Healthy Lifestyles Outcome

2017/18 Performance Report and Action Plan

Priority Outcome: Children and adults in Nottingham adopt and maintain Healthy Lifestyles

Priority Actions:

- Young people and adults will choose to have safer sex reducing the risk of unwanted pregnancies and sexually transmitted infections
- People who drink alcohol will drink responsibly, minimising the harms to themselves and those around them
- Nottingham and its citizens will be smoke free
- People will have a healthy and nutritious diet
- People will be physically active to a level which benefits their health
- People will be able to maintain a healthy weight

Metric/ KPI		Baseline	Targe	t and Actu	ual Perfor	mance	Direction of travel	Commentary
Please note: reporting timeframes relate to the year in which data was released. In many cases, the source data relates to an earlier timeframe. E.g. Under 18 conception rate released in 2016/17 is 2015 actual data.			16/17	17/18	18/19	19/20		•
Under 18 conception rate (per 100,000) (PHOF	Target	32.8	31.1	27.9	24.8	21.7	Not on track	Improvement on the
indicator 2.04)*	Actual	32.8	31.2					previous year (not statistically significant).
All new STI diagnosis (excluding Chlamydia age <25)	Target	1040	989	938	888	837	On track	Improvement on the
(per 100,000) (Sexual Health and Reproductive Health Profile)*	Actual	1040	1066	833				previous year (not statistically significant).
HIV late diagnosis (PHOF indicator 3.04) (newly diagnosed CD4 count <350 cells per mm³)*	Target	52.2%	40.8%	39.7%	38.5%	37.4%	On track	Improvement on the previous year and
	Actual	52.2%	40.8%					achieving target trajectory.
A reduction in hospital admissions for alcohol related causes (as measured by the PHOF narrow measure) to	Target	927.5	850.9	812.6	774.3	736.0	No additional data	Statistics currently unavailable due to an
be in-line with the Core Cities average	Actual	927.5						inputting anomaly.
A reduction in the number of reported incidents of alcohol related ASB and violent crime in the night time economy, specifically:								There are a number of methodological issues with reporting alcohol related
Alcohol related crime							No additional data	crime and incident statistics
 Alcohol related violence 	Actual	998	1446				Not on track	(see Enclosure 1). The
 Alcohol related ASB incidents 	Actual	3286	2778				On track	increase in alcohol related violence is due to a data
 Alcohol related offences in the night-time economy 							No additional data	integrity audit.
Reduce the percentage of adults who smoke to the top	Target	25.0%	24.0%	23.0%	22.0%	21.0%	On track	Improvement on previous
4 Core Cities 2014 average (PHOF 2.14)*	Actual	25.0%	24.0%	21.5%				year (statistically significant)
Reduce the percentage of adults in routine and manual groups who smoke to the top 3 Core Cites 2014	Target	30.5%	30.1%	29.0%	27.9%	26.8%	Not on track	Improvement on previous year (statistically
average (PHOF 2.14)*	Actual	30.5%	33.4%	31.3%				significant)

^{*} Source data is calendar year.

