

Report To:	Governing Body Meetings in Common
Report Title:	Public Health Update
Report From:	Rachel Robinson, Associate Director of Public Health
Date:	8 th March 2018
Previously Considered by:	Executive Group

Action Required (<i>delete as appropriate</i>)							
Decision:		Assurance:		Information:	✓	Confidential	

Purpose of the Report:
To update the Governing Bodies on the Core Offer work programme from Public Health Warwickshire with Warwickshire North CCG and the Rugby Borough areas.
Key Points:
The report includes updates on the following areas for information: <ul style="list-style-type: none"> • Seasonal Flu vaccine uptake 1st September to 31st October 2017 • Drug and Alcohol Service Redesign & Re-commissioning • Smokefree Warwickshire • Smoking in Pregnancy • Cervical Screening • Rugby Health and Wellbeing Partnership • North Warwickshire Health and Wellbeing Partnership • Director of Public Health Annual Report
Recommendation:
The Governing Bodies are requested to NOTE this report.

Implications							
Objective(s) / Plans supported by this report:	Business Plan 2015/16 Refresh and Forward View to 2020						
Conflicts of Interest:	Not applicable						
Financial:	Non-Recurrent Expenditure:	Not applicable					
	Recurrent Expenditure:	Not applicable					
	Is this expenditure included within the CCG's Financial Plan? (<i>Delete as appropriate</i>)	Yes		No		N/A	✓
Performance:	Not applicable						
Quality and Safety:	Not applicable						

Equality and Diversity:	<p>General Statement: The CCG is committed to fulfil its obligations under the Equality Act 2010, and to ensure services commissioned by the CCG are non-discriminatory on the grounds of any protected characteristics. Policies/decisions may need to be adjusted in line with any equality analysis or due regard. Any decision that is finalised without being influenced by appropriate due regard could be deemed unlawful.</p>						
	Has an equality impact assessment been undertaken? (<i>Delete as appropriate</i>)	Yes (attached)		No		N/A	✓
Patient and Public Engagement:	Not applicable						
Clinical Engagement:	Not applicable						
Risk and Assurance:	Not applicable						

Public Health Update March 2018

Flu Vaccine Uptake



WARWICKSHIRE INTELLIGENCE BULLETIN

SEASONAL FLU VACCINE UPTAKE 1 SEPTEMBER TO 31 DECEMBER 2017

Summary

Public Health England released provisional data for the uptake of the seasonal influenza vaccine in GP registered patients, primary schools and for healthcare workers in England from 1 September to 31 December 2017.



The data is shown at Clinical Commissioning Group (CCG) level for GP registered patients, primary schools and at national and individual trust level for healthcare workers.

Key Findings – GP Registered Patients (CCGs) %

CCG	2017/18 (Sep-Dec 2017)			2016/17 (Sep-Dec 2016)		
	Age 65 and over	Clinical at risk (age under 65)	Pregnant Women	Age 65 and over	Clinical at risk (age under 65)	Pregnant Women
Coventry & Rugby CCG	69.3	46.0	44.9	68.4	48.5	47.1
South Warwickshire CCG	76.6	53.3	50.1	75.0	54.1	51.2
Warwickshire North CCG	69.2	44.8	46.3	68.6	48.9	48.2

CCG	2015/16 (final)			2014/15 (final)		
	Age 65 and over	Clinical at risk (age under 65)	Pregnant Women	Age 65 and over	Clinical at risk (age under 65)	Pregnant Women
Coventry & Rugby CCG	69.5	47.1	47.9	72.6	54.0	47.5
South Warwickshire CCG	74.2	50.6	48.4	77.6	58.5	50.4
Warwickshire North CCG	69.2	44.9	44.8	72.2	54.3	45.6

CCG	2017/18 (Sep-Dec 2017)		2016/17 (Sep-Dec 2016)		
	Age 2	Age 3	Age 2	Age 3	Age 4
Coventry & Rugby CCG	42.0	43.6	34.2	36.5	27.3
South Warwickshire CCG	62.1	59.8	55.1	55.3	45.7
Warwickshire North CCG	48.0	47.6	37.8	41.1	30.3

CCG	2015/16 (final)			2014/15 (final)		
	Age 2	Age 3	Age 4	Age 2	Age 3	Age 4
Coventry & Rugby CCG	28.8	33.8	26.6	33.8	42.0	29.0
South Warwickshire CCG	49.0	47.9	41.8	54.9	58.5	47.7
Warwickshire North CCG	33.9	35.4	28.5	35.0	40.4	27.9

