

Health and Care Scrutiny Committee

Report from the Director of Public Health

Outcome of the public consultation on sexual health remodelling

Between 1st August 2016 and the 23rd October 2016 a public consultation was run to gauge public support for the principles underlying the Sexual Health Service remodelling. The four principles the public were consulted on were: accessibility; care focused on those who need specialist input; prevention of poor sexual health; and use of technology to support online or self care.

Although sexual health can be a difficult subject for some people to engage with, the response to the public consultation was very good. 277 consultation responses were received, with excellent response rates from the key vulnerable groups. The responses showed very strong support for the principles, and also provided some very helpful insights into developing sexual health services in Gloucestershire:

- **Accessibility:** The principal factor for accessing the service was felt to be location; services should be local and avoid excessive travel. Key barriers to access were the ability to maintain anonymity and confidentiality.
- **Signposting:** There was a strong response regarding the need for sign-posting so that people were able to access the right service for them.
- **Vulnerable groups:** Services must understand the needs of vulnerable populations, and to provide services in a way which responded to them.
- **Prevention of poor sexual health outcomes:** There was very strong support for 'prevention rather than cure'. Many of the responses highlighted children and young people as the principle focus for prevention interventions.
- **Use of Technology:** People liked that online was more anonymous and confidential than traditional 'bricks and mortar' services. They also felt that it was generally quick, easy, and convenient, and a good way to improve access for younger people.

The outcomes from the public consultation will be used to inform remodelling of Sexual Health services in Gloucestershire. A paper will be taken to Cabinet in December to request permission to re-model the service.

Update on immunisation uptake

Vaccines are one of the most cost-effective ways to improve health and life-expectancy of a population. Across the range of national vaccination programmes, Gloucestershire is generally matching or surpassing national performance. Our local performance is monitored through the Gloucestershire Immunisation and Vaccine Preventable Diseases Coordination and Oversight Group. The group have highlighted the Measles, Mumps, and Rubella (MMR) programme as an area which requires attention to ensure that there is no sustained drop in performance. While the first dose of MMR is surpassing national performance, the second dose is slightly below our expectations locally. This is important because while the first dose confers up to 95% protection against these diseases, the second dose lifts this to over 99%. A multidisciplinary group has been set up to develop

plans to improve uptake of the second dose of MMR. The group is monitoring the full range of vaccination programmes, and developing a work plan to ensure improving performance.

Update on seasonal flu activity and staff vaccination campaign

Every year we see new strains of influenza circulate, normally reaching a peak during the winter months. This is a major cause of poor health and death in our population. It is also a cause of increased demand for health and social care support, as well as absence from work. Whilst the flu season has officially started, we are still seeing very few cases reported. This is likely to increase dramatically in the winter months, and so ensuring staff and vulnerable people are protected through vaccination is very important.

In GCC we have decided to focus efforts on vaccination for our frontline staff and those in business critical roles. The GCC Influenza Staff Vaccination programme for 2016/17 has three principle elements: staff locality based vaccination clinics; access to NHS vaccination clinics for GCC staff (run in Gloucestershire Care Services locations); and vaccinations available at all Badham Pharmacies. This programme has been supported by a communications programme to raise awareness of the benefits of vaccination and how to get vaccinated. After only one week, more than 100 people have already been vaccinated.

Award of new drug and alcohol treatment contract

Following a competitive tender process, the contract to deliver Gloucestershire's drug and alcohol recovery service has been awarded to change, grow, live (CGL), one of the largest national providers of drug and alcohol services. The new service commences on 1st January 2017 and the Public Health team is working closely with CGL and the incumbent provider, Turning Point, to ensure that the transition of staff and service users is as smooth as possible, based on the extensive experience of both providers in transferring services.

As agreed by Cabinet in April 2016, this is a 5 year and 3 month contract with the option to extend for a further 2 years, providing an opportunity for longer term stability in the service. The new service will focus on:

- The opportunity for sustained recovery for all
- Increased support for parents who use drugs and alcohol
- Increased support for people who misuse alcohol
- A more flexible delivery model that sees the service getting out and about in Gloucestershire communities
- Ways to manage demand for formal treatment.

