some health services transferred from the NHS to local authority. The local authority is well placed to influence the wider determinants of health such as people's local environment, housing, transport, employment, and their social interactions all of which have an impact on an individual's health outcomes. Public health is about preventing disease and helping people to live healthier and longer lives by providing the information and environment in which they can do this.
- 1.1** The Public Health team successfully transferred to Swindon Borough Council in April 2013 and has integrated well and works collaboratively across the council and with a range of agencies to deliver on public health outcomes.
- 1.2** Public Health aims to protect and improve the health and wellbeing of local residents and although life expectancy has been improving across the borough, many people live with long term health problems including diabetes, heart disease and mental health problems. We need to focus on preventing ill health increasing the number of local people who live healthier lives and make positive lifestyle changes such as stopping smoking, being physically active, drinking sensibly and take up services such as screening, health checks and flu immunisation.
- 1.3** Swindon has a number of strategies which aim to improve health and wellbeing of local people, including the Health and Wellbeing Strategy, the Healthy Weight Strategy and the Get Swindon Active Strategy. All Swindon public health strategies have locally set outcomes using measures from the national Public Health Outcomes Framework, which sets out desired outcomes and the indicators that will help to understand how well the public's health is being improved and protected.

HEALTH IMPROVEMENT

1.4 Smoking

- 1.4.1** Smoking remains the primary cause of preventable illness and premature death, greater than the six next largest causes combined. It is the largest single preventable cause of cancer, a major cause of heart disease and stroke, and is responsible for a third of all deaths from respiratory disease. In 2012/13 there were 1,786 smoking attributable hospital admissions in Swindon. On average there are 292 smoking related deaths a year in Swindon.
- 1.4.2** Although Swindon did not achieve its local target of 1,300 quitters through the stop smoking services for 2014/15, 875 smokers in Swindon were supported to successfully quit smoking through our commissioned service. Wider tobacco control work has continued across Swindon to promote the smoke free agenda and reduce the number of people who smoke. This has had a positive impact on the smoking prevalence rate for Swindon which according to the latest national Integrated Household Survey data reports a smoking prevalence rate of 19.4% (2 out of 10 adults) for Swindon (England average 18.4%). This is down from 21.5% in the previous year. Smoking prevalence amongst our routine and manual workers remains significantly higher than the general rate at just over 27% (nearly 3 out of 10) but again has come down 2% points on the previous year.

- 1.4.3 We are making progress on our smoking in pregnancy rate which for 2014/15 was 12.9% down from 13.6% (382) in the previous year. We continue to work towards the national target of 12% by raising awareness of the risks of smoking during pregnancy (and after) and providing intensive support to those pregnant women that need it.
- 1.4.4 Activity has continued locally to raise awareness about the impact of smoking and the range of stop smoking support available across Swindon in clinical, community and workplace settings with a specific focus on areas of higher prevalence such as mental health and acute hospitals, our least affluent areas and routine and manual workplaces.
- 1.4.5 Most smokers start before they are 18. Reducing the uptake of smoking by children and young people remains a priority and a number of school based initiatives have continued that support young people to make healthy choices ranging from a peer led intervention that looks at children's perception of what they perceive to be normal amongst their peers versus the reality. This then goes towards changing their attitude towards smoking being the social norm.
- 1.4.6 The rapid increase in use of electronic cigarettes in recent years has been a focus for public health debate and activity in 2014-15. These new devices are recognised for the potential harm reduction benefits to existing smokers. However, the medium to long term risks of using such products are as yet unknown and there is concern that electronic cigarettes could indirectly promote smoking due to the nature of their use. Additionally, there has been an increase in accidental fires attributed to e-cigarettes and also child poisonings.