Key Findings – GP Registered Patients (Local Authority) %

Local Authority	2017/18 (Sep-Dec 2017)		2017/18 (Sep-Dec 2017)		
	Age 2	Age 3	Age 65 and over	Clinical at risk (age under 65)	Pregnant Women
England	40.4	41.5	71.2	46.6	45.3
West Midlands	42.5	42.5	70.0	46.4	43.0
Coventry	41.8	44.2	69.1	46.5	46.3
Warwickshire	53.5	51.9	73.2	48.8	46.7

Key Findings – Primary Schools (Local Authority) %

Local Authority	2017/18 (Sep-Dec 2017)				
	Age 4-5	Age 5-6	Age 6-7	Age 7-8	Age 8-9
England	61.8	60.0	59.5	56.7	54.8
West Midlands	59.2	57.1	57.2	53.9	52.7
Coventry	77.4	78.2	78.4	65.2	63.2
Warwickshire	71.7	68.5	68.1	66.9	66.0

Key Findings – Healthcare Workers (Trust) %

Authority/Trust	2017/18 (Sep-Dec)	2016/17 (Sep-Dec)	2015/16 (final)
England	63.9	61.8	50.8
West Midlands	64.3	N/A	54.3
Coventry & Warwickshire Partnership Trust	49.6	53.3	35.0
George Eliot Hospital NHS Trust	69.1	76.6	51.0
South Warwickshire NHS Foundation Trust	72.9	79.0	48.1
University Hospital Coventry & Warwickshire NHS Trust	70.1	77.3	63.9

Drug and Alcohol Service Redesign & Re-commissioning Process

Background

The current contracted service for substance misuse comes to an end on 30th March 2018. The proposals for the new service include significant changes both to the model of delivery and the financial commitment that supports the countywide service. Since the service was last commissioned in 2011 there has been a significant change in the prevalence and demand for drug and alcohol support services, with new and emerging substance misuse patterns and an increasing number of people with complex needs. Over the next 9 months the service will be recommissioned with the new service starting from 1st April 2018.

Update

Contract award has officially taken place on 2nd January 2018 and is as follows:

Children and Young People's Drug and Alcohol Service - Compass

Adult Drug and Alcohol Service - Change Grow Live (CGL)

Recovery Network - Change Grow Live (CGL)

Mobilisation work is underway with Public Health meeting with the providers over the coming weeks to discuss service implementation. The estimated launch date of the new services is anticipated to be 1st April 2018.

Smokefree Warwickshire

Background

A 'Smokefree Warwickshire' Action Plan has been developed by the Smokefree Warwickshire Alliance which was established to oversee and advise on the strategic direction of Tobacco Control across Warwickshire and to monitor and review progress of the Smokefree Warwickshire project areas identified within the action plan. <http://www.warwickshire.gov.uk/smokefreealliance>

Update

On Thursday 11th January 2018, ASH launched the NHS Smokefree Pledge, an update to the NHS Statement of Support for Tobacco Control. The NHS Smokefree Pledge sets out a series of commitments made by NHS organisations to reducing the harm caused by tobacco, through implementing NICE Guidance on supporting smokers in the healthcare system to quit.

The Pledge has been endorsed by the Public Health Minister Steve Brine MP, and the Chief Executives of NHS England and Public Health England.

Update the Smokefree Warwickshire Action Plan to reflect the national ambitions for reducing smoking prevalence

Smoking in Pregnancy

The Warwickshire Stop Smoking in Pregnancy Service offers non-judgmental support & advice to pregnant smokers to help them take steps towards a healthy, smoke-free pregnancy, including free nicotine replacement therapy (NRT) such as patches, lozenges, and other products. Pregnant smokers can either self refer or be referred by their midwife. Support for partners and family members who want to quit too is also available.

The recently published Statistics on NHS Stop Smoking Services for England: April to September 2017/18 shows that Warwickshire has consistently high numbers of pregnant smokers setting a quit date with a 49% success rate (higher than the national average). Q2 report from the Specialist Smoking in Pregnancy Service shows a higher number of referrals (92%) who have received a CO test at booking and is . The aim is to achieve 100%.

Additional training in Risk Perception for midwives is being offered in April and development of additional interventions through the website to motivate pregnant smokers

Improving Access for Cervical Screening in Warwickshire

Background

The crude mortality rate shows that there are 3 cervical cancer deaths for every 100,000 females in the UK. However, screening uptake nationally and locally currently stands at an 18 year low. It is estimated that , if all the eligible women were screened, we could prevent 83% of Cervical cancers. Warwickshire coverage follows the national and Regional trends and currently stands at 72, 7%, which is well below the recommended 80% coverage. We have produced the "Improving Access to Cervical Screening in Warwickshire" paper which will go to CCG Clinical Development groups with specific recommendations for action.

