

## **HEALTH AND WELLBEING BOARD**

## 14 MARCH 2024

#### **SUPPLEMENTARY PAPERS**

## TO: ALL MEMBERS OF THE HEALTH AND WELLBEING BOARD

The following papers were not available at the time of publication.

Kevin Gibbs Executive Director: Delivery

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7.	HEALTH & WELLBEING STRATEGY UPDATE	3 - 54
	To monitor delivery of the Health & Wellbeing Strategy.	
9.	EAST BERKSHIRE VAPE / TOBACCO ALLIANCE GROUP UPDATE	55 - 74



# To: Health and Wellbeing Board 14 March 2024

# Health and Wellbeing Strategy Delivery Progress Report Director of Place, Planning and Regeneration

#### 1 Purpose of Report

- 1.1 The Joint Health and Wellbeing Strategy aims to improve thirty-six outcomes for population health across five priority areas. To deliver improvements in these outcomes fifty-one interventions/projects are planned over the three-year period.
- 1.2 The purpose of this report is to present the HWB delivery dashboard updated for March 2024 (attached) and provide a focused presentation on work progressed for Priority 5: Increasing years lived with good health and happiness. Two of the key risk factors for ill health are obesity and tobacco use. Detailed presentations on work undertaken to tackle these two risk factors are attached.

#### 2 Recommendations

- 2.1 The Board note the dual approach of a system wide approach on wider determinants and services to support people who want to make a behavioural change to lose weight or quit smoking.
- 2.2 The Board agree on the next steps to establish a managed network to deliver the four strategic actions agreed for the whole system approach to obesity.
- 2.3 The Board agree on expanding the stop smoking service to double the number of smoking quitters targeting the communities with highest prevalence.
- 2.4 The Board agree on extending the stop smoking service to support users of other tobacco use to quit tobacco use (Vapers and Oral Tobacco use).
- 2.5 The Board agree for Bracknell Forest to participate in the Frimley text messaging pilot for increasing uptake of stop smoking service.

#### 3 Reasons for Recommendation(S)

- 3.1 About 65% of adults living in Bracknell are overweight with about 12% adults registered as obese on GP registers. Obesity is associated with reduced life expectancy. It is a risk factor for a range of chronic diseases, including cardiovascular disease, type 2 diabetes, at least twelve kinds of cancers, liver and respiratory disease, and obesity can impact on mental health. People who are overweight or living with obesity want to lose weight but find it hard. People have tried to lose weight but struggle in an environment which prompts unhealthy eating behaviours. Obesity puts pressure on health service. It is estimated that overweight and obesity related conditions across the UK are costing the NHS £6.1 billion each year. Latest figures show there were 900,000 obesity related hospital admissions in 2018 to 2019.
- 3.2 About 14.5% of adults in Bracknell Forest are current smokers. The prevalence of smoking in people in routine and manual occupations in Bracknell is five times higher

### OFFICIAL SENSITIVE (COMMERCIAL)/OFFICIAL SENSITIVE (PERSONAL)

than in the general population. People with mental health illness are three times more likely to be smokers. Smoking is associated with higher risk of cardiovascular disease and lung cancer. There were an estimated 867/100,00 (directly age standardised rates) hospital admissions attributable to smoking in Bracknell Forest in 2019/2020. There were 166/100,00 deaths (directly age standardised) attributable to smoking in Bracknell Forest.

3.3 cardiovascular disease and cancers account for 64% of mortality in under 75 years are key modifiable risk factors in Bracknell Forest, comparable with the national picture. Addressing obesity and smoking in the population reduces the burden of disease in the population, increase years lived with good health and reduces health inequalities.

#### 4 Alternative Options Considered

4.1 None considered as these actions are included in the Health and Wellbeing Strategy.

### 5 Supporting Information

- 5.1 Attached
  - 1)HWB strategy delivery updated dashboard
  - 2) Addressing obesity in Bracknell Forest
  - 3) Reducing harm from tobacco use

#### 6 Consultation and Other Considerations

Legal Advice

6.1 NA

### Financial considerations

6.2 The changes to stop smoking service to double the number of smokers quitting and extending it to users of non-cigarette smokers (vapers, shisha) and oral tobacco will be funded through the additional ring-fenced money for stop smoking services from OHID. The strategic actions and managed network for whole system approach to obesity will be funded through the public health reserves.

Other Consultation Responses

6.3 NA

**Equalities Impact Assessment** 

6.4 The work programme includes actions to address inequalities.

Strategic Risk Management Issues

6.5 None identified.

Climate Change and Ecological Impacts

6.6 The recommendations in Section 2 above are expected to:

## OFFICIAL SENSITIVE (COMMERCIAL)/OFFICIAL SENSITIVE (PERSONAL)

Have no impact on emissions of CO<sub>2</sub>.

## **Background Papers**

A full document on equity audit of smoking cessation services is available on request.

## Contact for further information.

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Progress on Actions March 2024. Update for this report are in red font. (Please Note Table for each priority start at new page)