Metric/ KPI Please note: reporting	timeframes relati	e to the year in		Baselin	e Targe	et and Act	ual Perfo	rmance	Direction o	f travel	Commen	tary
which data was release relates to an earlier tim rate released in 2016/13	ed. In many case neframe. E.g. Und	s, the source data ler 18 conception			16/17	17/18	18/19	19/20				
Reduce the percentag to the top 4 Core Cites			Target	18.1%	15.8%	14.7%	13.5%	12.4%	Not on tr	rack		tion on previous statistically
		(Actual	18.1%	18.7%						significan release y PHOF sh significan	t) however recent et to be updated in ows statistically t improvement to 016/17 data)
Increase the proportion recommended 5-a-day			Target	43.6%	44.4%	46.7%	48.9%	53.4%	On trac	ck		on course to target. An
(PHOF 2.11i)*	y to the top 4 oo	To Ollios / Wordge	Actual	43.6%	44.4%						improvem previous	ent on the
Increase breastfeeding birth to the top 3 Core			Target	47.7%	48.7%	49.8%	50.9%	52.1%	No additional data			,
		· · · · · ·	Actual	47.7%								
Increase the percentag			Target	63.1%	64.4%	65.6%	66.9%	68.1%	No addition	No additional data Previous target w		
Core Cities average (1 England Active Lives S	Survey)	, , ,	Actual	63.1%							on Active People Survey which has been replaced by Active Lives Survey. Target reset accordingly.	
Decrease the percenta Core Cities average (<			Target	24.8%	23.9%	23.0%	22.1%	21.2%	No addition	al data		
England Active Lives S		ok) (Oport	Actual	24.8%							New data	due to be in Sep 2017
Reduce the percentag			Target	62.3%	61.6%	60.8%	60.1%	59.3%	Not on tr	ack		tion on the
the top 3 Core Cities a	average (PHOF 2	2.12)"	Actual	62.3%	62.4%						previous statistical	year (not ly significant)
Reduce the percentag			Target	26.7%	24.8%	23.9%	22.9%	22.0%	Not on tr	ack	Improven	ent on the
excess weight to the 1 2.06i)**	top 4 Core Citie	s average (PHOF	Actual	26.7%	25.5%						previous statistical	year (not ly significant)
Reduce the percentag			Target	37.9%	37.5%	37.3%	37.1%	36.9%	On trad	ck		nent on the
with excess weight to to (PHOF 2.06ii)**	ine top 4 Core C	nues average	Actual	37.9%	37.0%				_		previous statistical	year (not ly significant)
KEY Or	n track	Target is being met	Not on trac	ir ta	Data is mproving bu arget not bei net	t 💮	on track		et is not g met	No add data	itional	There has be no published data in the reporting period

^{*} Source data is calendar year. ** Source data is academic year.

Priority Groups

Sexual Health: Young people including care leavers and those with learning disabilities, young people living from deprived households, men who have sex with men (MSM), single homeless people, intravenous drug users and sex workers.

Alcohol misuse: All adults whose drinking behaviour puts them at risk of alcohol related harm, including dependent drinkers. Adults living in the most deprived areas are disproportionately affected by alcohol related harm. Students and young people whose drinking behaviour puts them at risk of alcohol related harm. **Smoke-Free:** Those living in deprived areas, children and young people, pregnant women and their unborn babies, black and minority ethnic groups, those with mental health needs and those in routine and manual jobs.

Diet and Nutrition: Children aged 18 years and under, young adults aged 19-24 years, smokers, citizens in lower socio-economic groups, BME groups, pregnant women and adults aged 65 years and older living in institutions.

Physical Activity: Children and adults from deprived households, women (including pregnant women), older people and adults with a disability or long term limiting illness

Healthy Weight: Low income groups, pregnant women, adults with learning disability, older people, black and minority ethnic groups.

Action	Milestone	Success measure		`	'ear		Lead Officer
			16/17	17/18	18/19	19/20	
Theme: Create a culture t	o support good sexual health for	all and reduce stigma, discrimination,	prejudi	ce and he	ealth inec	qualities	
Build knowledge and resilience in children & young people	2000 new C-card registrations annually 85 schools signed up to sex	Improved promotion and up-take of condoms, incl. further development of C-Card scheme Improved provision of SRE in schools	✓	√	✓	✓	Notts Healthcare Trust NCC, PSHE
	and relationships education (SRE) Charter	Improved provision of SIXE in schools					Advisory Team
Reduce sexual health inequalities in access to and outcomes of commissioned sexual	Conduct health equity audit based on baseline data, new service data and population need	Partners agree to delivery of actions based on recommendations in health equity audit	✓				Sexual Health Strategic Advisory Group
health services	Development of recommendations based on audit of population need and service provision, to improve health equity outcomes		√				
	tion to reduce the rates and onw I health through outreach to the	ard transmission of HIV and sexually to most vulnerable	ransmitt	ed infect	ions (STI	s), includi	ng proactive
Promote good sexual health through health promotion and outreach	Programme of outreach and health promotion complete	15 workshops with vulnerable groups in 16/17 15 targeted events attended/partnership promotional activities in 16/17 10 SH awareness courses/group presentations in 16/17	√				NUH
Reduce the rate of sexually transmitted	Online HIV and chlamydia testing services mobilised	Increased uptake of online HIV and chlamydia testing	✓	✓	√	✓	NCC, Public Health
infections (STIs) and HIV	Simplify chlamydia testing and treatment pathway	Successful treatment of positive tests	✓				NCC, Public Health

