# HOSP – Delivering the Public Health Business Plan 2023/24

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**Public Health** 

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## Public Health Business Plan 2023/24: Priorities

### There are 7 priorities for Public Health for 2023/24:

- Reduce the harm caused by substance misuse including alcohol misuse
- Reduce the prevalence of smoking, including smoking in pregnancy, across the city working with partners to ensure sustained system wide action
- Reduce unwanted pregnancies by increasing access to Long-Acting Reversible Contraception (LARC) in general practice, maternity and abortion pathways, and strengthening LARC pathways with vulnerable groups
- Promote positive mental wellbeing across Portsmouth and reduce suicide and self-harm in the city by delivering the actions within Portsmouth's Suicide Prevention Plan (2022-25) and the ICB Suicide Prevention partnership programme.
- Promote healthy weight, reducing the harms from physical inactivity and poor diet.
- Work with Council partners to address the health impacts of the built and natural environment.
- Enable an intelligence-led approach to addressing key health and care priorities for the city

Service	Provider/s	Contract terms	Update
Locally commissioned services (smoking cessation, alcohol awareness, supervised consumption, needle exchange, emergency hormonal contraception, Long Acting Reversible Contraception, NHS Health Checks)	GP practices and community pharmacy	Term: rolling year on year	These services have been recommissioned from 1 <sup>st</sup> April 2021. These services are paid for by activity on patient led basis, however NHS Health Checks is invitation only and is a local authority mandated service. Long Acting Reversable Contraception review will take place across Hampshire, Isle of Wight, Portsmouth and Southampton to explore opportunities for alignment.
Integrated Drug and Alcohol treatment and support service. Including: assessment and case management, medical interventions, psychological and social support interventions, specialist substance misuse housing support	Society of St James (SSJ)	Commenced 1 <sup>st</sup> June 2022 initially until 31 <sup>st</sup> March 2026, but flexibility to extend up to 31 <sup>st</sup> March 2032.	This service has recently been re-commissioned. The new contract was awarded to the incumbent lead provider, SSJ. SSJ are working in partnership with an NHS provider called Inclusion, who provide drug and alcohol services across the country. Additional elements within the new contract include: expanded opening hours to 7 days per week, expand women only provision, expanded support for carers/families, provide some alcohol only provision and deliver abstinence based supported housing.
Sexual Health (contraception, testing and treating sexually transmitted infections, HIV prevention and testing, sexual health promotion, Psychosexual Counselling, Networks and training)	Solent NHS Trust	Current contract extended to end of March 2024. Recommissioning processes has initiated.	Includes mandated services. This joint contract with commissioners across Hampshire, Portsmouth, Southampton and Isle of Wight Local Authorities and ICB offers face to face and remote provision, including home self-sampling STI/HIV testing, treatments and condoms by post where appropriate. The clinical front door has been introduced using the Systems Thinking approach. NHS England has introduced opportunistic cervical screening within the service.
Health Visiting & School Nursing and National Childhood Measurement Programme (in conjunction with Children's and Families Directorate)	Solent NHS Trust	Section 75 agreement - ongoing	Solent NHS Trust are commissioned by Children's Services to deliver Health Visiting and School Nursing
Healthwatch	The Advocacy People	Term; 4 years with options to extend up to 7 years	Mandated service - and new contract which commenced April 2021 with The Advocacy People

# Joint Working – Portsmouth through HCP

- Aligning commissioned functions where appropriate with ICB Portsmouth and PCC Adults/Children's through Health and Care Portsmouth S75s
  - Aligned funding on programme areas
  - Main benefits from PH services perspective to improve outcomes for residents
    - Better join up of sexual health commissioning (remove false barriers between funding / provision)
    - Opportunity to improve join between mental health and substance misuse services
    - Strong links with the Inclusion Healthcare Team
    - Link into primary care commissioning functions
    - Collabortion in Local Care planning creating shared vision e.g. cardiovascular disease prevention with application of Population Health Management
- Strengthened Intelligence links including:
  - Supporting intelligence-led Population Health Management approaches across Health and Care Portsmouth (H&CP) 'Place'
  - Providing maps and analysis e.g. using SHAPE to support H&CP planning and decision-making
  - Engaging ICB Portsmouth in joint approaches to key city challenges through the HWB priorities, Knowledge Network, and ongoing surveillance work around Covid-19 and other viruses etc

# Public Health Intelligence

In the last six months, we have produced and published the following key outputs:

#### Public Health Annual Report: Poverty and the Cost of Living

- Statutory report from the Director of Public Health which this year provides an updated needs assessment to support the work
  of the HWB around its priority on Poverty and recommendations for action
- Includes data on the impact of the Cost of Living crisis in Portsmouth that is available at <u>Poverty and cost of living JSNA report Portsmouth</u> <u>City Council</u>

#### Joint Strategic Needs Assessment: <u>Demography</u>

• Key data on demographics of Portsmouth, including detailed analysis of equalities strands based on the ONS 2021 Census

#### ➢ Joint Strategic Needs Assessment: <u>Children and Young People</u>

• Key data on children's health, social care and education in Portsmouth

# Strategic Assessment of Crime, Anti-social Behaviour, Re-offending and Substance Misuse: Update for 2022/23

Annual update on crime trends, identifies any emerging issues, and reviews the community safety priorities

In addition, we have been awarded five years of funding from January 2025 for the National Institute for Health Research (NIHR) Health Determinants Research Collaboration (HDRC) Portsmouth. 'HDRC Portsmouth' is a collaboration with the University of Portsmouth and HIVE Portsmouth. It will enable more research which aims to tackle health inequalities and improve health outcomes for residents. Portsmouth will be one of 30 local authorities nationally taking forward this initiative.

# Portsmouth Wellbeing Service Q1-Q2 23/24

#### Overview:

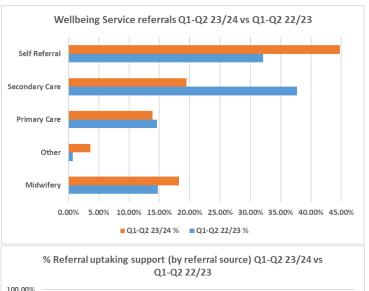
- Wellbeing Service screen all clients for Smoking status, BMI (weight and height), physical activity levels, alcohol consumption as well as using the Edinburgh Warwick scale to support with mental wellbeing.
- Recent expression of interest to bid for e-cigarette kits as part of the Swap to Stop government initiate. This will enhance our e-cig treatment offer.
- Working in partnership with Health and Care Portsmouth colleagues with the new launch of the Weight Management Hub pilot.

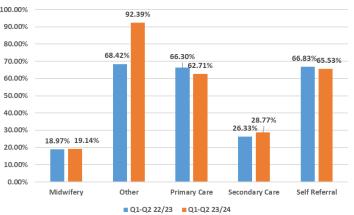
#### **Referrals:**

- Overall (n.2,548) up 2% compared to Q1-Q2 22/23 Midwifery referrals had increased by 26%, Self-Referral increased by 42%. Secondary Care referrals had dropped by 47%.
- Contributing factors in reduction in Secondary Care referrals, 71% (n.94) drop in Targeted Lung Health Check referrals compared to last Q1/Q2 (n. 319) and multiple other QA departments decrease in referrals.
- 69 referrals were received via unemployment advisor funded pathway which increased 'Other referrals'.

#### Support Provided:

- Number of clients setting a Quit Date for smoking has decreased 15% (n.524) compared to previous Q1-Q2 financial period (n.618). However, 54% successfully quit at 4-weeks (n.282) compared to 46% (n.283) in the previous Q1-Q2 period.
- Referrals from TLHC, 42% (n.42) had accepted support, 71% (n.30) set a quit date and 73% (n.22) had successfully quit at 4 weeks.
- 172 new clients engaged in the three healthy weight group cohorts (5 venues) and 88 clients received 1-1 support for healthy weight compared to 97 last Q1/Q2 likely drop due to more groups running due to changing to 8 weeks from 12.
- A total of 18 Interventions for alcohol were provided and 20% of clients taking up service (n.252) received brief advice due to drinking at risky levels (AUDIT C 5+) compared to 15 interventions and 8% given brief advice (n.94) in previous Q1-Q2 period. This highlights improvement in holistic assessment.
- Overall uptake of Service was 50% (n. 1286) an increase from last year's Q1-Q2 of 44% (n. 1109). Currently there are 531 clients actively engaging. 34 currently waiting for next healthy weight groups.
- Client uptake demography overview: 63% female, highest age groups were 25-34 and 55-64, 85% White British (n,1086), other highest; White other (n,31) Black/Black British African (n,26) and Asian/Asian British Bangladeshi (n,20). Charles Dickens (16%), Nelson (10%) and Paulsgrove (9%) Wards being highest. 32% from long term unemployed or sick/disabled and 25% being from routine and manual occupation.