Priority 1 (Sponsors Grainne Siggins, BFC and Nicola Airey, ICB) Give all children the best start in life and support emotional and physical health from birth to adulthood.										
Key Actions	Outputs	Contributes to improvement in outcome(s)	Lead Organisation and responsible officer	Start date	End date	RAG Rating Status Green: on track/ completed; Amber: delayed, Red: at risk as external partners not engaged; Grey: start date falls outside reporting quarter	Brief narrative on RAG rating			
Develop and implement a CYP engagement plan to gain insights into participation in and attitudes to peer led social activities; and what would constitute a good offer of activities	A detailed insights report on the social behaviours of CYP and views on what social activities CYP are likely to engage that supports emotional and physical wellness.	Improve personal wellbeing/happiness.  Reduce anxiety and depression in all children and young people.  Reduce the feeling of being alone and excluded.	BFC Katherine Davies Frimley ICS Samina Hussein	Jan 2023	May 2024	Delayed This has a completion date of May 2024 due to responsible officer seconded to other priorities.	Initial insights highlighted through engagement with YHC's and scoping of community map activities. More detailed insights to be captured in and feed into gap analysis outlined in key action 2.			
Map existing opportunities and groups within Bracknell Forest for CYP and include in the community map- mapping under the 5 ways to wellbeing headings this includes get active and get creative	A gap analyses of peer led social activities and networks that enable CYP to become emotionally resilient and improve their physical fitness.	Increase number of peer support groups for children and young people	BFC Katherine Davies	Jan 2023	March 2023	Complete	CYP activities scoped and added to the Community Map. 116 CYP activities (previous quarter was 110). Information from action 1 and 2 to be pulled together in gap analysis from January.			
Work with local community organisations and CYP to develop a network that builds on the current assets/offer	Offer of diverse range of activities that meet the needs of diverse CYP community developed		BFC Katherine Davies Nicki Davies	Oct 2023	March 2025	On track	Scoping completed CYP 116 assets uploaded to community map. Engagement with CYP workforce such as SEND, FIS, Early Years and voluntary sector ongoing to identify activities.			
Review current MHST model which uses     CYP undergoing therapy to support others     who might need support and build on this     to (include a wider network of peer led     health and wellbeing support	Emotional and mental health awareness increased in school setting and normalised similar to physical health		BHFT	Jan 2023	Sept 2024	Delayed	-completion date Sept 2024 to align with Healthy Schools (whole school approach)			
5. Undertake a review of the usage of the public health Thrive and Healthier Together webpages and using the information develop a survey and focus groups to improve the reach and experience of the user group	A report on current usage and feedback from users with plans to improve the reach and experience of users	Improve the experience of children, young people and their parents in navigating the system and services	BFC and Frimley ICB	April 2023	March 2025	On track	A peer support group piloted -findings to be presented at next emotional health network (Nov 2023) prior to CYP Board			

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			Improve awareness of emotional health, self-help and services among children, young people and their families					
6.	Review the reach (engagement) with current 0-5 year parent groups identifying what is working well, barriers in accessing the groups, identify gaps in provision.	A report with recommendations to be considered by early years group	Reduce the feeling of anxiety and loneliness in new parents	BFC Tanvi Baretto and Cherry Hall BHFT Alison Stares Home Start Sharon Kearins	Jan 2024	June 2024		Initial meeting had to discuss this piece of work. Plan to have a workshop with key stakeholders in June 2024
7.	Review training offer and participation in parenting, emotional and mental health, breastfeeding and weaning courses	An action plan to improve offer and participation rates	Improve awareness of emotional health, self-help and services among children, young people and their families	Frimley ICS Samina Hussein	Feb 2023	Dec 2023	On track	Offer review and courses promoted, collecting data on participation
8.	Conduct a baseline review of CYP services for inclusivity, in particular with regards to gender (male parent), neurodiversity and disability	Based on review, plan to improve inclusivity	Reduce health inequalities in targeted population	BFC Tanvi Baretto ICB Samina Hussein	April 2024	Sept 2024		
9.	Review refreshed local transformation plan to include actions relevant to delivering outcomes.			Frimley ICS Samina Hussein	TBC	TBC	Awaiting plan	
10	. Map and publish all available services that provide emotional health and wellbeing early mental health support (health commissioned, council commissioned services and voluntary and community sector) for families with SEND and analyse gaps to inform commissioning needs.	Needs based commissioning intentions/plan		BFC Manjit Hogston	Aug 2022	Nov 2022	Complete	To review the action in the refresh of delivery plans

	Priority 2 (Sponsor Alex Gild BHFT) Promote mental health and improve the lives and health of people with mental ill-health.										
Key Actions	Outputs	Contributes to improvement in outcome(s)	Lead Organisation and responsible officer	Start date	End date	RAG Rating Status Green: on track/ completed; Amber: delayed, Red: at risk as external partners not engaged; Grey: start date falls outside reporting quarter	Brief narrative on status rating				
11. Use behavioural insights to identify key risk factors in Bracknell Forest among those that have lived experience and professionals to support development of prevention plan.	An evidence-based population based universal and targeted intervention programme devised and planned based on findings of behavioural insights using theory of change approach     Workshop with stakeholders to agree Year 2 and Year 3 actions, outputs and indicators based on findings from behavioural insights report	Reduce Eating difficulties/ disordered eating at a population level	BFC	Jan 2024	Oct 2024		Procurement process begun (service spec and task and finish group established (Joint work with Slough)				
12. Review and promote uptake of training programmes for early identification of eating disorders and timely referrals from all settings	BEAT training for GP and primary care clinicians, nurses and other healthcare professionals     MindEd Training on Eating Disorders to frontline staff     Psychological Perspectives in Education and Primary Care (PPEP Care) training     MSHT emotional and wellbeing Webinars	Early identification and management	MHST (Vicki Livingstone) & Frimley ICB (Samina Hussain)	Jan 22	Ongoing	On track	Ongoing: Webinar series and PPEP care training available to all CYP staff. Data on staff trained collected for local programmes.				
13. Review current support that enables recovery for those suffering from eating difficulties/disordered eating with those with lived experience and take appropriate actions to ensure appropriate recovery services are available in the community	Increase in offer and support for recovery from eating difficulties/ disordered eating	Reduce Eating difficulties/ disordered eating at a population level	BHFT Claire Moran BFC Katherine Davies	Oct 2024	TBC		Working group after discussions with BHFT and community based providers				
14. Co-produce a holistic and place-based approach to responding to self-harm that is consistent with the forthcoming NICE (National Institute of Clinical Excellence) guidance	1.Webinar launched and baseline data collected 2. A series of reflective learning sessions for the CYP workforce who regularly work with children and young people - to allow brave spaces for professionals to establish a collective understanding of self-harm 3. A report based on rapid review on practice, policy, and evidence on what works and analyses of inked data at local level. 4. Next steps agreed	Reduce self-harm in children and young people	BFC Katherine Davies	Nov 2022	Decembe r 2023	On track –	First task and finish group completed to review recommendations,. Action plan develop. BFC and HIN comms departments working together to disseminate findings.				
15. Review the draft pan-Berkshire multiagency self-harm toolkit and adapt to Bracknell Forest based on local insights	A local version of the pan Berkshire toolkit adopted for Bracknell Forest			Dec 2023	April 2024		Pan Berkshire Suicide prevention Group re- established.				
16. Continue to develop and embed the MHST Wave 5 and 6 programmes of learning and implementing the Early Evaluation of the Children and Young People's Mental	1.Promotion of Get Help service to non-MHST schools continuing so that support can be accessed in place     2. Plan for a healthy schools programme using a whole school approach to	Increase in number of schools promoting mental health and wellbeing	MHST (Yanni C & Vicki Livingstone)	Dec 2022	Ongoing	On track	ICB Bid for an Anan additional MHST team for Bracknell Forest was successful.				

