

Public Health Portsmouth Business Plan 2017/18

Working for a healthier city

Public health promotes and protects population health and well-being.

The Portsmouth City Council Public Health Team aim to prevent ill-health and prolong life, through a coordinated effort with partners both inside and outside the council.

Public Health Portsmouth will do this by:

- Improving health for the poorest fastest.
- Increasing healthy life expectancy
- Reducing demand for services and improve quality of care.

Guiding Principles

- Population and systems focused
- Providing value for money through evidence informed practice, effective use of population data and evaluation
- Developing public health expertise for public health workforce and beyond, including through using Making Every Contact Count
- Promoting self-efficacy towards independence to improve health and wellbeing
- Parity of esteem between mental and physical health
- Embed a Health in All Policies approach

Key priorities for 2017/18

1. [Reduce smoking and tobacco use towards the national average from current baseline](#)
2. [Improve physical activity rates from current baseline with a focus on walking and cycling](#)
3. [Mitigate against the health effects of child poverty](#) - a healthy city is a wealthy city
4. [Reduce self-harm and suicide from current baseline](#)
5. [Reduce rates of drug-related deaths from current baseline](#)
6. [Reduce unwanted pregnancy from current baseline](#)
7. System priority: [Reduce health and social care need in later life](#)
8. System priority: [Reduce the impact of the 'toxic trio'](#)

Mandated Services

In addition, we will maintain our responsibility toward delivering the mandated services funded through the Public Health grant:

- Appropriate access to Sexual Health services
- Ensuring plans are in place to protect the health of Portsmouth residents (including immunisation and screening plans)
- Ensuring CCG receives the public health advice they need to support the commissioning of services (Core Offer)
- National Child Measurement Programme
- NHS Health Check assessment
- Ensuring the mandated responsibilities of Children's 0-19
- Commissioning of Local Healthwatch

Corporate priorities

To ensure our service contributes to Portsmouth City Council [corporate priorities](#) we will strive to deliver value for money by:

- Being entrepreneurial and efficient
- Raising education standards
- Encouraging regeneration and investment
- Empowering residents to be healthy and independent
- Providing excellent customer service

Public Health England priorities

The Public Health Outcomes Framework (PHOF) *Healthy Lives, Healthy People: improving outcomes and supporting transparency* sets out a vision for public health, desired outcomes and indicators to assist with monitoring the health of the population. We have aligned our key performance indicators to this framework. This plan supports the [Public Health England Annual Business Plan 2017/18](#) to educate, inform and secure behavioural change through campaigns.

Public Health England have identified only 6 preventative interventions that have been implemented, proven to be effective and are estimated to improve health and wellbeing and save money to the health and/or care system within a five-year horizon:

- Alcohol – identification and brief advice (IBA) in primary care
- Alcohol – alcohol care teams (ACT) in secondary care
- Tobacco – screening, advice and referral in secondary care
- Hypertension – improved management of hypertension in primary care
- Contraception – increase uptake of long-acting reversible contraceptives (LARC) in general practice, maternity and abortion pathways
- Falls – implement a fracture liaison service (FLS) in secondary care

We have incorporated a number of these into our plan. Other objectives (improved management of hypertension, fracture liaison service) are being led by others with our support.

NHS England

Public health functions to be exercised by NHS England are known as 'section 7 services' and broadly comprise screening and immunisation programmes, child health information services, public health services for adults and children in secure & detained settings in England and sexual assault referral centres.