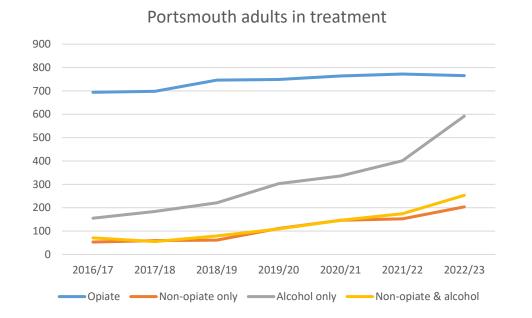


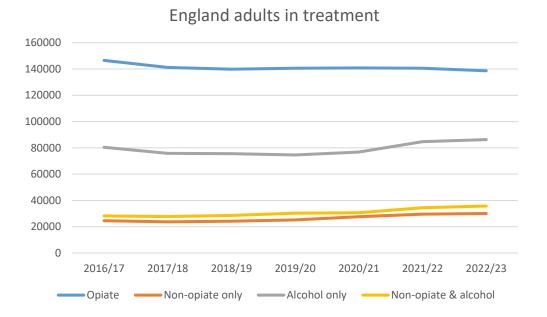




### Reduce the harm caused by substance misuse

After very significant increases in the numbers receiving treatment last year (from 1,436 in 2021/22 to 1,742 in 2022/23), we have continued to see modest increases in numbers accessing during this year and will achieve our target for 2023/24 of 1,785.





## Drug related deaths

Portsmouth has a significantly higher rate of drug related deaths than the England average. There is a significant delay in the reporting of this data. Drug related deaths are higher in areas with higher deprivation. The most common causes of drug related deaths are due to long term health conditions (COPD, liver disease, CVD etc.) and secondly overdose. Suspected suicide has featured as a factor also in recent years.

10 8 6 per 100,000 4 2 0 2001 2004 2007 2010 2013 2016 - 03 - 06 - 09 - 12 - 15 - 18 England

Portsmouth

Deaths from drug misuse for Portsmouth

### Reduce the harm caused by substance misuse

Over the past 3 years there has been significant increased investment in drug and alcohol treatment services nationally. In addition to the increased service provision reported in our previous report, for 2024/25 we plan to invest in the following initiatives:

- Drug specialist nurses at QA for Portsmouth patients
- 2 new FTE social workers and 3 new FTE mental health nurses to work within our Recovery Hub
- Additional bereavement support/counselling for families impacted by drug/alcohol related deaths
- An additional 1 FTE under 18s substance misuse specialist
- 4 additional workers within our Recovery Hub to further increase capacity
- Funding to develop dedicated women only provision
- Additional capacity in our peer-led service, with people with a lived experience of addiction supporting others to overcome addiction.

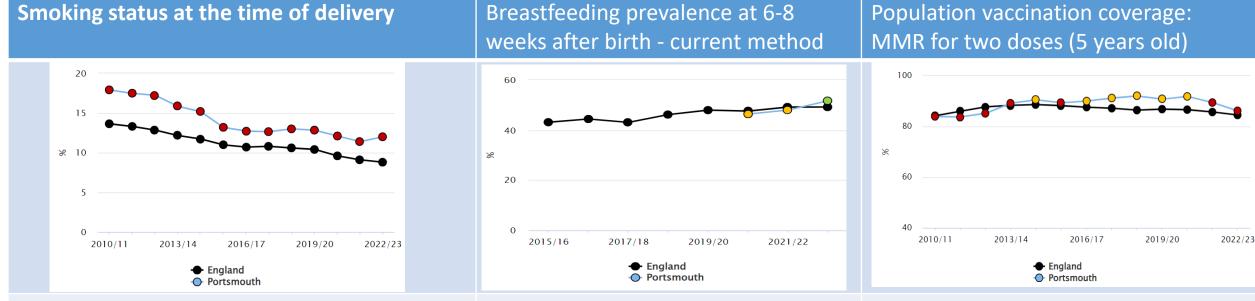
# Sexual & Reproductive Health

	•			
LARC	STI	HIV		
Total prescribed LARC excluding injections rate / 1,000	New STI diagnoses (excluding chlamydia aged under 25) per 100,000	HIV testing coverage, total	HIV late diagnosis in people first diagnosed with HIV in the UK	
60 40 20	750 500 250	<sup>75</sup> 50 25		
0 2014 2016 2018 2020	0 2012 2014 2016 2018 2020 2022 England Portsmouth	0 2009 2012 2015 2018 2021	0 2009 2011 2013 2015 2017 2019 −11 −13 −15 −17 −19 −21 ← England ← Portsmouth	
Health & Care Portsmouth	High testing coverage has a	Uptake of HIV testing requires	Late diagnosis of HIV is	