The contract will be managed by the Public Health Commissioning team, with adjusted performance measures and targets set out in the service specification. These will be reflected in the regular performance reports that are brought to HOSC from April 2017, with an expectation of continued improvement once the new service has been established and has bedded in.

Update on Remodelling Public Health Nursing

Public Health are working with the current provider, Gloucestershire Care Services NHS Trust to re-model Public Health Nursing services. Gloucestershire County Council has

been responsible for commissioning the School Nursing element of the service since Public Health transition on March 2013. Responsibility for the commissioning of the remaining element, Health Visiting transferred from NHS England in October 2015. This has provided an opportunity to remodel the service to improve the experience for service users and maximise effectiveness and efficiency and continue to deliver the Healthy Child Programme and the five mandated Health Visiting contacts.

The proposal will be presented to Cabinet on 14th December 2016 and will request approval to remodel the service in line with a preferred model and to consult or engage with service users following the national review of the five mandated contacts – results are expected before the end of December.

The model would bring together a 0 to 19 Public Health Nursing service, targeting the knowledge, skills and capacity of the workforce to enable them to address distinct needs across three age groups to provide a focus for early years, primary school age and adolescent health while supporting transition to secondary school. Roles with a specialist functions, including Children in Care, Safeguarding and substance misuse will remain.

Healthy lifestyle contract award - October 2016

Healthy lifestyles services help prevent and manage unhealthy lifestyle behaviours: smoking, physical inactivity, excess alcohol consumption, and poor diet. These behaviours are linked to overweight and obesity as well as health conditions like type 2 diabetes and smoking-related bronchitis.

To date we have commissioned a number of separate service to provide this support including:

- Stop smoking service
- Community health trainer service
- Health improvement delivery team and oral health promotion
- Training in health behaviour change
- Community weight management on referral
- Health promotion resources – enabling function.

Individuals often have more than one unhealthy lifestyle behaviour – particularly those from some of our most vulnerable groups – and the current service offer means people have to go to different services to access the support they need.

Following a review of how we provide information and support to encourage healthy lifestyles we developed an integrated service model. As part of the review we also identified the need and opportunity to provide better support for people to self-care i.e. to make successful lifestyle changes without accessing a service – or with very light touch support – and there are lots of digital tools that can help people to do this – and to connect with others who can support them. .

Finally we wanted to introduce a more systematic approach to prevent people from taking up unhealthy lifestyles in the first place, particularly among those groups of the population at greatest risk – thereby strengthening the prevention element of our offer.

Following a competitive tender process, the new provider who will offer this support from January 2017 is ICE Creates. ICE Creates is a Wirral based organisation, which specialises in behaviour change and has a strong track record of supporting people to adopt healthier lifestyles. As with the drug and alcohol contract Cabinet agreed to award a five year and three month contract with the option to extend for a further two years. Contract performance will be reported alongside other public health performance data from April 2017.

The new service includes:

1. Self-Care Information and Support

A new 'digital offer' will be launched during 2017. This will be available to everyone and will include online information, motivational tools and activities to support a range of healthy lifestyles and emotional wellbeing as well as information on what help is available in local communities.

2. Coaching support to make a lifestyle change

Individuals with the greatest health needs, and those who are unable to benefit from self-care resources alone will be able to access support to make a lifestyle change from the new service e.g. telephone or face to face support from a lifestyles coach. This might include referral to a community based weight management group for support to lose weight (for people that meet local eligibility criteria)

3. Targeted prevention programmes

In addition to helping people to change established unhealthy lifestyles, the service will deliver targeted interventions to discourage people from taking up an unhealthy lifestyle in the first place. These will include:

- An intervention to discourage adolescents from taking up smoking
- A lifestyles programme for pregnant women and the first year of life (targeting those with greatest needs).

4. 'Healthy settings' facilitation

For example, supporting workplaces to make it easier for people to make healthy choices while at work.

5. Training in health behaviour change

Training will be available to equip frontline staff and volunteers with the skills and confidence to support people to adopt healthy lifestyles. This means that people will be able to some initial help from someone they already know, in a place where they already go.