Business Plan 2017/8

<p>1. Reduce smoking and tobacco use towards the national average from current baseline</p>	
<p>Actions: On-going / core business (engagement and progress to be monitored)</p> <ul style="list-style-type: none"> • Continue to work with Trading Standards to limit the trade of illicit tobacco • Delivery of smoking cessation through Locally Commissioned Services (LCS) and the wellbeing service • Continue work with maternity services and within secondary care, promoting screening, brief advice and referral • Support inclusion of stop smoking support in the 0-19 programme and through supporting a whole-school smokefree policy 	
<p>Actions: New initiatives / transformational</p> <ul style="list-style-type: none"> • Continue with Vanguard process for the wellbeing service • Explore smokefree children's playgrounds • Develop smoking cessation policies in the workplace for use internally and externally to Portsmouth City Council • Support the Sustainability and Transformation Plan aims of 'Stop before the Op' 	<p>Key progress indicators</p> <ul style="list-style-type: none"> • By end December 2017: Redesign wellbeing service for implementation • By end June 2017: Present and gain agreement on a Tobacco Control action plan for QA Hospital which will include Stop Before the Op objectives and commitment to a smokefree site • By end September 2017: Set up a community taskforce group in a defined area of Portsmouth to work towards a voluntary smoking ban in children's playgrounds in that area • By end September 2017: Review stop smoking medication guidance used in LCS and wellbeing service • By end December 2017: Develop a workplace stop smoking and e-cigarette policy, in conjunction with Human Resources, for Portsmouth City Council • By end March 2018: Develop a policy statement on electronic cigarettes for Portsmouth • Stop before the Op implementation will be monitored through STP milestones

Guiding indicators from the Public Health Outcomes Framework

- Performance against national / international tobacco control guidelines
- Smoking Prevalence in adults - current smokers
- Smoking Prevalence in adults in routine and manual occupations - current smokers
- Smoking prevalence at age 15
- Smoking status at time of delivery
- Low birth weight of term babies

2. Improve physical activity rates from current baseline with a focus on walking and cycling	
Actions: On-going / core business (engagement and progress to be monitored)	
<ul style="list-style-type: none"> • Provide public health evidence and support to the Local Transport Plan and Local City Plan • Support the implementation of the local Air Quality strategy 	
Actions: New initiatives / transformational	Key progress indicators
<ul style="list-style-type: none"> • Support for the PSHE/Healthy schools programme including implementing the Daily Mile • Strengthen partnerships to promote physical activity in a range of population groups in the community AND Support clinical partners to increase physical activity in people with long term conditions • Promote physical activity in the workplace with a focus on Portsmouth City Council • Explore how Healthy Streets could be implemented in Portsmouth 	<ul style="list-style-type: none"> • By end June 2017 (or as meeting dates dictate): Present at the Portsmouth Head Teachers Forum to promote the Daily Mile in primary schools • For each quarter of 2017/18: Increase the number of primary schools who take part in the Daily Mile • By end June 2017 and to continue meeting each quarter (unless determined otherwise by the Alliance): Hold the first meeting of the 'Active Portsmouth Alliance' • By end June 2017: Develop a proposal with Pompey in the Community to support people maintaining physical activity at key transitions. Specifically for women with young children (or specific clinical areas such as pulmonary rehab, stroke rehab, cardiac rehab) • By end September 2017: Develop a proposal to create sustainable access to affordable bikes for active travel across Portsmouth • By end September 2017: Develop a workplace policy on physical activity, in conjunction with Human Resources, for Portsmouth City Council • By end September 2017: Host a Healthy Streets seminar

<ul style="list-style-type: none"> • Develop briefings, training and guidance for developers and planning on health impacts of the built environment 	<ul style="list-style-type: none"> • By end December 2017: Present an action plan to implement a Healthy Streets approach for Portsmouth to the Health and Wellbeing Board • By end September 2017: Use JSNA to develop a series of lay briefings to develop a common understanding of the links with health and wellbeing for PCC departments to influence the built environment e.g. 'transport and health' and 'housing and health' • By end March 2018: Present Portsmouth Health and Wellbeing Planning Guidance to the Health and Wellbeing Board
<p>Guiding indicators from the Public Health Outcomes Framework</p> <ul style="list-style-type: none"> • Percentage of physically active and inactive adults • Excess weight in adults • Utilisation of outdoor space for exercise/health reasons • Percentage of the population exposed to road, rail and air transport noise • Children overweight and obese in Year R • Children overweight and obese in Year 6 • Killed and seriously injured on roads 	