Health Trailblazer Programme July 2021 across all schools	promoting children and young people's mental health and wellbeing to be rolled out to schools						16 schools are supported and whole school approach package and training webinars available to all schools
17. Use the learning from the happiness hub (adult mental health community network) model to establish a CYP mental health network	A CYP community based mental health network established	Reduce mental health stigma	BFC and BHFT	Jan 2024	Dec 2024		Awaiting update from Youthline as to whether they were successful in bid for DHSC Early Intervention Fund. National delay in announcing successful bids.
18. Monitor and report Local transformation plans/strategies for reviewing referral pathways, triaging, risk-management panels and signposting to services across the system  18. Monitor and report Local transformation plans/strategies for reviewing referral pathways, triaging, risk-management panels and signposting to services across the system	<ul> <li>Improving GP Access to Early Help</li> <li>Review of referral pathways, triaging, risk-management panels and signposting to services across the system</li> <li>Review of pathways for same day Urgent Care</li> <li>Providers to flow ROMs as part of NHSE reporting</li> <li>Berkshire Healthcare Foundation Trust to flow ROMS</li> <li>Voluntary Sector to flow to ROMS</li> </ul>	Improve the experience of children, young people, and their parents in navigating the system and services	Frimley ICS- Samina Hussain	Ongoing	On going		Local transformation plan group disbanded. Frimley CYP MH meeting in place and to monitor LTP to October 24.  Mapping tool of adult mental health – low level emotional health and inequalities Adult and Children Mental health strategy draft ready – presentation to Board in Dec meeting
19. Implement the delivery plan and evaluate a 'front door' aimed at children and young people to find appropriate services for low level emotional wellbeing and mental health (TBC as per ICS LTP refresh)	TBC from refreshed ICS Local Transformation plan			ТВА	ТВА		
20. Conduct a rapid desktop review of frameworks/standards used in mental health pledges and mental health promoting organisations, gain insights from local organisations and employees on pledge content to design a bespoke Bracknell Forest Pledge and support required to implement it.	<ol> <li>Options report based on rapid desktop review</li> <li>Insights report from local organisations and employees</li> <li>A Bracknell Forest Mental Health Pledge created.</li> <li>Support and training package developed to support signing the pledge</li> <li>Proposal for evaluation in culture developed</li> </ol>	Reduce stigma associated with mental health	BFC – Louise Duffy	Nov 22	April 23	Delayed –	A desk based analysis of mental health pledge has been drafted. Will work with HROD to create proposition for a MH pledge for Bracknell Forest Council and consult with the Healthy Workplace Alliance about this through meetings and healthy workforce accreditation process.
21. Commission an external provider to develop a bespoke mental health awareness training to be offered to customer facing staff including Retail staff, Library Staff, Parks staff, Housing staff, Museum and Leisure staff.	<ol> <li>An external provider secured, and course content agreed</li> <li>Training course dates announced</li> <li>Report on evaluation of practice and awareness of own mental health among attendees during training and in six and 12 months</li> </ol>	Increase in awareness of service provision by need among all frontline workers and the public	BFC – Louise Duffy	Sept 2022	Jan 2023	On track	Let's Face It! training has been offered once a month. Pre- and Post- evaluation shows positive impact on participants. On average this has shown a significant increase of 26% (56% to 82%)

							Training has been delivered to over 150 participants since 2021. Plan is to work g with targeted workforce e.g. child minders/early years and health care and communities as part of the Community Development and inequalities approach. Also offered to local businesses through workplace alliance February 2024.  March 2024 aim is to reprocure a training provider to deliver targeted groups for a further 2 years
22. Mapping of current reach of lifestyle services to people living with emotional and mental health issues and conditions	Increased offer and access of lifestyle services to enable people living with emotional and mental health conditions to be healthy	Improved lifestyles for people with mental health conditions	BFC- Felicity Antwi - Adjei	Sept 2023	March 2024	On Track	Plan for equity audit Quality of data required improvement. Plan to improve data capture and recording agreed with Providers. Data quality monitored on a quarterly basis to ensure full year data is available for equity audit

PRIORITY 3: Sponsor Philip Bell, Involve Create opportunities for individual and community connections, enabling a sense of belonging and the awareness that someone cares										
Key Actions	Outputs	Contributes to improvement in outcome(s)	Lead Organisation and responsible officer	Start date		RAG Rating Status Green: on track/ completed; Amber: delayed, Red: at risk as external partners not engaged; Grey: start date falls outside reporting quarter	Brief narrative on status rating			
23. Work with local organisations and communities to increase the offer and spread of accessible and diverse social activities e.g., groups, volunteering, coffee mornings, befriending, support groups to enable opportunities for social connections	Identify/increase in provision of social activities that meets the needs of all the different communities (defined by small areas or similar characteristics or health condition)  Improved accessibility of the offer of social activities by increasing the number of community venues where access to transport is low  Raised awareness of the dementia and other carer support offer in Bracknell working with providers, residents, and carers	Number of assets in community map August 2022 increased from a baseline of 326 activities.  Number of outreach venues that offer social activities increased from Baseline: 10  Number of promotional activities/awareness campaigns from a baseline of 20  Number of friendship tables	BFC Tina Nash Involve (TBC)	Oct 2022	Ongoing With quarterly monitorin g	Ongoing	track as part of community map, social prescribing activity and Happiness Hub  Involve hosts the Older People's Consortium which has seen growth in recent months with The Parkinsons Society, Berkshire Birds of Prey, and Dogs for Good join a partnership of 10 existing charities.  Involve have recruited to the role of Friendship Ambassador who will develop friendship tables throughout the borough.			
24. Include voluntary and community sector organisations MECC (Making Every Contact Count) module to increase all customer facing organisations to signpost and refer clients appropriate to service	Increased signposting and referrals to VCS organisations by all customer facing organisations.  Increase no. of frontline staff trained to have 'healthy conversations'	Number of referrals tracked through JOY marketplace (PH and VCS)  Number of staff trained in MECC who have used healthy conversations in their role	BFC Joanne Pittard	Oct 2022	July 2024	On track	Can only track referrals made via JOY from social prescribing service. 28 in Q2 10 in Q3 123 staff trained in 2023 2 Trainers recruited to deliver regular sessions			