1.5 Obesity

- 1.5.1 Obesity is a national health problem which costs the NHS in Swindon an estimated £31million a year, increases costs to social services and has a negative impact on the local economy. It is caused by an energy imbalance between what we eat and what we do. Being overweight or obese can affect people's ability to make the most of their lives. It also increases the risk of illnesses such as stroke, heart disease, type 2 diabetes and dementia.
- 1.5.2 The National Public Health Outcomes Framework includes outcomes for excess weight (overweight and obese) in children aged 4-5 years, 10-11 years and adults. Swindon children have high rates of excess weight, however Swindon's rates are not greater than England, or comparator areas, with 24.1% of 4-5 year olds and 33.1% of 10-11 year olds carrying excess weight. 70.4% of adults in Swindon have excess weight. This was measured through self-reported weight and height in the Active People's Survey, 2012. Excess weight prevalence in Swindon adults is higher than in England, the South West and some comparator towns such as Bedford, at a statistically significant level.
- 1.5.3 Obesity in Swindon adults (22.6%) was close to the levels reported for England (23%) and the South West (22.7%). The Active People Survey data suggest that it is in the overweight, not obese, category where Swindon has higher rates than England and the South West, with an overweight prevalence of 47.7% in Swindon, 40.8% in England and 40.0% in the South West. A similar pattern for overweight and obesity rates in Swindon can be observed in comparator towns.
- 1.5.4 National data shows that excess weight is higher in men than in women. The surveys do not consider why this is, but possible explanations include inactive jobs, perceived

lack of time to exercise or to prepare healthy meals and excessive intake of alcohol and food.

- 1.5.5 As a result of the above new data about excess weight, we are piloting an innovative lifestyle and weight management programme called Football Fans in Training (www.ffit.org.uk), which was developed in Scotland. This programme targets middle aged male football fans, using the latest scientific approaches to weight loss, physical activity and diet, delivered at football stadia by community coaches. It uses football to motivate and inspire men who we know do not engage well with existing weight loss programmes. The initial evaluation of the first completed programme indicates effective results at 12 weeks when considering weight loss, waist size, blood pressure, eating and exercise habits and improvements in wellbeing.
- 1.5.6 We are looking at developing some of our current programmes for groups where there are higher rates of obesity e.g. the healthy cookery course is being adapted, with courses for people with mild learning disabilities and people with severe and enduring mental health problems.
- 1.5.7 The Swindon Healthy Weight Strategy and action plan have been developed with local stakeholders and ratified by Swindon Borough Council and Swindon CCG, in order to tackle obesity. This strategy works alongside a raft of other strategies, in order to build an environment that supports physical activity and healthy eating as part of everyday life and gives support and advice to empower people to make lifestyle changes. These other strategies include the Get Swindon Active Strategy, Swindon Local Transport Plans and Swindon Core strategy and supplementary planning documents.
- 1.5.8 The Healthy Weight action plan looks across the life course, from pregnancy and early years through to adults and older people. The range of interventions covers both prevention and treatment of obesity. There are programmes aimed at the following areas: active travel, early years settings, schools, community settings, workplaces, the built environment and the NHS; some details of these programmes are outlined in the physical activity section below.

1.6 Physical Activity

- 1.6.1 It is estimated that physical inactivity costs £7.4 billion to the national economy as a whole, in terms of healthcare, premature deaths and sickness absence. The cost of inactivity in Swindon to the health sector alone is estimated by Sport England to be £3.3 million. Inactivity is harmful to both mental and physical health and places a substantial cost burden on health and social care services, through the treatment of long-term conditions and associated acute events such as heart attacks, strokes and falls, as well as the costs of social care arising from the loss of functional capacity. Increasing activity levels has a huge potential to benefit health and social care services, especially in the context of an aging population.
- 1.6.2 For adults the National Public Health Outcomes Framework includes outcomes for both physical activity and inactivity levels. 51% of Swindon adults are physically active (i.e. more than 150 minutes of moderate intensity physical activity per week) 34% are considered physically inactive (i.e. doing less than less than 30 minutes of moderate intensity activity per week). Swindon has a higher prevalence of inactive people and a lower prevalence of active people compared to England, comparator towns and the South West