3. Mitigate against the ill-health effects of child poverty from current baseline	
Actions: On-going / core business (engagement and progress to be monitored)	
<ul style="list-style-type: none"> • Membership of and provide and public health advice to the Portsmouth Poverty Taskforce • Delivery of 0-19 services and monitoring health outcomes against Memorandum of Understanding with Children's Services • Promotion of restorative practices in the 0-19 agenda • Continuation of support to the infant feeding action plan 	
Actions: New initiatives / transformational	Key progress indicators
<ul style="list-style-type: none"> • Set out the vision for a preventative approach to the health needs of people with learning disabilities • Build emotionally resilient communities/workforce: encouraging improved understanding & positive actions on mental health e.g. through 'Time to Change' • Support the housing department to promote health and wellbeing in local housing • Undertake child poverty needs assessment as per national guidance • Undertake joint oral epidemiology survey with Southampton 	<ul style="list-style-type: none"> • By end September 2017: Report strategy for prevention of learning disabilities to the public health senior management team • By end September 2017: Develop a workplace health policy, in conjunction with Human Resources, for parents / guardians which includes a focus on promoting mental wellbeing and resilience in Portsmouth City Council • By end December 2017: Develop a plan to be reported to public health senior management team to protect children and families from hazards, injuries and unexpected accidents in the home • By end March 2018: Report child poverty needs assessment to public health senior management team • By end March 2018: Report oral epidemiology survey findings to the public health senior management team

Guiding indicators from the Public Health Outcomes Framework

- Breastfeeding initiation
- Breastfeeding prevalence at 6-8 weeks after birth
- Proportion of five year old children free from dental decay
- School readiness
- Pupil absence
- Family homelessness
- Children in low-income families
- Fuel poverty
- 16-18 year olds not in employment, education or training
- Gap in employment rate between those with a long-term health condition/learning disability/ in contact with secondary mental health services and the overall employment rate
- Percentage of people aged 16-64 in employment
- Slope index of inequality in healthy life expectancy based within local authorities, based on deprivation within Middle Super Output Areas (Male)
- Slope index of inequality in healthy life expectancy based within local authorities, based on deprivation within Middle Super Output Areas (Female)
- Slope index of inequality in life expectancy at birth within English local authorities, based on local deprivation deciles within each area (Female)
- Slope index of inequality in life expectancy at birth within English local authorities, based on local deprivation deciles within each area (Male)

4. Reduce self-harm and suicide from current baseline	
Actions: On-going / core business (engagement and progress to be monitored)	
<ul style="list-style-type: none"> Address bullying and self-esteem, Child Sexual Exploitation reduction and of awareness of self-harm in the PSHE/Healthy schools programme and through supporting a whole-school mental health and well-being approach 	
Actions: New initiatives / transformational	Key progress indicators
<ul style="list-style-type: none"> Implement findings of self-harm needs assessment Deliver local actions for suicide prevention as set out in national guidance which will include taking forward recommendations from Portsmouth suicide audit 	<ul style="list-style-type: none"> By end June 2017: Present self-harm needs assessment to public health senior management team By end June 2017: Formulate action plan to implement recommendations of self-harm needs assessment, as appropriate By end June 2017: Establish Suicide Prevention Action Group By end September 2017: Present suicide prevention strategy and multi-agency action plan to the Health and Wellbeing Board By end December 2017: Set up task and finish groups to implement suicide prevention multi-agency action plan
Guiding indicators from the Public Health Outcomes Framework	
<ul style="list-style-type: none"> Emergency hospital admissions for intentional self-harm Suicide rate Self-reported wellbeing 	

5. Reduce rates of drug related deaths from current baseline	
Actions: On-going / core business (engagement and progress to be monitored)	
<ul style="list-style-type: none"> • Ensure full implementation of the drug and alcohol treatment service, using active contract management to improve cost effectiveness and good outcomes • Support inclusion of awareness of drug related harms in the PSHE/Healthy schools programme 	
Actions: New initiatives / transformational	Key progress indicators
<ul style="list-style-type: none"> • Develop a multi-agency action plan to address the rising number of drug related deaths, including a protocol for learning lessons from drug related deaths and the provision of Naloxone. • Engage and work with the CCG to develop primary healthcare for homeless and vulnerable groups 	<ul style="list-style-type: none"> • By end June 2017: Convene a multi-agency workshop to determine high impact local actions across primary and secondary care, drug services and Portsmouth City Council to reduce drug related deaths • By end September 2017: Present multi-agency action plan on preventing drug related deaths to the Health and Wellbeing Board • By the end of December 2017: Form group and hold first biannual meeting of a drug related death monitoring group with the first meeting to be held • By end December 2017: Confirm a Portsmouth commitment to provision of primary healthcare care to people who are homeless
Guiding indicators from the Public Health Outcomes Framework	
<ul style="list-style-type: none"> • Deaths from drug misuse • Successful completion of drug and alcohol treatment • Number of adults with substance misuse treatment needs successfully engaged with services 	