Partnership strengthened resilience and recovery related to the pandemic and continues to benefit providers and the public through increasing provision High testing coverage has a positive correlation with high new STI diagnosis. Suggests we are reaching the right young people and are able to get treatment in place as early as possible. Uptake of HIV testing require improvement to work towards Zero HIV transmissions by 2030 Late diagnosis of HIV is associated with poorer health outcomes. Lack of engagement with health provision; missed opportunities in general practice and acute settings are associated with late diagnosis. Small numbers lead to big variations

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# Childrens Public Health



-Preconception health is included within the Women's Health Hub Board priorities, which includes conversations about becoming smokefree

-ongoing partnership approach to support smoking cessation during pregnancy continues - Rapid review of infant feeding data completed

-Refresh of the Portsmouth infant feeding strategy underway, with HIPS wide strategy to support also in development -Review and promotion of children's immunisations and vaccinations taken place

-Refresh of HIPS preschool

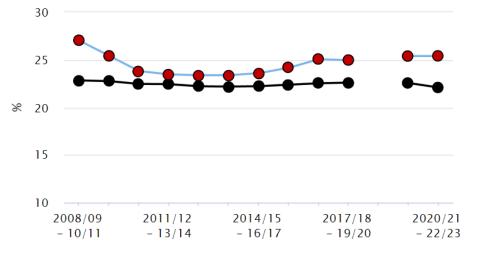
immunisations action plan imminent

- Portsmouth Family Hubs have launched, including a digital strategy
- The Childrens Public Health Strategy (for 2024) is in development
- The First 1001 Days Needs Assessment is in development Office for Health Improvement and Disparities. Public health profiles. 2024 https://fingertips.phe.org.uk © Crown copyright 2024

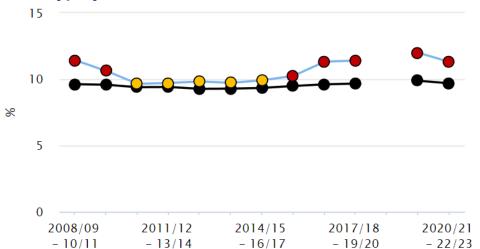
# Children's Healthy weight

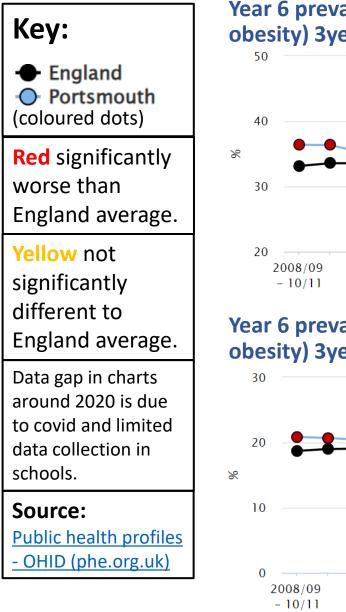
### Trend data:

Reception prevalence of overweight (including obesity) 3year combined data

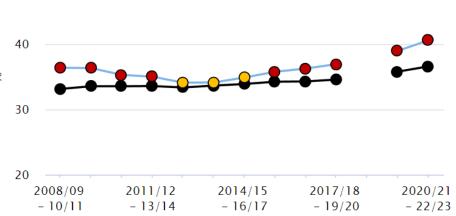


## Reception prevalence of obesity (including severe obesity) 3year combined data

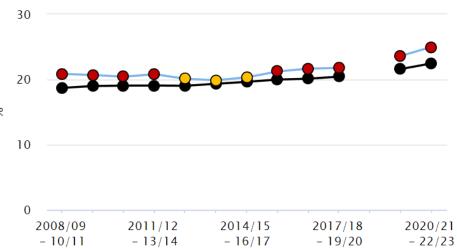




## Year 6 prevalence of overweight (including obesity) 3year combined data



## Year 6 prevalence of obesity (including severe obesity) 3year combined data



# Children's Healthy weight

#### Trend analysis headlines:

- The England data follows an almost linear line in Year R, with slight decrease, whereas Year 6 lines progressively increase. Portsmouth data follows a similar overall pattern, with a little variation in the middle.
- Our rates of overweight and obesity in Year R have decreased slightly since first started measuring children, however in Year 6, both have increased. That trend is also observed nationally.
- Given our deprivation status and the evidence between poverty and obesity, the positive is our trend lines remain fairly consistent and track in line with England average, albeit at around 2-3% higher.
- High levels of excess weight in children continue in adulthood which means tackling it remains a key priority, with commitment across the health system, supported by education and community sectors.