- 1.6.3 A Get Swindon Active Strategy 2015-2020 has been developed by a number of partners in Swindon Borough Council, Swindon CCG and their commissioned services, the voluntary and community sector and residents in order to tackle the low rates of physical activity in Swindon, with a vision of 'everybody active every day'.
- 1.6.4 Consultation for this strategy showed that there is already a range of opportunities within Swindon supporting people to be more active, such as sports and leisure clubs, work around sustainable transport (walking and cycling) and the built environment, work in schools, and workplaces. This work is on-going and the strategy acknowledges this and aims to support its continued development. It was felt that Swindon should particularly focus on areas of work that encourage inactive people to be active and reduce inactivity levels overall. Such as:
- Promote forms of exercise which can be built into everyday life e.g. walking
 - Support neighbourhoods, communities and voluntary organisations with initiatives to promote physical activity
 - Influence the built environment so that being active becomes an easy choice for Swindon residents
 - Encourage employers to promote healthy workplaces and encourage physical activity
 - Encourage frontline professionals to promote physical activity
 - Continue to provide easily accessible information on opportunities for physical activity within Swindon
- 1.6.5 An action plan is being developed to take this forward. We are also looking at innovative ways of getting people involved in physical activity e.g. the Playing Out project, where local residents can apply to close their streets to outside traffic up to once a week, so that children can play outside, and other residents can meet on the street to informally interact. This is a programme that is implemented in over 30 other local authorities.

1.7 NHS Health Checks

- 1.7.1 The NHS Health Checks are available to all Swindon residents aged 40–74 through GP surgeries, local pharmacies and other community settings. Local media activity continues to promote health checks and encourage uptake and a programme of community events targeting vulnerable communities has increased uptake within our more at risk communities including our Black and Minority Ethnic communities.
- 1.7.2 The aim of the programme is to reduce levels of cardiovascular disease (CVD) risk and associated premature mortality in Swindon, through the systematic and proactive primary prevention and identification of patients at risk of developing Cardio Vascular Disease (CVD).
- 1.7.3 In 2014/15 20.3% of our eligible population were invited for a health check with 7.4% of the eligible population taking up the offer of the health check compared with 8.9% in 2013/14 and 6.6% in 2013/13. This represents an uptake rate of 36.2%. 4,493 individuals received a health check during 2014/15.

- 1.7.4 Initiatives are now in place to increase the uptake by working with practices, targeting workplaces, making better use of the pharmacies and through advertising and promotions.

1.8 Falls Prevention

- 1.8.1 The Falls and Bone Health Joint Strategic Needs Assessment published in 2014 highlighted that on average each year 30% of over 65s (for Swindon that equates to an estimated 10,000 people) and 50% of over 80's will experience one or more falls. Falls are not an inevitable consequence of old age; rather they are nearly always due to one or more underlying risk. Recognising and modifying these risk factors is crucial in preventing falls and injuries.
- 1.8.2 Falling can precipitate loss of confidence, the need for regular social care support at home, or even admission to a care home.
- 1.8.3 Public health commission and work with a variety of stakeholders to prevent falls including the provision of evidence based strength and balance training through group classes and home based interventions, the Health Ambassadors and the new Community Navigators project.

1.9 Affordable warmth

- 1.9.1 Cold and damp housing is a major cause of social exclusion, ill health and excess winter deaths. The Swindon Safe & Warm scheme uses a systematic doorstep assessment process to identify households in fuel poverty who could benefit from help to reduce their fuel bills, improve their incomes and better heat their homes. Activity has continued to raise awareness and promote this scheme
- 1.9.2 The programme has established a highly successful service that is able to support vulnerable people and tackle some of the causes of fuel poverty. It links closely with other service providers such as the Fire & Rescue Service and the falls prevention support services and Carer support services. Since the scheme began in October 2010, over 16,750 households have been assessed with over 1,800 insulation measures being installed and a projected total additional income for residents of over £2.5 million identified from the income maximisation process.