Theme: Increase access and reduce transmission	to, and uptake of, HIV and STI te	esting to tackle late diagnosis of HIV, er	nsure e	arly treati	ment of S	STIs, enab	le contact tracing
Increase the detection of STIs Increase the early	Newly commissioned sexual health (SH) services mobilised	Increased STI detection (excluding chlamydia age <25) Increased early detection of HIV	√			V	NCC, Public Health
detection of HIV Increase chlamydia testing and detection rates in young people (aged 15-24yrs)		Increase in chlamydia testing and detection in young people aged 15-25 yearsfrom x to 31%					
Theme: Ensure women are	e able to exercise choice about v	when to become pregnant, and reduce	unplan	ned pregi	nancies		
Reduce the number of pregnancies under the age of 18 and 16 years	Nottingham pupils attend schools that are committed to excellent sex and relationships education (SRE).	85 schools signed up to the SRE Charter.	✓				NCC, PSHE Advisory Team
	Direct work with young girls in the local community to increase knowledge and reduce unplanned pregnancies	30 CYPPN members receive training to help them work with young people in community settings. Delivery of one to one advice and support to young girls about sexual health	✓	V			NCVS and CYPPN
	The wider teenage pregnancy workforce is able to access and attend high quality training on teenage pregnancy and sexual health promotion.	NUH / Nottingham CityCare Partnership teenage pregnancy and sexual health training programme delivered to 250 members of the workforce.	✓				School Health Improvement Team
	Teenage parents in Nottingham are empowered to make informed decisions on subsequent pregnancies.	Teenage parents accessing the Family Nurse Partnership had fewer subsequent pregnancies than teenage parents who did not have a Family Nurse.	✓	✓	√	√	NCC, Strategic Commissioning

Theme: More people will h	ave a responsible attitude to ald	ohol consumption and there will be a r	eductio	n in the n	umber of	people m	nisusing alcohol
To reduce the number of adults drinking at higher risk levels and to reduce the number of adults binge drinking by introducing	Agree strategic approach to introducing alcohol IBA consistently in health and nonhealth settings.	Partners agree an approach that ensures consistent and systematic delivery of alcohol IBA	√				NCC, Public Health All Board member
systematic and consistent alcohol identification and brief advice (IBA) and by targeting students with effective health promotion messages.	Identify and secure additional resource required to ensure consistent delivery, including in key settings such as Emergency Department and Primary Care.	Resources requirements agreed and identified.	√				organisations
	Ensure that all relevant client facing staff groups are trained in delivery of alcohol IBA.	All staff are trained and ready to deliver alcohol IBA.	√	✓			
	Ensure that all relevant client facing staff are delivering alcohol IBA in a systematic and consistent manner.	Alcohol IBA being delivered systematically and consistently		√	√	√	
	Agree strategic approach to communicating messages around alcohol harm and misuse to students.	Methods of communicating messages are agreed with key partners.	✓				
	Ensure the agreed approach is delivered systematically by key partners.	Messages are delivered systematically and consistently.		√	✓	√	