25. Increase use of Bracknell Forest Green spaces through green volunteering programme, walks, outdoor activities.	Improve resident's feelings of self- esteem, confidence, and wellbeing. Increase physical activity levels, social connections, wellbeing etc.	Number of resident's reporting an improvement. Baseline: 0 Proportion who have made lifestyle changes.	Involve Caroline Pragnell	Oct 2022	Oct 2024	On Track – data reported every quarter	Planning in progress for Q1 2024 to recruit additional trainers comprising internal staff and health champions (from the community).  Over 50% of participants reported improved mental health, social connections and
							Confidence.  Q3 85% participants reported improved mental health, and; Over 60% reported improved social connections.
26. Increase use of libraries and other adult learning places		Number of sessions in libraries and other community learning setting Increase in numbers participating in these sessions	BFC Abdul Azad	October 2022	On going	On-going. Ongoing and on track	Events were planned with Sports Centre and Open Learning Centre were this September .  Social prescribing craft sessions bi-weekly held in Bracknell Library
							Plans are in place for Q1 2024 include a monthly craft session at Crowthorne Library, which is in addition to Bracknell Library.
27. Run a focus group with community map assets to understand partnership working and support	A support offer developed and implemented	1.Number of assets engaged in the partnership and supported Baseline = 60	BFC	Aug 2022	Sept 2022	Ongoing and on track	Number of assets engaged in partnership = 132 (122 previous quarter).
28. Launch new improved community map to increase it's awareness and usage across Bracknell Forest	<ol> <li>Launch event for partners</li> <li>Road show to promote community map to residents</li> <li>Training offer for partners</li> <li>Establish quarterly monitoring of the community asset map</li> </ol>	<ol> <li>Communications plans</li> <li>Road show locations and dates agreed</li> <li>Number of partners attending training</li> <li>Baseline - 0</li> <li>Increase usage of the community map, tracked through google analytics</li> <li>Baseline: 1461 visits in 2021/2022</li> <li>Number of assets on the community map</li> </ol>	BFC Tina Nash	Oct 2022	Nov 2022	Complete - presented at last board meeting	Visits = 6025 (766 in the last quarter)  No. of assets = 466 (430 previous quarter).  Subscribers to newsfeed = 221  Professionals training sessions: 33 sessions delivered, 252 professionals.

		Baseline: 326					
29. Replace the current paper-based and manual system to a fully integrated digital solution	A digital referral pathway with case management data capture (interventions and outcomes) implemented	Percentage of referrers using JOY to make a referral Baseline: 80%	BFC Joanne Pittard	May 22	ongoing	Complete	100% referrals via JOY
30. Work with statutory, voluntary and community sector organisations to raise awareness of the service and encourage appropriate referrals	A plan to promote the service at various events including the launch of the community map, across council wide networks, and external providers  Provider plan for engagement with JOY marketplace to encourage appropriate referrals whilst raising the profile of their services.	Number of referrals with primary need is loneliness/social isolation Baseline 22%  Percentage of clients with an improved loneliness/or wellbeing score. Baseline: 40%  Percentage of under represented groups accessing the service. Baseline less than 2%  Percentage of inappropriate referrals reduced tracked through the JOY database Baseline: 7% inappropriate referrals for last qtr.	BFC Joanne Pittard	July 2022	ongoing	On track  On track	Q3 = 27% referrals for loneliness/isolation  Figures taken from JOY 01/09/22 - 01/09/23  65% of clients saw an improvement to their overall well-being 30% of clients reported an improvement to their baseline loneliness score  40% of clients had an improvement to their baseline well-being score  Average satisfaction with the service was 90%  3410 client contacts in the last 12 months, of which 20% were in-person.  Q3 = 3% referrals from under represented groups  Declined referrals in Q2 = 9%, has increased by 5% Q1 Q3 = 3%
31. Relaunch and promote the social prescribing service to residents through various channels	A communications plan to promote the service amongst residents with consideration of different engagement methods for diverse communities	Increase in number of appropriate self-referrals Baseline (8%)	BFC Joanne Pittard	Nov 2022	On going	On track	2023 self referrals = 9%  New referral and case management software and increased team size. 2 social prescribers undertaking qualification to enhance skill set.  Service promoted at great wellness exchange and through forums such as old age consortium and hardship forum.

						Summer programme – delivered a timetable of 16 events across 3 months. 72 residents attended. Winter programme is currently being widely promoted both internally and externally to stakeholder groups.  Winter programme Q3 delivered 29 activities, 256 residents attended.  2024: Service promoted to internal teams (HUB, EIP, LAP) and Care Home MDTs to increase referrals.
32. Create a network of health and wellbeing service practitioners to enable shared learning and collaborative practice	A network established with a better understanding of different practitioner roles and clients and inter service referrals	Number of network events Baseline: 2	June 2022	Ongoing	Regular meetings as part of Happiness Hub, SP meetings	Over the last 12 months the team have attended 270 events/activities.