HEALTH PROTECTION

1.10 Emergency Preparedness, Resilience and Response (EPRR)

- 1.10.1 Swindon Borough Council is a category 1 responder under the Civil Contingency Act (CCA 2004) and the Director of Public Health has a specific statutory role in Emergency Preparedness, Resilience and Response (EPRR) under the Health and Social Care Act 2012.
- 1.10.2 Swindon is a member of the Wiltshire and Swindon Local Health Resilience Partnership and the Wiltshire and Swindon Local Resilience Forum. We maintain and update our community risk register. As part of this partnership, we are constantly developing and testing our EPRR plans to risks identified in our community register. We have developed and stocked our centres as part of a Mass Casualty Plan in conjunction with Wiltshire. We have also updated our plans to deal with severe weather, pandemic flu and revised our Major Incident Plan.
- 1.10.3 In order to ensure resilience SBC's public health, civil protection and environmental health teams work closely with colleagues in Public Health England (PHE), NHS

England, Swindon Clinical Commissioning Group (CCG), Great Western Hospitals NHS Foundation Trust, SEQOL and Carfax Health Enterprise (CHE).

- 1.10.4 Swindon Borough Council has recently led on a major incident as a result of the fire at Averies Recycling Centre on Marshgate Road. This incident demonstrated SBC capacity to deal with major incidents in spite of initial hiccups.
- 1.10.5 Swindon Borough Council is putting together an out of hours emergency response rota to cover strategic and tactical response. This is in addition to the existing out of hours operational response. Training for this rota has been provided and this is expected to start 6th July 2015. This rota is expected to improve the resilience of the council in dealing with prolonged major incidents.

1.11 Immunisation and Screening

- 1.11.1 Much of the vaccination and screening programme is now commissioned by the NHS. GPs do the majority of the immunisations in childhood and for adults. School based Immunisations such as Human Papilloma Virus (HPV) vaccines and some boosters are given in schools – and therefore fall under the jurisdiction of local government. It is the responsibility of the local authority to assure itself that there is sufficient uptake and monitoring of immunisations and screening for both adults and children.

Along with our partners in the NHS, we have played an active role in reaching out to hard-to-reach groups, which helps address health inequalities, and working with schools and communities to improve awareness about the importance of screening and vaccination. The new Shingles vaccine for over people aged over 70 has been introduced. In Swindon, we commission MMR vaccination to school leavers and Hepatitis B vaccination to children who started vaccinations abroad.

Screening for cancer continues to be a priority to prevent early death. Screening programmes exist for cervical, bowel and breast cancer and we have proactively encouraged uptake by eligible Swindon residents. We have recently successfully extended the age for bowel screening up to aged 75 and supported locally a number of awareness raising campaigns for ovarian, bowel, bladder, lung and breast cancer that have been delivered under the National Awareness and Early Development Initiative (NAEDI) programme in conjunction with the Thames Valley Cancer Network (TVCN).

Seasonal Flu Vaccine

- 1.11.2 Swindon achieved 74.9% of over 65 year olds vaccinated against seasonal flu for 2013/14. This was slightly lower than the previous year (75.2%) but the highest across the Bath, Gloucestershire, Swindon and Wiltshire (BGSW) Area Team. 53.9% of those under 65 year olds identified as at risk were vaccinated.
- 1.11.3 45.5% of pregnant women had the vaccine and again although lower than the previous year was the highest uptake across the BGSW area.
- 1.11.4 The seasonal flu vaccine for all 2 and 3 year olds was introduced in the 2013/14 season. The uptake rate for seasonal flu for 2 year olds in Swindon was 41.0% and 39.6% for 3 year olds which we hope to improve upon for this winter.
- 1.11.5 We have promoted, encouraged and supported the uptake of the flu vaccine amongst frontline health and social care staff in conjunction with the local authority and provider organisations in order to protect our vulnerable residents and reduce

unnecessary admissions but the uptake of Season Flu vaccination remains low in this group.

1.12 Infectious Diseases

Tuberculosis

1.12.1 Swindon continues to have very low levels of TB diagnoses. We continue to work with colleagues in Public Health England (PHE) to ensure that Health Workers have continued high vigilance for TB. We are also working with vulnerable members of our community and staff who provide services to them to raise the awareness of TB, its symptoms and treatment to better support them in dealing with the disease.

1.12.2 We work with NHSE area team to monitor the delivery of the community TB services for Swindon residents delivered by Carfax Street Health Enterprise.