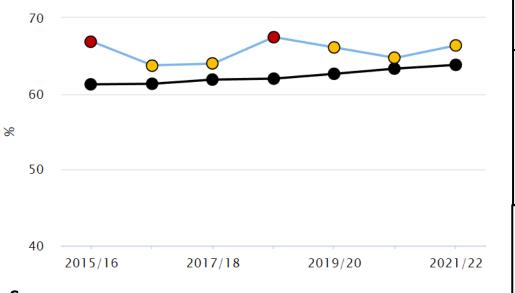
#### Some examples of activity around children's healthy weight:

- Continue to deliver the National Child Measurement Programme (NCMP) and use the insight to utilise the limited resources effectively both in relation to prevention and treatment.
- Deliver our Superzone pilot, a place-based approach to tackle childhood obesity, with Arundel Court Primary Academy. Focusing on active travel, school food and improving environment/access to recreational play.
- Children's obesity pathway refreshed, infant feeding and healthy weight strategies due this coming year.
- Established a multi-agency working group, exploring role of schools in supporting tackling childhood obesity, where new guidance/initiative will offer practical ideas for implementation.
- Healthy eating/nutrition advice/guidance as part of other initiatives e.g. Holiday Activity and Fun, Youth and Play settings, Health visiting, Healthy Start Vouchers etc.

# Adult Healthy weight

### Trend data:

#### Adults (18+) classified as overweight or obese

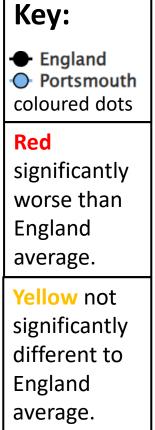


#### Source:

Local Authority Health Profiles - Data - OHID (phe.org.uk)

#### Caveat:

Unlike children, adults are not routinely weighed and measured, therefore the data is selfreported and small scale. It is not necessarily representative, but is the best data set we have.



#### Trend analysis headlines:

- The England average has steadily progressed upwards, year on year.
- Portsmouth was significantly worse (over 5%) than the national average back in 2015/16 (first data point) with the gap closing (2.6% difference) in most current figures. That is not down to a significant improvement in overweight/obesity in Portsmouth, but rather the England average increasing.
- Overall, our rates of excess weight remain steady, a few yearly variations, but since 2015/16 to 2021/22 saw a decrease by 0.5%.
- We would expect levels of excess weight to be higher than national average due to our deprivation status. However, that isn't an excuse not to try and tackle it.

# Adult Healthy weight

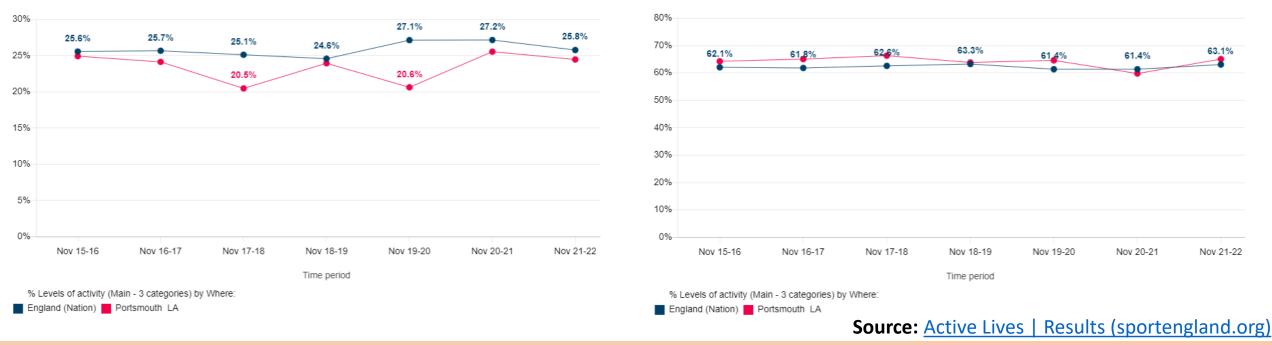
#### Some examples of activity around weight management:

- Provision on Tier 2 Adult Weight Management Services via in-house Wellbeing Service and Get Active Pompey (delivered by Pompey in the Community). Referrals via professionals or selfreferrals accepted.
- Family weight management provision, picked up through children's weight pathway, but aimed at whole family eating better and moving more.
- Pilot of the weight management hub, where all Tier 2 GP referrals go into centralised hub, for triage and distribution to the most appropriate service, ensuing the clients journey into weight management is simple and seamless. With commitment of services to work together and participate in a Multi-Disciplinary Team to ensure more complex patients are supported appropriately.
- Community events/support around healthy eating e.g. Cost of Living events, wellbeing events etc.

# Adult's Physical Activity (16+ year olds)

#### Trend data:

#### Inactivity – less than 30 minutes per week



#### Active – At least 150 minutes per week

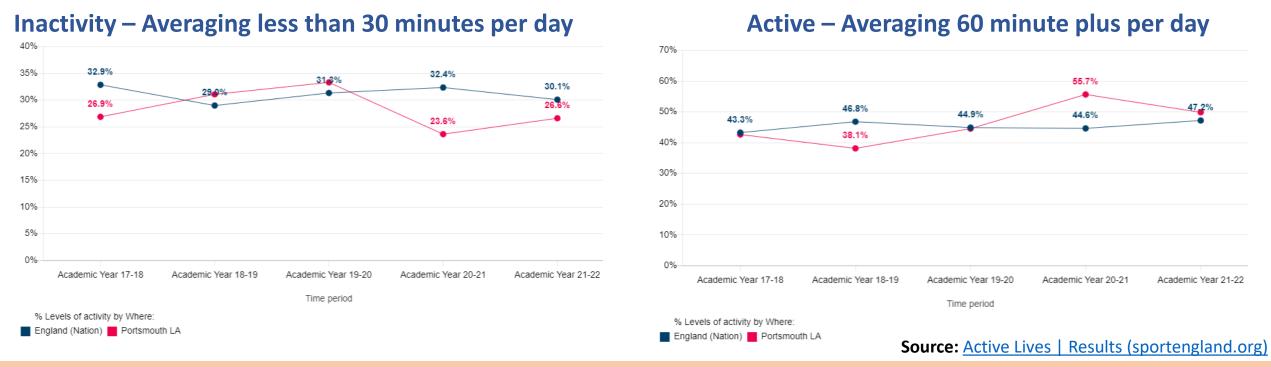
#### **Trend analysis headlines:**

• Portsmouth inactivity levels has remained consistency below the national average and activity above, with yearly variations (particularly in inactivity). However, overall activity and inactivity levels remain fairly stable, with approx. 3 in 5 adults active and around 1 in 4 adults doing less than 30minutes activity a week, (42,000 adults).

Caveat – Data is small scale (500 per year) hence yearly variations, it is also self-reported and not generalisable.

# Children's Physical Activity (5-16 year olds)

#### Trend data:



#### Trend analysis headlines:

- Less than ½ the children in Portsmouth are meeting the chief medical officer's recommendation of 60 minutes (or more) of activity a day. That figure has increased over the past 5 years after an initial dip, but is now lower than 20/21.
- The inactivity level (less than 30 minutes per day) have fluctuated, with our current level similar to where we were 5 years ago.

# Physical activity and utilising outdoor spaces

#### Some examples of activity around physical activity (addressing inactivity):

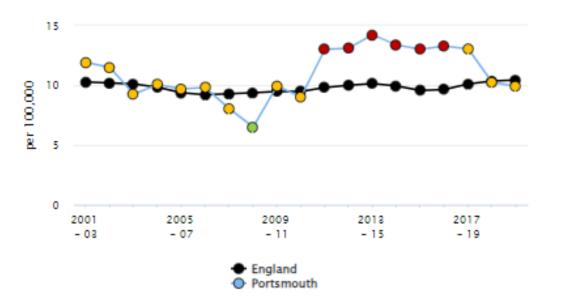
- Continuing to lead the Active Portsmouth Alliance, a multi-agency partnership, working collaboratively to deliver the physical activity action plan for the city. Organising quarterly meetings and leading/supporting specific actions, to encourage and enable our most inactive communities to be more active.
- Work with key partners including (but not limited to) the Integrated Care Board, Primary Care, Sustrans, Active Travel and Transport teams to develop and pilot new initiatives and support established programmes e.g. the inpatient and supported gym programme for people suffering with poor mental health, School Streets etc.
- Provide on-going leadership and support to the Sport England Place Expansion initiative. A 5-year commitment to work in Portsmouth, supporting our most vulnerable residents to be active.

