#### AREA TWO COMMITTEE (BASFORD AND BESTWOOD WARDS) - 27<sup>th</sup> May 2009

Title of paper:	Health Action Officer Draft Work Pla	n		
Director(s)/	Lianne Taylor	Wards affected:		
Corporate Director(s):	Acting Director of Local Communities   Bestwood & Basford			
Contact Officer(s) and	Claire Probert			
contact details:	Health Action Officer			
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Other officers who				
have provided input:				
Relevant Council Plan theme(s):				
Choose Nottingham X				
Respect for Nottingham	lespect for Nottingham X			

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## Summary of issues (including benefits to customers/service users):

The Health Action Officer is a joint funded post between Nottingham City Council & NHS Nottingham City. This report presents an overview of the Health Action Officers generic work plan and locality work plan to:

• tackle health inequalities

Supporting Nottingham People

Serving Nottingham Better

Transforming Nottingham's Neighbourhoods

- improve health outcomes
- Increase life expectancy
- Ensure that everyone has equal access to health provision in Area 2 (Bestwood & Basford)

The localised work plan has local actions for delivery.

# Recommendation(s): Area Committee note the draft generic & specific locality work plan of the Health Action Officer. (Appendix 1 & 2) Note the post is a shared post between Area 1 & 2 and therefore the Health Action Officer works 14.5 hours in each area. Note the Health Action Officer post is jointly funded between the Nottingham City Council & NHS Nottingham City and therefore work priorities are subject to change dependant on organisational needs.

#### 1 BACKGROUND

- 1.1 The Health Action Officers (HAO) job purpose is to lead, develop and initiate health & well being initiatives that deliver -
  - Local Area Agreement Healthier Communities and Older People (LAA HCOP),
  - One Nottingham's Health Floor Target Action Plan (FTAP)
  - Local Community health & well-being initiatives that tackle health inequalities
- 1.2 Much of the HAO role is delivered by partnership and joint themed working across internal and external service areas.
- 1.3 The HAO role is influenced by several local strategic documents including:
  - Local Area Agreement 2008/2011
  - Health & Wellbeing Strategy for Nottingham 2008-2011(Joint City Council & NHS)
  - Nottingham's Joint Strategic Needs Assessment (City Council & NHS)
  - Nottingham City Childhood Obesity Strategy 2008 (NHS)
  - A Physical Activity Sport Strategy 2008-2012 (Council document)
  - Crime & Drugs Partnership Plan Sexual Violence Action Delivery Plan 2008 / 09
  - Nottingham City Tobacco Control Strategy (City Council & NHS)
  - Nottingham Crime & Drugs Partnership Domestic Violence Strategy 2008-2011

#### 2 REASONS FOR RECOMMENDATIONS (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 An update on the draft generic & specific locality work plan for Area 2.
- 2.2 To achieve a shared understanding of the Health Action Officer role within Area 2.

#### 3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

3.1 No other option considered, update and information only.

#### 4 FINANCIAL IMPLICATIONS (INCLUDING VALUE FOR MONEY)

- 4.1 There are no direct financial implications or value for money issues arising for this report at this present time.
- 4.2 In delivering value for money for the council partnership working is fundamental to the role.
- 4.3 In the future there may be a potential cost to delivery of the action plan for specific projects which will need to be costed/resourced and funded via NHS/ Council partners.

# 5 RISK MANAGEMENT ISSUES (INCLUDING LEGAL IMPLICATIONS, CRIME AND DISORDER ACT IMPLICATIONS AND EQUALITY AND DIVERSITY IMPLICATIONS)

- 5.1 None arising from this report.
- 5.2 The Health Action Officer role aims to address issues of equality and diversity by targeting hard to reach communities and ensuring work is delivered in an inclusive manner respecting and involving the diverse communities living in the area. This will be achieved by respecting the 6 equality strands.