Theme: More people will	recover from alcohol misuse						
To increase the number of people who are drinking at higher risk levels accessing and successfully completing	As described in Theme 1, ensure that all relevant client facing staff are delivering alcohol IBA in a systematic and consistent manner.	Alcohol IBA being delivered systematically and consistently		✓	√	V	NCC, Public Health All Board members
alcohol treatment.	Ensure that high volume service users with alcohol misuse issues are identified and supported into appropriate treatment.	Sustainable funding is identified to support a post in the ED setting.	√	√			
	Ensure access to high quality drug and alcohol services.	Aligned drug and alcohol service is fully mobilised with partners aware of referral routes into the service.	√				CDP, NCC, Public Health
	pe a victim of crime or antisocial	behaviour linked to alcohol misuse.					
Reduce levels of alcohol related violence and crime both in the city centre and neighbourhoods.	Ensure use of local insight and expertise to inform preventative approaches and delivery of a number of key activities	Activities continue to be supported and to be accessible for citizens.	√		•	✓	CDP, NCC, Public Health Nottinghamshire Police Community Protection Police and Crime Commissioner Nottinghamshire Healthcare NHS Foundation Trust
	Agree strategic approach to the role of alcohol licensing in minimising harms from alcohol.	Strategic approach agreed with key partners.	√				CDP, NCC, Public Health Community Protection Nottinghamshire Police

]	Approach taken forward and embedded.		✓	√	✓	Police and Crime Commissioner
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Thoma: Protect children for	om the harmful effects of smoki	ina					
Further develop specialist support for all pregnant smokers and their families	Smoking in pregnancy pathway that extends into early years established and routinely implemented.	Reduction in numbers of pregnant smokers Reduction in numbers of women smoking at six weeks post delivery	✓	√	✓	√	NCC, Environmental Health, Public Health, NUH, maternity, CityCare, New Leaf
Deliver a rolling programme of extending outdoor public spaces where citizens support them	Implementation plan for extending smokefree outdoor public spaces and events agreed	Increase in citizen support for extending smokefree outdoor spaces	√	√	√		NCC, Environmental Health, Sports Culture and Parks
	Ensure on-going citizen consultation to demonstrate citizen support for extending smokefree outdoor public spaces	Children and family events routinely promoted as smokefree	√	√	✓		Communication s
Theme: Motivate and assistant							•
Ensure health and social care and frontline colleagues employed by Health and Wellbeing Board member	Very brief advice training for relevant frontline and health and social care staff	Health and social care and frontline colleagues, including those employed by Health and Wellbeing Board member organisations, routinely trained in very brief advice.	√	✓	\	~	Board members
organisations are routinely referring patients and service users to the stop smoking service.	Very brief advice training incorporated as part of induction for frontline and health and social care staff	Increase in referrals to stop smoking services	✓	✓	✓	✓	

All Health and Wellbeing Board member organisations implement up to date and robust smokefree workplace policies	Policy promoted at all stages of recruitment and as part of colleague induction Staff, service users, patients, visitors and contractors routinely made aware of smokefree Policy	Reduction in sickness absence and increased workplace productivity High levels of compliance with smokefree workplace policies Increased awareness of smokefree workplace policies		✓ ✓	✓ ✓	✓	Board members
Theme: Leadership, innov	ration and development in tobac	co control		1	1		
Health and Wellbeing Board members to support a comprehensive partnership approach to the wider tobacco control agenda	All Health and Wellbeing Board members sign the Community Declaration on Tobacco Control	Partners demonstrate a shared understanding on effective measures to reduce tobacco related harm	√	√	√	√	Board members
Health and Wellbeing Board members support and embed Nottingham's tobacco control vision and	Actions mapped and linked to tobacco control strategy	Health and Wellbeing Board member organisations review and update tobacco control action plans which are shared with partners and communities	√	√	√	√	Board members
strategic priorities within organisational strategies and plans	Actions targeted at high risk smoking populations including routine and manual workers		✓	√	√	√	
	Monitor progress of plans and commitments and share results		√	√	✓	√	
Theme: Diet & Nutrition St	trategic Planning						
Develop a broad partnership for diet and nutrition across the Health	Diet and Nutrition working group formed POD Strategic group formed	Diet and Nutrition Partnership Strategic Plan in place POD Strategy published	✓ ✓				NCC, Public Health NCC, Public
and Wellbeing Board as part of a Physical Activity, Obesity and Diet (POD) Strategy	3 3 3 4 7 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	3, 1					Health