Update

Improving access to Cervical Screening in Warwickshire report as presented at the Coventry & Rugby CCG Clinical Executive Group. The group welcomed the report and supported all the recommendations. We are invited to present the report at the North Warwickshire CCG as well. The Clinical Executive Group of the C&R CCG will implement recommendations of the report which should improve the cervical screening uptake in their population, potentially saving lives and resources.

Rugby Health and Wellbeing Partnership

Background

The Rugby Joint Health and Wellbeing Partnership Group (formerly the Rugby Locality Partnership Group) had been established in 2013 when Coventry and Rugby CCG came into being, in order to provide a multidisciplinary forum for exchange of ideas and information re local issues, and to suggest local innovations and operational solutions to meet the overall CCG strategy. Due to staffing and other issues, CRCCG were no longer able to support the group but the members were keen for the forum to continue, and Public Health Warwickshire agreed to take over the support role. The membership draws from local stakeholders such as County and Borough Council members, CCG, Social Services, Warwickshire CAVA, Community Services including Mental Health, Public Health, local Primary Care, Healthwatch, Chaplaincy (representing all faith groups), and Warwickshire Racial Equalities Partnership, and the Group will continue to aim to achieve its purpose by aligning the strategic direction of the various bodies, prioritising actions and presenting clear plans of what will be done locally to address needs, improve health and reduce health inequalities. Using the JSNA to identify and prioritise the needs of the Rugby population, the partnership will agree it's local Strategy and vision. A strategy will be developed to outline not only the needs and vision for Rugby population but translates this into local, practical action delivered in partnership within priority communities.

Update

The Rugby Partnership met at the beginning of January to discuss a health and wellbeing offer for the Houlton development and the Making Every Contact Counts Programme. A paper will be put together for the developers at the Houlton site by the end of March 2018. The meeting on the 7th February discussed self harm and the new CAMHS service. An update on the work at the Methodist Church was also received by the group and links made between local services.

Director of Public Health Annual Report 2018

Background

Directors of Public Health (DPH) have a statutory requirement to write an annual report on the health of their population, and the local authority is required to publish it. The DPH Annual Report is a vehicle for informing local people about the health of their community, as well as providing necessary information for decision makers in local health services and authorities on health gaps and priorities that need to be addressed. The theme for this report is social media and how it impacts on young people's health and wellbeing.

Update

- The theme of this year's report is social media and its impact on the health and wellbeing of young people. The team have commissioned an external consultant to explore the impact locally with young people. Pilot focus groups and the main focus groups have been completed in schools with young people aged 10-18 years across Warwickshire. The findings from these groups will be used to inform an online survey which will be launched mid February. The survey will be available for all young people aged 10-18 in Warwickshire.
- 94 young people participated in the main focus groups across 4 schools in Warwickshire.
- The team are currently building an online survey which will be launched mid February. The survey will be open for four weeks and the team will work with marketing and communications to promote the survey to all young people aged 10-18 in Warwickshire.

Warwickshire North Health and Wellbeing Partnership

Background

Warwickshire North Health and Wellbeing Partnership was formally established in 2012 to ensure local delivery of the Countywide Health and Wellbeing Strategy.

The group meets bi-monthly and comprises elected members and officers from Nuneaton and Bedworth and North Warwickshire Borough Council's, NHS Warwickshire North Clinical Commissioning Group, Warwickshire CAVA and Warwickshire County Council.

Using the JSNA to identify and prioritise the needs of the North Warwickshire population, in 2012 the partnership agreed its local Strategy and vision for 2012-15. This was updated in 2016. The strategy outlines not only the needs and vision for Warwickshire North population but translates this into local, practical action delivered in partnership within priority communities. The Partnership is supported by a governance structure to deliver the work programme and outcome measures to monitor progress.

Update

The board met in January and finalised their 2 year review. The partners agreed to support the JSNA process, they received an update on the #onething campaign and community catalyst work. It was agreed that End of Life Care should be a focus for the next meeting following the CQC review of the George Eliot. The partnership also agreed to extend their remit and membership from April to include local health and social care providers. The April meeting would be extended to facilitate conversations about next steps for the Warwickshire North Health and Wellbeing Partnership and priority areas.

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