- Gender
- Age
- Race/ Ethnicity
- Faith
- Sexual orientation
- Disability

# 6 <u>LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE</u> DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

6.1 None

#### 7 PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

- 7.1 Local Area Agreement 2008/2011
- 7.2 Health & Wellbeing Strategy for Nottingham 2008-2011 (Joint City Council & NHS)
- 7.3 Nottingham's Joint Strategic Needs Assessment (City Council & NHS)
- 7.4 Nottingham City Childhood Obesity Strategy 2008 (NHS)
- 7.5 A Physical Activity Sport Strategy 2008-2012 (Council document)
- 7.6 Crime & Drugs Partnership Plan Sexual Violence Action Delivery Plan 2008 / 09
- 7.7 Nottingham Crime & Drugs Partnership Domestic Violence Strategy 2008-2011
- 7.8 Nottingham City Tobacco Control Strategy (City Council & NHS)

## Appendix 1 - HEALTH ACTION OFFICER GENERIC DRAFT WORKPLAN 2009/10

OBJECTIVE	ACTION	TIMESCALE	OUTPUTS	OUTCOME	NOTES
To lead and co- ordinate a health & wellbeing group/network appropriate to the	To deliver a shared Area vision & approach to community involvement & empowerment	Ongoing	Database of partners maintained  Regular meetings held	Enhanced partnership working to tackle health inequalities  Increased awareness of and	NB. This can be a virtual network  Area Managers to ensure they attend at least 2
Area	To communicate regularly with partners (including cross cutting)	Ongoing	Information disseminated  Area Community Empowerment Plan actions	support for HAO role	meetings of Health & Wellbeing Group per annum.
	To support health & wellbeing training for local workers & community representatives based on	Ongoing	delivered  No of people attending training		LLA Target - NI 4 = % of people who feel they can influence decisions in their locality
	To connect activity across	Ongoing	No of training sessions held		
	partners.  To identify & address gaps	Ongoing	6 monthly reports to Area Committee		
	in service		6 monthly reports to Health & Well Being Partnership via Communities for Health strand		
To provide 'added value' to the delivery of health related LAA targets	To ensure delivery of health related actions within the Local Area Agreement	Ongoing	Task & finish groups set up, as appropriate 6 monthly reports to Area Committee	Health inequalities addressed in accordance with strategic and local priorities	LAA Target – NI 121 – Mortality rate from all circulatory disease under the age 75
			6 monthly reports to Health & Well Being Partnership via Communities for Health strand		
To inform, consult & engage with the local community in relation to health &	To have a stall at events to ensure community engagement/involvement	Ongoing	Attend open events/ meetings & visit community venues	Local people inform future practice on health and access to services	Attendance at any events will require line managers (i.e. Area Managers) approval.
well being	To organise & attend Your Choice, Your Voice Events to promote health & wellbeing		Information distributed  Calendar of Area events	More people understand how to access services  Increased awareness of local need and ability to provide	Attendance at events should be assessed on the merits of each event – consider what added value HAO attendance will have.

		Arrange health events with partners  Ensure health information is available in community centres/ access centres/ health centres & leisure centres			appropriate response.	LAA Target N1 4 = % of people whop feel they can influence decisions in their locality
4.	To support the delivery of the health theme in Weeks of Action	Co-ordinate a planned programme of events to engage the community	As & when agreed with CDP and partners	Events take place during week of action	Enhanced partnership working around drugs & health develops increased capacity in local communities.	Mark Garner (CDP) should be supporting delivery of drugs element LAA Target N1 4 = % of people whop feel they can influence decisions in their locality
5.	To participate in regional and national initiatives	As agreed with HAO Steering Group	As & when required	Support events and initiatives as appropriate	Nottingham's profile for improving health and wellbeing and reducing health inequalities is increased	Sharing best practice from LAA health priorities in other cities
6.	To maintain an up to date health directory/ database for the Area	Regularly review, & update health directory.  Disseminate updates to partners as appropriate.  Provide links to local support referral pathways.	Ongoing	Health directory contains up to date and relevant contact information.  Information & advice provided  Links to Vulnerable Persons Panels are maintained	A clear and up-to-date knowledge of health provision in the Area  Enhanced partnership working to tackle health inequalities  More people understand how to access services	
7.	Thematic Lead Development:	To maintain an understanding and awareness of specific health themes.  Liaising with partners on cross cutting themes  Dissemination of key information and best practice to other HAO's & PCT partners	Ongoing	Attend agreed meetings on behalf of HAO's  Disseminate information to HAOs via feedback form	Information and best practice shared  Avoid duplication  Development of specialist health theme	Helen Bradley at NHS is lead for sexual health
8.	To support local community groups and partner agencies in developing health initiatives	Provide support, information and guidance to include for e.g. advice re funding opportunities and applications	Ongoing	No. of groups and partners supported	Improved capacity building within local community	