Priority 4 (DPH)										
	Keep residents safe from infe	ectious diseases and addres	s the long-teri	m impacts	of COVID-	19				
Key Actions	Outputs	Contributes to improvement in outcome(s)	Lead Organisation and responsible officer	Start date	End date	Status Green: on track/ completed; Amber: delayed, Red: at risk as external partners not engaged; Grey: start date falls outside reporting quarter	Brief narrative on status rating			
33. Work with East Berkshire Hub and UKHSA lead on a framework/plan for a local wider outbreak management plan	Revised and update Local Outbreak Management Plan (LOMP). Relaunch LOMP	Reduce the impact of future outbreaks of communicable disease	BFC Gabby Haffner	Dec 2023	July 2024	On track	Work on going – dependent on national and local changes			
34. In collaboration with NHSE/OHID screening leads review current quality and uptake of national screening programmes in Bracknell Forest to identify and plan for quality improvements and targeted work in areas/communities of low uptake	A quality and performance report with recommendations for improvement agreed at the Health Protection Forum (Q2 2023)	Reduce Health Inequalities in all national screening programmes	NHSE/ICS BFC Gabby Haffner	Jan 2023	Sept 2023	Behind schedule due to delay in re-establishing Berks East Health Protection Forum	Monitored through re- established Health Protection Forum. New Screening and Immunisations Lead (NHSE) providing better data.			
35. Produce reports on uptake of national immunisation programme showing uptake by GP or ward level to identify any variation in uptake of childhood and other adult vaccinations (flu, covid, pneumococcal)	Immunisation performance report produced and presented to Health Protection Forum	Reduce health inequalities in immunisation	NHSE/ICS BFC Gabby Haffner	TBC	TBC		East Berks Health Protection Forum re- established.  Health Protection Plan across E Berkshire Forum provides opportunity to assess data. Some additional local work to explore data at ward level.			
36. Review engagement and communications during Covid and produce lessons learnt report	A report with recommendations on communications and methods to engage with local communities on health protection	Reduce the impact of communicable disease and other health protection topics by use of effective comms	BFC Gabby Haffner	Jan 2023	April 2024	On track	Using data from Impacts of Covid 19 Survey, report is on track.			
37. Continue to work with NHS infection control team and Council Public Protection Partnership to review and improve infection risk and improve good practice in high risk settings			ICB/ BFC Gabby Haffner	On -going	Dec 2026	On going	Good relationships established with Frimley Infection Prevention and Control Team. Bespoke hand washing assets in development.			
38. Provide assurance to the Health and Wellbeing Board on adverse weather planning			ICS/ BFC Gabby Haffner	Jan 2023	Dec 2026	On-going	Work on both winter and hot weather preparedness and to minimise excess deaths			
39. Review the implementation of the NICE guidance on reducing health harm from cold homes in Bracknell Forest and make recommendations.			BFC PPP and Gabby Haffner	June 2024	Sept 2024	Starting June 2024				
40. Develop and implement a plan to mitigate the long-term impacts of COVID.	Local Covid impact on population health report based on perceptions/views of residents, published literature and local long Covid estimates.	Appropriate use of COMF to mitigate potential long-term health and wellbeing impacts of Covid	BFC Gabby Haffner	Dec 2022	Dec 2023	Complete	Survey complete, findings shared. Innovation funding and COMF allocated. On-going monitoring of COMF funded work and projects.			

Priority 5 Improve years lived with good health and happiness								
Key Actions	Outputs	Contributes to improvement in outcome(s)	Lead Organisation and responsible officer	Start date	End date	RAG Rating Status Green: on track/ completed; Amber: delayed, Red: at risk as external partners not engaged; Grey: start date falls outside reporting quarter	Brief narrative on status rating	
41. Conduct a rapid evidence review including grey literature and good practice to recommend evidence-based practice/methods for increasing heath literacy and self-care.	A toolkit based on the findings of the review for use locally/plan for community led healthy conversations.	Improvement in health literacy of local population.	BFC Louise Duffy Annie Yau- Karim and Dave Bryan	Jan 2024	March 2024	In development	Proposal for community profile and community engagement approach has been developed. First cohort of minority groups being identified. Engagement will comprise 3 stages:  • Epidemiological data analysis  • World café events and lived experience/stories  • Identification of health leaders within groups and training will be offered to support e.g. MECC and MH Awareness and others based on need.	
42. Map current CVD prevention programmes and evaluate the effectiveness of the programmes to identify good practice that can be rolled out across the borough.	A plan to reduce variation through roll-out of good practice through shared learning A plan to reduce variation through roll-out of good practice through shared learning.	Reduction in variance between practices.  Improvement in detection and management.	ICB Lalitha lyer and Helen Single	Dec 2022	Ongoing	Complete	Ongoing work as part of ICS CVD prevention work under the Medical Director as new good practice identified	
43. Adapt and implement the ICS CVD prevention plans at place.	A local plan in place agreed.		ICS Helen Single	Jan 2022	Ongoing	Complete for current plans	Monitored as part of the ICS living well programme to identify any required updates	
44. Undertake health equity audit of CVD primary and secondary prevention services to inform targeted action on CVD and diabetes prevention and management.	Plan to reduce health inequalities in cardiovascular health and diabetes outcomes.	Increase in offer and uptake of smoking cessation and weight management services in targeted populations.  Improvement of management outcomes in targeted population	BFC and ICB Felicity(smok ing and weight management uptak) and Richard Freeman	Dec 2022	July 2023	Ongoing	Felicity working with community engagement officer and providers to increase uptake of smoking cessation and weight management services in targeted populations.	
							Smoking equity audit underway, data received and currently being analysed. Draft report due in April 2024. Core20PLUS5 population groups	

							prioritised in any initiatives.
45. Review commissioning and performance of NHS health checks and make recommendations for improvement	Plan to improve commissioning and performance of NHS health checks locally	100% of eligible cohort invited for NHS Health Check Increase in number of invited cohorts receiving a health check .  Increase in appropriate referrals to lifestyle services from the NHS health checks programme	Tanvi Baretto and Felicity	Dec 2022	Sept 2023	Completed	Audit is now complete and final report has been submitted in November 2023. Commissioners to build in recommendations to the new NHS HC service specification.  Actions from audit has been embedded into new service specification. Improvement plans underway.
46. Co-produce plans for prevention of uptake of nicotine containing products and increase in number of people that access and successfully quit smoking   The product of uptake of nicotine containing products and increase in number of people that access and successfully quit smoking.	A refreshed tobacco plan based on insights on use of vaping in BFC outside the smoking cessation pathway and other local intelligence	Reduction in uptake of tobacco products among different age groups  Number of schools participating in offer of courses to increase awareness of harms from nicotine use	BFC and ICB Louise Duffy and Mahmuda Ullah	Dec 2022	Sept 2023	Delay	Data quality improvement in progress Links made to ICB Frimley Living Well Ambition Swap to stop scheme/SSS funding. Target groups to reduce inequalities identified based on findings from analysis and intelligence data and equity audit. Focus now on BFC tobacco control plan to include wider tobacco control and SSS uptake for target groups incl. Routine and Manual Occupations/MH/LTC/Pr egnancy. 50% of additional DHSC funding will go towards R&M occupations.
47. Develop innovative solutions to support people with unhealthy weights to achieve and maintain health weights.	An options proposal paper presented to appropriate meeting	A scaled up service to reduce current waiting lists	BFC Tanvi Baretto	January 2024	July 2024		
48. Review and evaluate the current weight management services and establish a weight management pathway based on NICE guidance (CG189 updated 2022)	A pathway agreed working with iCS	Compliance of NICE guidance to ensure quality of services commissioned	BFC and ICS Tanvi Baretto and Mahmuda Ullah	Mar 2023	March 2024	Delay	Evaluation of tier 2 weight management services completed.  Initial meetings convened by ICS - awaiting timeframes and plans from ICS