Theme: Diet & nutrition in		D-16					D
Develop local	Partners engaged	Partners have explored development of	✓	✓			Board members
programmes to support mothers to breastfeed for		breastfeeding policies for breastfeeding					
	Astion Diam developed	employees returning to work	✓	√			
as long as possible in line	Action Plan developed		•	•			
with the City and County							
Breastfeeding Framework	leave to the second of	Children's control are veing Healthy	√	√	√	✓	NOC Forth
Influence our early years	Improvement in the number of	Children's centres are using Healthy Children's Centre Standards	•	•	•	•	NCC, Early
settings such as schools,	children's centres using	Children's Centre Standards					Years
childcare and children's	Healthy Children's Centre						
centres to use the 'School	Standards						
Food Standards', the 'Eat							
Better Do Better' tool,							
Healthy Children's Centre							
Standards or equivalent	D :						NOO 01 1 1
Support our children to get	Review guidelines to inform	All key Early Years professionals are	✓	✓			NCC, Strategic
the best nutritional start in	commissioning and promotion						Commissioning
life	of Healthy Start	Uptake of Healthy Start and Healthy					
	Findings of review implemented	Start Vitamins has improved			✓	✓	
Create a positive	Training package developed	Training package for Early Years staff	✓	✓	✓	✓	CityCare
breastfeeding culture	and delivered	has been developed and delivered					
•	Referrals to Breastfeeding Peer	·	✓	✓	✓	✓	CityCare
	Support from staff who have						
	received training have						
	increased						
Theme: Diet & nutrition in	adults			•	•	•	<u>.</u>
Explore policy and other	Options explored	Options to increase healthy options in		✓			NCC
options for interventions to		fast food outlets have been explored					
reduce the impact of fast		?and considered by					
food outlets on health							
Reduce access to	Lead identified across Health	Access to unhealthy food has been	✓				NCC, Public
unhealthy food and	and Wellbeing Board members	reduced					Health
increase access to healthy	_						
food in workplaces and	Plans identified across Health	Plans agreed and implemented					All Board
public buildings	and Wellbeing Board members			✓	1		members

Theme: Diet & nutrition in	vulnerable groups						
Ensure all food provided and procured for citizens in our care helps create an environment which makes eating for health an easy option	Healthy eating (or eating for health) element written into contract variation for care establishments	Healthy eating (or eating for health) in care establishments has improved		✓			NCC, Strategy & Commissioning
Ensure our workforce is equipped to deliver brief interventions around diet and nutrition for specific vulnerable groups	Specific workforce identified Plans and resources identified Training implemented	Workforce is delivering brief interventions confidently	√	√	✓	✓	All Board members
Improve knowledge of diet and nutrition in minority ethnic groups	Complete and distribute findings of the BME Health Needs Assessment (HNA)	Options and need for intervention based on BME HNA findings has been explored	√				NCC, Public Health, Strategic Insight
	Options for interventions have been considered			✓			
Theme: Physical Activity							1
Develop a broad partnership for physical	Physical Activity working group formed	Physical Activity Partnership Strategic Plan in place	✓	√			NCC, Public Health
activity across the Health and Wellbeing Board as part of a Physical Activity, Obesity and Diet (POD) Strategy	POD Strategic group formed	POD Strategy published	√	✓			NCC, Public Health
Theme: Physical activity i	n children		·	u u			
Develop physical activity in commissioned children's services	Services which can include promoting physical activity are identified	Service specifications include promoting physical activity Physical activity is incorporated into the service model		✓	✓	√	NCC, Strategic Commissioning
Develop physical activity in children's centres and schools	Physical activity is a part of the Healthy Children's Centre Standard	Children's centres signed up to Healthy Children's Centre Standard	√	√	√	√	NCC, Early Years
	Sherriff's Challenge and Daily Mile are launched within schools	Schools are delivering these initiatives	√	√			NCC, School Sports.