#### Utilising outdoor spaces to make being active easier

- PLAYCE Pompey, the first multi-generational, multi-functional (10 basic movements) space in the UK, created using the Athletic Skills Model (ASM) principles and expertise, from founders in the Netherlands, is on course to launch in Spring 24, at Lords Court (Charles Dickens Ward). Local, play; youth and sport/recreation staff were trained in April 22 and July 23, to ensure utilisation of the new community asset once it's opened, whilst also incorporating the learning and model principles into their everyday practice/settings.
- Supporting various partners to increase casual recreational and/or active travel via projects, for example, re-vamp of Arundel Park as part of the Superzone, cycle events, community pop-ups etc.

# Suicide prevention and public mental health

**Trend in suicide rate** for Portsmouth and England up to 2019-21 (latest published):



In interpreting these data it should be noted that:

- Every death by suicide is one too many

- Relatively small changes in absolute numbers can influence the position for Portsmouth v England

- Societal circumstances such as cost of living may influence the future trend

- A suicide prevention campaign aimed at young adults (ages 19-35) launched w/c 11 December 23 until 19 January 24.
- Primarily a digital campaign plus using poster sites across Portsmouth and printed posters.
- The materials signposted to Samaritans, Shout and had a QR code for the Portsmouth City Council mental health webpage:
  - There have been over 300 visits to the webpage in the few weeks of the campaign (approximately double the visits in the few weeks prior).
  - Targeted social media posts have had 221,341 impressions in (the number of times they've been seen on screen) up til early January.

# Suicide prevention and public mental health

- The **Portsmouth Suicide Prevention Action Plan 2022-25** overseen by Portsmouth Suicide Prevention Group describes our local priorities informed by auditing Coroner's records. Much of our work is undertaken collaboratively across HIOW, as part of the HIOW suicide prevention programme.
- The HIOW real time surveillance system (working with police to understand local deaths by suspected suicide to identify and inform preventative action), is working well, and led from Public Health in Portsmouth. A system to enable closer vigilance to trends is being implemented and links with partners being developed to enhance data completeness and postvention strategies. This includes overseeing delivery of suicide bereavement support commissioned from Amparo and a workplace postvention service commissioned from Havant and South East Mind.
- Current areas of work include raising awareness of suicide prevention with primary care, and, continuing to be
  proactive in offering a range of training to reduce the stigma associated with mental health conditions and develop
  the skills and confidence of non-mental health practitioners in supporting others.
- Public Health Co-Chairs the Portsmouth Mental Health Network alongside Solent Mind and in collaboration with HIVE Portsmouth and ICB Portsmouth. The Network which comprises community and voluntary sector and statutory organisations met in September with a focus on co-occurring substance misuse and mental illness.
- HIOW Integrated Care Partnership Strategy priorities on social connectedness and mental wellbeing are being actively supported with local work developing.

# **Community Champions**

The Community Champions Programme's priority areas include,

- Mental health and wellbeing
- Access to healthcare
- Cost of Living
- Immunisations and safer behaviours



There are approximately 10 individuals who are actively engaged with a further 90 receiving the bi weekly messages, including the family hub champions, community group leaders, internal and external staff.

#### **Highlights from 2023**

- Information drafted for people new to living in Portsmouth
- Attendance at awareness sessions including Making Every Contact Count, Cost of Living and Access to healthcare
- Direct support and information given by community champions to communities on subjects like cost of living, housing, accessing healthcare.

**In 2024**, work will commence with those actively involved to develop a work plan and to look at aspirations and career opportunities.

# Live Well Delivery

The Live Well concept has been to provide community outreach into food pantries/ larders or food banks.

**During 2023** sessions were delivered in four areas of the city including Landport, Paulsgrove, Somerstown and Portsea. In addition, bespoke sessions were delivered with two school settings, one library and one Holiday, Activity and Food provider.

**Highlights** - from the 17 sessions where data was recorded (between March 23 and November 23)

- Over 1000 occurrences were recorded where people engaged with services (approximately 1012)
- On most occasions, services reported that they felt they made a difference to at least one person. There were only two services reported that they had not made a difference at the session they attended (these were different sessions).
- Positive relationships have developed as a result the Live Well work, between the services attending the sessions, hosting organisations and from those accessing support.