							A health weight framework adopted by Living Well Board
49. Map current physical activity offer for all ages and diverse communities, identify gaps and develop a physical activity pathway in accordance with NICE public health guidance to enable all residents including people with mobility and sensory difficulties to meet the CMO guidelines on physical activity.	A physical activity pathway with offers of different activities agreed.	Compliance with NICE and CMO guidelines on physical activity  Increase in number of people participating in different forms of physical activity	BFC Felicity	Oct 2022	Dec 2023	Delayed	. Draft report delayed, report now expected in April 2024 . This was due to delay in interviews with primary care staff.  Successfully recruited 3 more casual instructors to increase the accessibility of Physical activities, this will include provision for evenings.
50. Develop a plan based on whole system approach agreement to change the key environmental issues in Bracknell to create healthy environment enabling healthy choices	A whole system approach to obesity report for Bracknell Forest with key (strategic) actions	Increase in number of opportunities to enable/facilitate maintaining healthy weights	BFC Tanvi Barreto	July 2022	July 2023	Completed	Final report received. In November. Some suggested changes to be incorporated. Strategic action plans agreed
51. Develop a plan for the Council and the local NHS to be exemplar healthy workplaces and extend the learning to local businesses	A joint plan agreed as part of the Bracknell Forest Workplace Health Alliance work programme.	Number of workplaces engaged with workplace healthy charter.  Number of settings engaged and achieved baby friendly certificate	BFC and ICB Louise Duffy and Mahmuda Ullah	Nov 2022	July 2024	BFC Healthy workplace Alliance established	Workplace Alliance membership and meetings – currently 22 businesses registered. Repository of resources to support health and wellbeing available to businesses. BFC Healthy Workforce Accreditation programme due to be launched in early 2024 in partnership with Surrey CC. Full calendar of HWB events launched for 2024. Small Business event arranged for April 2024 to recruit small businesses into the Alliance.

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# Presentation will cover



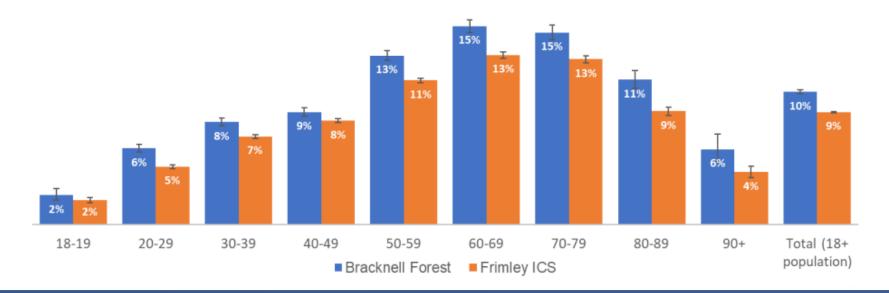
- 1. Current estimated prevalence of obesity in Bracknell Forest
- 2. Strategic Plans to address obesity at population level
- 3. Structured weight management programmes to support people with unhealthy weights to make changes to a healthier diets
  - Adult Weight Management
  - Children and Young People Weight Management & work with schools
- 4. Universal and targeted physical activity programmes

# **Obesity QOF Register**

Sex: Females in Bracknell Forest have a higher prevalence of obesity than males (11.8% compared to 8.9%). This difference reflects the national and ICS picture. Bracknell Forest has the highest prevalence of obesity in males across the whole of Frimley ICS.

Age: The prevalence of obesity in Bracknell Forest is highest in the 60 to 79 age groups. Bracknell Forest's prevalence of obesity is significantly higher than Frimley ICS for all age groups, apart from younger adults aged 18 to 19.

## Prevalence of obesity by age group (January 2022)



# Prevalence of adult obesity by age and wards

\$
<b>Bracknell</b>
 <b>Forest</b>
Council

Obesity	18-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90+	Total
Ward	Prev (%)									
Ascot	*	4.4	5.3	7.0	10.6	15.6	14.6	13.5	9.57	9.4
Binfield with Warfield	*	4.5	5.9	7.6	10.2	13.5	16.9	12.3	6.90	8.9
Bullbrook	*	7.7	7.8	10.6	16.6	20.7	19.9	13.7	*	12.0
Central Sandhurst	4.95	4.6	7.0	6.7	10.9	13.2	12.7	12.0	*	9.2
College Town	*	4.1	5.8	6.0	12.1	12.7	11.1	5.9	0	8.3
Crown Wood	7.92	9.0	11.1	13.1	19.0	20.4	21.2	24.3	*	14.9
Crowthorne	*	7.1	9.1	9.5	13.9	16.9	12.6	10.9	*	11.0
Great Hollands North	3.26	10.4	9.1	12.0	22.2	20.0	21.9	8.2	*	13.8
Great Hollands South	5.66	4.5	12.5	13.0	16.7	20.1	18.8	15.6	0	14.0
Hanworth	*	8.0	10.7	13.0	21.3	22.8	19.8	13.1	16.67	15.2
Harmans Water	2.69	6.4	9.3	10.4	14.5	17.1	20.5	11.6	*	11.6
Little Sandhurst and Wellington	*	3.4	7.0	7.4	8.8	12.2	10.7	14.4	*	8.0
Old Bracknell	3.59	8.1	9.7	12.7	17.7	22.2	15.8	16.9	0	13.2
Owlsmoor	*	5.5	6.4	7.8	11.6	13.1	13.8	13.1	*	9.6
Priestwood and Garth	3.70	7.9	11.6	12.4	19.7	23.5	21.9	16.8	*	14.6
Warfield Harvest Ride	*	5.8	5.7	8.6	11.7	13.7	17.3	10.5	*	9.7
Wildridings and Central	*	7.7	9.9	11.6	17.0	21.0	22.7	16.5	12.82	13.0
Winkfield and Cranbourne	*	2.4	5.8	6.2	10.3	15.4	19.7	13.5	9.38	10.6
Bracknell Forest	2.50	6.5	8.6	10.0	14.6	17.4	17.3	13.4	7.15	11.6

# **Childhood obesity**

The National Child Measurement Programme (NCMP) measures the height and weight of primary school children in Reception Year (age 4 and 5) and Year 6 (age 10 and 11).