Hepatitis B and C

1.12.3 Work has commenced in Swindon to make treatment service more accessible for those with Hepatitis. Public Health are working with GWH and CCG to explore options for providing the service more locally. At present patients access treatment at John Radcliff in Oxford and plans are in place to improve this situation by April 2016.

1.12.4 During 2014/15 Public Health has worked with CRI our substance misuse service to improve testing and vaccination for hepatitis B and testing and treatment for hepatitis C. 61% (333) of CRI clients had been tested and had completed vaccination courses for hepatitis B. 87% (473) had been tested (or were not appropriate for testing) for hepatitis C. 13% (71) were found to be hepatitis C positive

Outbreak control

1.12.5 There have been a few outbreaks of viral gastroenteritis in care homes in Swindon. Public Health work with PHE to manage these outbreaks and educate staff.

HEALTHCARE PUBLIC HEALTH

1.13 Dementia

1.13.1 The Dementia Joint Strategic Needs Assessment which was published in 2013 has informed the multi-agency Dementia strategy and action plan which was adopted by both Cabinet and the CCG earlier this year. Making Swindon a dementia Friendly Community is a key objective. Dementia friend's awareness sessions have been coordinated for both SBC staff and councillors.

Cancer

1.13.2 Swindon Public Health Team continues to lead the Cancer Local Implementation Group (LIG), a quality assurance group for cancer services. Through this forum, we have been able to drive up quality of services by ensuring that patient voices are heard, national standards are followed and services commissioned meet the need of Swindon residents.

1.13.3 Members of the Public Health team have been involved in a series of Cancer Services Workshops arranged by Great Western Hospital to review current and future demand and capacity for cancer care provided by the Trust.

1.14 Mental Health and Suicide Prevention

- 1.14.1 The Mindful Employer project continues to deliver on raising awareness and educating employers in Swindon of mental health issues and what they can do to improve the mental health of their workforce.
- 1.14.2 A self-harm register is now embedded in GWH to record and monitor the presentation of self-harm and put initiatives in place to reduce hospital admissions and re-attendances. An information pack for patients presenting with self harm has been developed.
- 1.14.3 Swindon Mind has now been commissioned to deliver Mental Health First Aid training in Swindon for all front line staff to increase awareness of mental health issues and tackle some of the stigma associated with it. They will also be promoting the Five Ways to Wellbeing to promote mental resilience throughout the town.
- 1.14.4 Partners in Swindon have signed the Mental Health Crisis Care Concordat demonstrating their commitment to working together to improve the care given to those who are experiencing a mental health crisis, reduce the number of sections under the mental health act and ensure that people get the care they require at the right time by the most appropriate service.
- 1.14.5 The three year rolling suicide rate in Swindon 2011-13 has increased to 10.7 per 100,000. However, this reflects a particularly high suicide rate in 2012 which reduced in 2013. Swindon has been an active member of the Zero Suicide South West Collaboration. The Swindon suicide prevention group continues to focus on reducing suicide rate and in particular in men as men account for three quarters of all suicides in Swindon.
- 1.14.6 During 2014-15 Public Health have led work to develop an integrated care pathway for mental health care for women in Swindon during pregnancy and the first year after birth (the perinatal mental health period). A multi-agency group has been established to oversee the implementation and delivery of a perinatal and infant mental health strategy for Swindon and an integrated perinatal mental health care pathway.

1.15 Joint Strategic Needs Assessments (JSNA)

- 1.15.1 Providing information and intelligence and the local scope on health and social care needs is a core element of the councils public health function. Public health leads the ongoing programme to develop the Joint Strategic Needs Assessment (JSNA) for Swindon and to inform commissioners and the commissioning process.
- 1.15.2 A number of JSNA's have been developed and published with multi agency and service user involvement. This year's publications include: Pharmaceutical Needs Assessment, Sexual Health, Adult Autism, JSNA Summary for 2014. They can be found on the following web link <http://www.swindonjsna.co.uk/>

A Children and Young People JSNA is currently under development which will focus particularly on the Best Start, Children with Complex Needs and Mental Health.