**In 2024**, further work will be undertaken to determine ongoing delivery. For example, learning from the two community projects (Portsea and Paulsgrove) will help to define what support/information is needed within the two areas. In addition, support will be provided to delivery partner to implement their own community offer. There is also the potential to work alongside probation services, current scoping underway.

# Health protection

- Air Quality
  - Multi-agency Air Quality Board chaired by PH to deliver the Health and Wellbeing Board priority on Air Quality and Active Travel.
  - After one year of action, an evidence review is underway to refresh the Delivery Plan.
- Health Protection Forum continues as a multi-agency quarterly meeting, taking an 'all hazards approach' to share health protection issues and plans between partners in the city
- Health Protection enquiries to Portsmouth public health are answered by a team of experts on a rota basis, who offer advice normally within one working day.
- Infectious disease and environmental hazards we continue to support partners, including UKHSA, with managing the consequences of incidents and outbreaks of infectious disease. We support mosquito surveillance at the Port, and various emergency planning plans on hazards such as extreme heat, cold, flooding and drought.

# Healthy Places

#### **Climate Change and Sustainability**

- Cross-agency **Portsmouth Climate Action Board** created 2019 in response to Climate Emergency, Chaired by University, Public Health and Portsmouth Hospital Trust included on membership
- Public Health Portsmouth represent HIOW public health on the **Hampshire and Isle of Wight ICS Energy and Sustainability Board**, responsible for delivering the HIOW ICB Greener NHS Strategy. Recent projects include instigating the

#### Poverty and the Cost of Living

- Public Health continues to support the PCC-wide project to tackle the Cost of Living (CoL) through managing the CoL Support Officer, offering intensive one-to-one support to those most in need, and engaging in outreach work in the city through regular attendance at Live Well events, job centres, foodbanks, and other agencies and discussion with the managers of those services.
- We have contributed to aligning the corporate response to CoL with our BAU approach to poverty through the Tackling Poverty Steering Group, which has been adopted as a formal sub-group of the Health & Wellbeing Board, so allowing our partner organisations greater input into how we respond to the ongoing challenge of poverty in the city, and to the likely discontinuation of the Household Support Fund.
- A pilot **Warmth on Prescription project** to mitigate the effects of cold homes for the most vulnerable, based at the Portsdown Group Practice has concluded. Findings will be used to apply for funding to support roll-out of the programme to other practices.

# Green and Healthy City

- The **Greening Strategy and Development Plan** was adopted by Cabinet in October 2023, recognising that the greening agenda is broad, with significant activities being undertaken across Council directorates and in collaboration with partner organisations.
- The Greening Development Group a sub-group of the Climate Programme Board works across council directorates to ensure the approach to greening in city is targeted at those areas most in need. Following a successful multi-agency workshop in September 2023 – a refreshed work programme and delivery plan has been developed.
- There are three strategic priorities: Resilient biodiversity; Effective deployment of nature-based solutions: and Equitable access to nature and the benefits from nature. All of these areas are being looked at through the lens of climate resilience. Five programmes to realise these priorites have been developed:
  - 1. Resilient treescapes Developing and delivering a climate-resilient treescape that provides benefits for nature and people
  - 2. Naturally wilder Portsmouth Making more space for nature across the city and in doing so develop resilience against emerging climate threats
  - 3. Grey / brown to green Increasingly incorporating GI features that deliver nature-based solutions where they are needed
  - 4. Health assets in action Optimising the health and wellbeing benefits from nature
  - 5. An enabling environment Creating the space for action and learning
- Following consultation with relevant colleagues across the council, the Green & Healthy City Co-Ordinator has also drawn together a report setting out our first consideration of the **Biodiversity Duty**, under which all LAs must conserve and enhance biodiversity. The report will be taken to the Cabinet Member for Climate Change and Greening The City's briefing and decision meetings shortly.

# Joint Working – Planning, Transport and Housing

- Portsmouth Local Plan has a clearly articulated policies on air quality, greening, health and wellbeing and Health Impact Assessment (HIA) for major development applications.
- Public Health routinely consults on development applications and has designed a Health Impact Assessment framework.
- Providing health intelligence to support programmes and policies, including development of a local Design Guide.
- Providing health intelligence to support flagship transport programmes and policies inlcuded in the Local Transport Plan 4, including:
  - South East Hampshire Rapid Transit scheme (rapid bus travel)
  - Refreshed Air Quality Strategy
  - Future Transport Zone to promote active travel
  - Parking Strategy
  - Support for funding bids