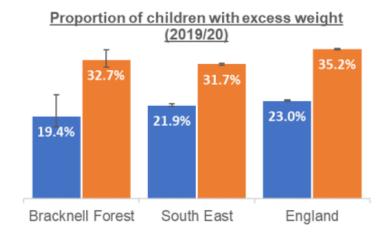
# **Excess weight (overweight or obese)**

In 2019/20, 20% of Reception children and 33% of Year 6 children had excess weight in Bracknell Forest. This was similar to the national and regional figures for both age groups.

# **Obesity**

In 2019/20, **10%** of Reception children and **18%** of Year 6 children were obese in Bracknell Forest. Bracknell Forest's prevalence for Reception aged children was similar to the national and regional picture, while prevalence for the Year 6 age group was significantly better.

The following slides provide an analysis of obesity prevalence in Bracknell Forest by deprivation and ethnic group.



<u>Proportion of children who are obese</u> (2019/20)



## 26

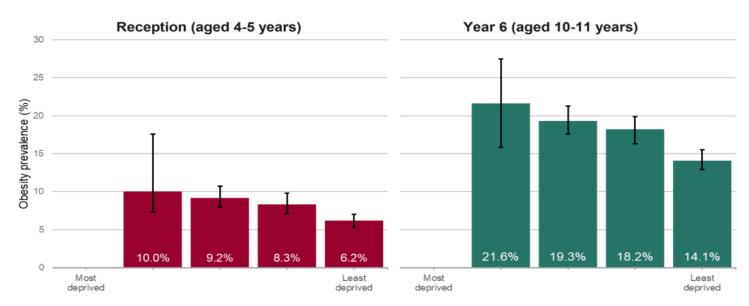
# **Childhood obesity**

# **Deprivation**

Children living in the most deprived areas of Bracknell Forest (IMD deciles 3 and 4) have a significantly higher prevalence of obesity in Reception and Year 6, compared to those in the least deprived areas of Bracknell Forest (IMD deciles 1 and 2).

Wildridings & Central ward, which is the most deprived ward in Bracknell Forest, has the 2nd highest prevalence of obesity in Reception Year children and the highest prevalence in Year 6.

## Obesity prevalence by deprivation and age, 2015/16-2019/20



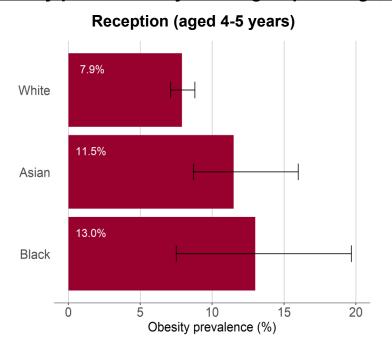
# 27

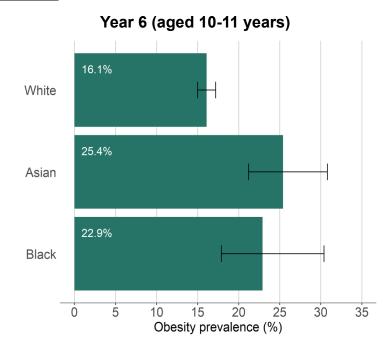
# **Childhood obesity**

# **Ethnicity**

The difference in obesity prevalence between ethnic groups in Bracknell Forest reflects the national picture. Children from a non-White ethnic groups have a higher prevalence of obesity compared to children from White ethnic groups. This is significantly higher for children in Year 6.

## Obesity prevalence by ethnic group and age, 2015/16-2019/20





Whole systems approach to obesity – process and benefits

 Evidence suggests that a whole systems approach can help tackle complex issues like obesity **Bracknell** 

Forest Council

 A whole systems provides the opportunity to engage stakeholders across the wider system, to develop a shared vision and actions that tackle the upstream drivers of obesity outside the realms of public health

Public Health England Public Health England **Health** Matters **Health** Matters Overview of the whole systems approach The benefits of a whole systems approach to obesity Phase 4 Action Phase 5 Phase 3 Mapping the Managing the system network local system Phase 2 Phase 6 **Building the** Reflect and local picture refresh health-promoting food the demand and built environment Phase 1 **Benefits** Positive actions Whole systems of tackling obesity approach to obesity

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# Adult Weight Management Service

- Bracknell Forest adult weight management service supports residents to achieve a healthy weight through a combination of healthy eating, physical activity, and behaviour change support.
- The programme is a 12-week course that offer a face to face and virtual support.
- Referral is through health professional or self-referral using the details below:

## **Inclusion Criteria:**

- All adults aged over 18 years who live or work in Bracknell Forest are eligible with a BMI >30 Kg/m2 (defined as obese)
- For people with other co-morbidities such as (patients with diabetes, CHD, or higher risk of these conditions such as Black, Asian and minority communities, a lower BMI threshold >27kg/m2
- The service is universal but is also targeted at supporting:
  - Men
  - BAME groups
  - Adults with a Mild Learning Disability







#### The offer...

 Free 12 week programme – nutrition and physical activity sessions at a local location.

#### Who for?

- Eligibility Aged 18+
- Residents of Bracknell Forest
- Anvone who works in Bracknell Forest
- BMI equal to or greater than 30 (27 for people from ethnic background)





Refer by... Email:eh.bracknellforest@nhs.net Tel: 0333 005 0095





A Whole system approach evidence based process steps In Bracknell we have completed Phase 1 to Phase 4

# Phase 4 Action

Stakeholders come together to prioritise areas to intervene in the local system and propose collaborative and aligned actions.