6. Reduce unwanted pregnancy from current baseline	
Actions: On-going / core business (engagement and progress to be monitored)	
<ul style="list-style-type: none"> • Increase the uptake of long-acting reversible contraceptives (LARC) in general practice, maternity and terminations of pregnancy pathways through on-going promotion • Maintain the sexual health contract with Solent, ensuring relevant Public Health outcomes are met • Support inclusion of awareness of unwanted pregnancy in the PSHE/Healthy schools programme 	
Actions: New initiatives / transformational	Key progress indicators
<ul style="list-style-type: none"> • Implement findings of terminations of pregnancy (TOPs) needs assessment • Apply behavioural insights approach to improve the early diagnosis of HIV and LARC uptake • Use the 2018 Pharmaceutical Needs Assessment (PNA) to understand whether Emergency Hormonal Contraceptive (EHC) provision meets population needs in the City 	<ul style="list-style-type: none"> • By end September 2017: Present findings of the terminations of pregnancy needs assessment and action plan of recommendations to the public health senior management team • By end September 2017: Send letter to GP practices reporting findings of practice level analysis of HIV testing rate applying a behavioural insights approach • By end December 2017: Send letter to GP practices reporting findings of practice level analysis of LARC uptake applying a behavioural insights approach • By end March 2018: Publish the 2018 Pharmaceutical Needs Assessment (PNA) for Portsmouth which will include an assessment of gaps in provision of EHC by end March 2018
Guiding indicators from the Public Health Outcomes Framework	
<ul style="list-style-type: none"> • Under 18s conception rate • Under 18s termination of pregnancy rate • Increase in LARC • Reduction in terminations of pregnancy 	

Broader policy and system transformation

A number of issues are complex, cross-cutting and action requires engagement from multiple partners. This section aims to address these areas.

<p>7. Reduce health and social care need in later life</p>	
<p>Actions: On-going / core business (engagement and progress to be monitored)</p> <ul style="list-style-type: none"> • Improve co-ordination of volunteer and third sector input throughout PCC; working with the Directorate of Community and Communication, Independence and Wellbeing Team - Adult Social Care; and the CCG • Improve population vaccination coverage (seasonal influenza, shingles) <i>(to work with NHSE/PHE)</i> 	
<p>Actions: New initiatives / transformational</p> <ul style="list-style-type: none"> • Developing partnership working opportunities to prevent social isolation, falls prevention and fuel poverty • Assistive technology: Working in collaboration with the Integrated Commissioning Unit, to explore the evidence base for technologies to increase independence and wellbeing in people who require support. 	<p>Key progress indicators</p> <ul style="list-style-type: none"> • By end June 2017: Establish partnership and identify opportunities for public health input to Safe and Well visits • By end September 2017: Implement MECC training for Safe and Well <i>(with the Independence and Wellbeing Team, Adult Social Care)</i> • By end June 2017: Evidence review of assistive technology <i>(with the Integrated Commissioning Service)</i>
<p>Guiding indicators from the Public Health Outcomes Framework</p> <ul style="list-style-type: none"> • Injuries due to falls • Social isolation • Fuel poverty • Population vaccination coverage - shingles • Population vaccination coverage - seasonal influenza 	

8. Reduce the impact of the 'toxic trio'

Actions: On-going / core business (engagement and progress to be monitored)