## Appendix 2 - Health Action Officer Specific Draft Work plan

	Topic Area	Local	Key Objectives	Key Partners	Local Action	
	•	Strategic Documents				
CVD	Physical Activity  Nutrition	LAA  Implement the Sport & Physical Activity Strategy (LA)  LAA	4.1 Reduce the risk of CVD  NI 121 Mortality rate from all circulatory disease under 75 NI 8 Adult participation in sport  % of adults participating in at least 30 minutes moderate intensity sport and PA on 3 or more days a week  % of 50-75 year olds in the most deprived wars participating in 30 mins of PA 3 times a week  Leisure facility usage across the city	NCC- Sport & Leisure Department  YMCA  Local Health trainers	Mapping exercise of resources and activities available locally in each ward to support local people to be more physically active and this information to be made available through local newsletters & events. (Leisure Centre/walking opportunities/dance& social clubs /community centres) Distributed through Bestwood Directions Newsletter & Ellis Guilford schools newsletter.  Encourage community groups to be more physically active and support those that wish to develop activities in community venues.  Encourage local people to become walk leaders through Bestwood Directions and Friends of Vernon Park  Work with the YMCA – the GP exercise referral project in encouraging people to become more physically active  Promote the healthy cook and eat	
	Nutrition			PCT – Nutrition team  Local Health Trainer	session in community venues such as Basford Community Centre and Bestwood Park Community Centre	
				Healthy Schools	Mapping Exercise of resources and activities available locally in each ward to support local people to eat healthy and this information to be made into a healthy eating leaflet.(Allotments/markets/cooking	

				sessions/venues with healthy options)
				Increase knowledge of healthy eating fo everyone in society young and old through targeted work with specific community groups
Smoking	LAA  Nottingham City Tobacco Control Strategy (Joint LA & City)	Smoking prevalence and 4-week quitters are (LAA) stretch targets (2006-09)  4-week quit target continues in the Local Operational Plan (LOP) (2009-11)	PCT- New leaf Team  Local Health Trainer	Mapping exercise with the healthy schools team to determine what and how much education is provided regarding smoking and tobacco issues in schools within the area  - To be completed by December 2009 and results shared with councillors to influence service delivery 2010/2011  Develop a smoking education competition to run across schools in Area 2 raising awareness of smoking and illegal tobacc product and the harmful effects to health through the Sure Start Children Centres  • Basford Children's Centre  • Southglade Children's Centre  • Bestwood Park/Top Valley Children's Centre  Support National No Smoking Day with activities in the local area (March 2010)  • Southglade Library  • Ellis Guilford Sports Centre  Work with the police to develop a cannabis awareness campaign aimed a specific hotspot areas. (If Appropriate)  Investigate in partnership with New Lear to into new clinics within Bestwood & Basford delivering to community need.

Childhood Obesity	LAA  Nottingham City Childhood Obesity Strategy (PCT)	3.2 – Tackle the rise in childhood obesity  NI56 – Obesity among primary age children in year 6  Halt the year on year rise of obesity and the  By 2020 reduced the proportion of overweight and obese children to the year 2000 levels	Extended schools partnership Go for it scheme Sure Start	Raise awareness of New leaf and invite to sites such as Co-op Beckhampton Road & David's Lane tram stop.  Provide brief intervention training to all local partners in order to raise awareness of smoking and tobacco use and signposting people into New Leaf  Promote New Leaf clinics at community access points and at Neighbourhood Management events  Research and investigate in partnership with New Leaf to into new clinics within the area  Target Gala Bingo to promote all aspects of reducing CVD health with the local health trainer – May 2009  Work with the children's centre to promote healthy eating  Basford Children's Centre Southglade Children's Centre Bestwood Park/Top Valley Children's Centre
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	school in the Bestwood & Basford area have a healthy lunchbox presentation to parents
	Work with schools locally to develop travel plans to encourage walking to school especially if the journey is under 1 mile specifically Southwalk School Basford
	Promote additional exercise though active play and the education improvement partnership -extended schools

Substance misuse – Support the local outreach drugs worker Teenage Pregnancy - Support the Priority action Team with the action plan to reduce teenage pregnancy