Theme: Physical activity i	n adults						
Develop physical activity in the workplace and public spaces	VCS organisations are aware of how they can improve the physical activity of their employees and others who use their premises	VCS organisations are aware of and implementing activities	√	√	✓	V	NCVS (CYPPN and VAPN)
	Public Sector organisations are aware of how they can improve the health of their employees and others who use their premises	Public Sector organisations are aware of and implementing activities	√	√	✓	V	Board members
Increase the number of adults (14+) undertaking 1x30 minutes of sport and physical activity a week	Increase in the baseline of 86,300 in 2015	1% increase year on year, recorded through Active Lives	√	*	√	~	NCC Sport & Leisure
Develop pathways into broader physical activity	Service specification written	Function described in service specification	√				NCC, Public Health, Strategic
from commissioned weight management pathways	Service commissioned	Function operating in commissioned service		✓	✓	√	Insight
Theme: Physical activity i	n vulnerable groups		1	•	•	1	•
Ensure the workforce is	Specific workforce identified	Workforce delivering brief	✓				NCC, Public
equipped to deliver brief	Plans and resources identified	interventions confidently		✓			Health, Strategic
interventions around physical activity for specific vulnerable groups	Training implemented				√	√	Insight
Develop physical activity in care settings	Physical activity included in contracts with care providers	Improved level of physical activity in care settings		√	✓	✓	NCC, Strategy & Commissioning
Develop the use physical activity as part of a care	Pathways identified	Increase in pathways with physical activity specified		✓	✓	√	CityCare
pathways to improve care and treatment of long term	Physical modality identified	Increase in clients with physical		✓	✓	√	CCG NCC, Public
conditions and prevent falls	Physical activity included in pathways	activity included as part of their care		✓	✓	✓	Health, Strategic Insight
Increase the availability of disability specific sport and physical activity	Successful launch of the Get Out Get Active (GOGA) programme and the Disability	Success against GOGA and Insight Project action plans and outcomes	√	√	~		NCC Sport & Leisure

projects in the city	Sport Insight and Participation Project						
Work with the Community Voluntary Sector to ensure physical activity is promoted in community settings through community groups and organisations	CYPPN and VAPN members and their clients engaged in physical activity	Increased awareness raising of benefits of physical activity and events happening in 3 rd sector.	✓	√	✓		NCVS, CYPPN & VAPN, NCC Sport & Leisure
	Mechanism for engagement and delivery identified and developed		√	√	√	√	
Theme: Healthy Weight S	trategic Planning						
Develop a broad partnership for physical activity, diet and obesity across the Health and Wellbeing Board as part of a Physical Activity, Obesity and Diet (POD) Strategy	Physical Activity, Diet and Obesity/pathways working group formed	Physical Activity Partnership Strategic Plan in place	√	✓			NCC, Public Health
	POD Strategic group formed	POD Strategy published	√	√			NCC, Public Health
Theme: Healthy weight in	children			*	•	•	<u>.</u>
Improve skills and support given to children and families in early years settings.	Commissioning a health visitor service which includes brief intervention around healthy weight as part of service spec	Health visitors and early years practitioners able to signpost and deliver brief interventions around healthy weight	✓	√			NCC, Strategic Commissioning
	All partners ensure their workforce that comes into contact with early years know and understand the routes into the childhood obesity pathway		✓	√			Board members
Theme: Healthy weight in	adults						
Commission an effective weight management service and pathway for adults	Pathway developed	Pathway accessed by appropriate citizens in need of support Agreed weight management outcomes achieved	√	✓			CCG NCC, Public Health, Strategic Insight
	Service procured		√	√			
	Services(s) operational			√			
	Partners referring to service			✓	✓		

Theme: Healthy weight in	vulnerable groups						
Ensure our workforce is equipped to deliver brief	Specific workforce identified	Workforce delivering brief interventions confidently	√				NCC, Public Health, Strategic
intervention around healthy weight to	Plans and resources identified			✓			Insight
specified groups	Training implemented				√	✓	
Ensure groups at high risk of obesity can access	Priority groups set in service specifications as identified in EIA	Pathway accessed by appropriate citizens in need of support	√	√			CCG NCC, Public
the weight management	Service working with partners to		✓	✓			Health, Strategic
pathway	ensure accessibility from priority	Agreed weight management					Insight
	groups	outcomes achieved					