- Promote Alcohol Identification and Brief Advice (IBA) in secondary care: e.g. using Vitalpac at QA
- Promote alcohol IBA in primary care: Increase referral from GP surgeries through Alcohol Awareness training to staff; IBA training to pharmacies and other professionals
- Implement improved and more integrated supported housing for drug and alcohol users, work with The Society of St James and Portsmouth City Council partners to expand accommodation (housing and day service), providing an increased number of supported housing and move-on bed spaces
- Partnership working with Portsmouth City Council Licensing Department, Trading Standards and the Police's Licensing and Violent Crime Team
- Fully engage with and support the Safe Portsmouth Partnership multi-agency complex cases priority work, developing a multi-sectoral approach to meeting their needs
- Work closely with the domestic abuse lead and the Safer Portsmouth Partnership to support the domestic abuse agenda, especially where it interplays with substance misuse by providing public health input to domestic abuse strategy group
- Ensure domestic abuse screening takes place within substance misuse services and appropriate support and onward referral is provided

Actions: New initiatives / transformational

- Facilitate consideration of harms related to health from alcohol into licensing policy and allow provision for mitigating strategies
- Review Cumulative Impact Policy data to support the Safer Portsmouth Partnership to make informed decisions

Key progress indicators

- By end June 2017:
Submit consultation response on the statement of alcohol licensing policy
- By end September 2017:
Help the licensing committee and others involved in licensing to recognise the health and wellbeing benefits of reducing access to alcohol (especially high strength, low cost), cigarettes and drugs through delivery of development sessions
- By end December 2017:
Develop shared objectives and projects to improve alcohol retailing in the city

- Work with emergency service partners to increase quality of data related alcohol related responses

- By end December 2017:
Work with the South Central Ambulance Service and police to improve quality of data collection regarding alcohol related crime and safety issues

Guiding indicators from the Public Health Outcomes Framework

- Admission episodes for alcohol related conditions
- Successful completion of alcohol treatment
- Domestic abuse (not currently RAG rated)

Support for the health and social care system

Sustainability and Transformation Plans

Sustainability and Transformation Plans were set up to support implementation of the NHS Five Year Forward View. They are joint plans supported by the six national health and care bodies: NHS England, NHS Improvement, the Care Quality Commission (CQC), Health Education England (HEE), Public Health England (PHE) and the National Institute for Health and Care Excellence (NICE).

The Hampshire and Isle of Wight plan aims: 'to agree how best to meet the many opportunities and challenges facing the local health and care system around the need to empower people to stay well and to provide safe, high quality, consistent and affordable health and care to everyone'.

The Hampshire and Isle of Wight plan has a number of priorities, many of which clearly align to PCC priorities:

- “Stop before the op” and focused Stop smoking services
- Changing behaviour using advice and information
- Cancer – improved screening uptake
- Digital entry for lifestyle services
- Sexual health – digital self-service
- Focused Stop smoking services

Quality Innovation, Productivity and Prevention (QIPP) Savings

QIPP is a transformation initiative introduced to the NHS by the Department of Health in 2010 in order to make efficiency savings for reinvestment in frontline care. Some of them align with STP* and Public Health Portsmouth** objectives:

QIPP programmes for Portsmouth include:

- Living Well project**
- Every Contact Counts**
- National Diabetes Prevention Programme (NDPP)*
- Portsmouth Diabetes Service retender
- Increased proactive interventions for smokers**
- E-Referrals pathways*
- Telephone notification of results
- Living with and Beyond Cancer Pathway
- Straight to test pathways
- Tier 3 obesity services
- HIV screening**

Falls prevention (Living Well)

Independence and Wellbeing Team (Adult Social Care, funded through the Redistribution Fund) is running several falls and physical activity projects including:

- Community falls prevention exercise classes
- Information and signposting on physical activity opportunities across the city

End of Life Care

6 Steps Programme Pilot: Run by Rowans and commissioned by the Integrated Commissioning Service (ICS). Rowans support 14 homes over a 12 month period with 3 days a week support (education practitioner (nurse) from Rowans for:

- Difficult conversations and advanced care planning (Independence and Wellbeing Team)
- Confidence building around EOL care in the homes to reduce inappropriate conveyances.

Children 0-19 years

Children's Services, Portsmouth City Council delivers the 0-19 Integrated Early Help & Prevention service under a Memorandum of Understanding with public health.