Phase 5
Managing the system network

Maintains momentum by developing the stakeholder network and an agreed action plan.

# Phase 6 Reflect and refresh

Stakeholders critically reflect on the process of undertaking a whole systems approach and consider opportunities for strengthening the process.



Phase 3
Mapping the local system

Brings stakeholders together to create a comprehensive map of the local system that is understood to cause obesity. Agreeing a shared vision.

Phase 2
Building the local
picture

Builds a compelling narrative explaining why obesity matters locally and creates a shared understanding of how obesity is addressed at a local level.

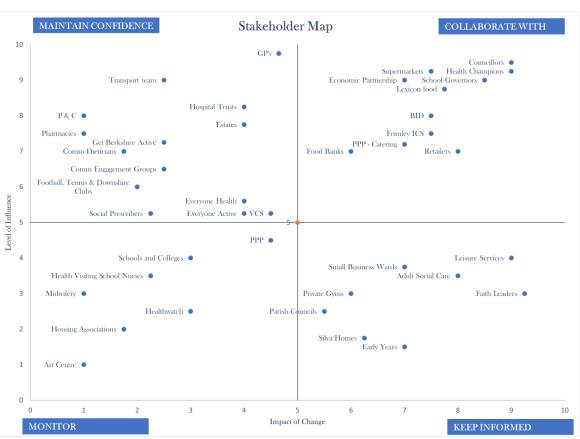
Phase 1

Secures senior-level support and establishes the necessary governance and resource structure to implement the approach.

# Phase 1: Setting up the Joint Strategic Group and Stakeholder mapping



- To take forward this project a JSG was set up with representation from the NHS, Council (officers and elected members), voluntary sector and relevant providers and forums. The Steering group was chaired by Cabinet member.
- Project group produced a stakeholder map



# Phase 2: Stakeholder engagement at Opportunistic events

Bracknell Council

The project group attended opportunistic events

- Return of the Tree Giants at the Lexicon
- Community conversations
- Hypertension Bus
- Economic Skills Development Partnership **Event**

A total of 187 residents were consulted at these events. In addition, a number of professionals and key players from the obesity system were spoken to.





# Phase 2: Survey and Focus Groups

Bracknell Forest Council

The project group designed a survey to gather more in-depth feedback from residents on

- Physical Activity
- Smoking
- Alcohol
- Weight Management
- Lifestyle
- General Health

A total of 312 resident completed the survey. Residents who completed the survey were from a range of different age groups, ethnicities, and occupations. 3 focus groups were also held with residents.

# Phase 2: Survey and Focus Groups



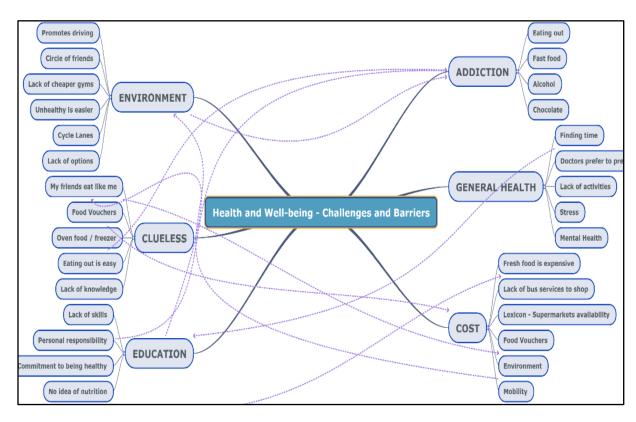
# Themes from initial analysis of the survey and focus groups

- Improved access to more affordable healthier options
- More readily available fresh food items
- More education around healthy eating and exercise for children and parents
- Healthier food options in schools
- Improve cooking skills
- Reduce availability of ultra-processed foods
- More access to exercise and fitness classes
- Have community kitchens where people from different cultures can hold cooking classes for the community
- Use green spaces for growing vegetables that community can be part of
- More holistic programmes
- Need to understand people's journeys and barriers and accordingly design programmes

# Concept Map

- Following on from these events and conversations, the insights collected were presented in concept maps.
- Concept map looks at the challenges and barriers faced by residents when it comes to leading a healthy lifestyle in Bracknell Forest.





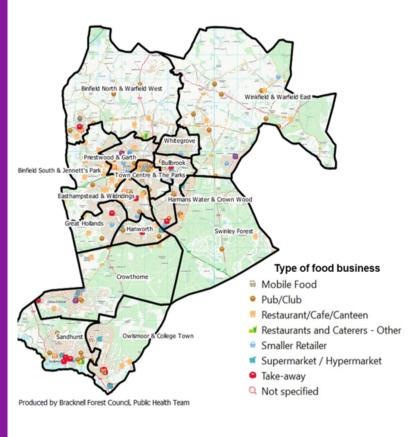
Phase 3 & 4: Strategic Action Initiatives (SAIs)

4 SAIs were agreed by the steering group workshop as important for **Bracknell Forest** based on consultations



## SAI 1: Map the food environment





**Purpose:** To map the current food environment in Bracknell Forest. This mapping by ward level will help understand the different types of food options available to residents, identify food desserts and look into catering options available in our schools, workplaces and other key locations. This will help identify the key issues and help consider what action needs to be taken to change or improve the environment

#### **Key actions**

- Map the food environment in Bracknell Forest to include food outlets by type, fast-food outlets near primary and secondary schools, areas with high levels of obesity and high concentration of fast-food outlets
- Target 4 areas with high levels of obesity and overweight number with specific evidence-based interventions
- Work with restaurants and catering outlets to make healthier options available
- Work with schools to develop a healthy schools programme to increase physical activity and healthy eating

# SAI 2: Enabling changes in diet, chefs and supermarket engagement





**Purpose:** To explore and develop the concept of healthy cooking made easier using a menu of recipes and buying the ingredients without having to work out calories etc. This group will engage with chefs and supermarkets to develop new solutions that are economically viable for residents.

#### **Key actions:**

 Develop a digital platform to share healthy recipes, cooking tips from local chefs, local stories of changes to lifestyles

## SAI 3: Health champions and selfhelp groups





Purpose: to identify and develop a network of "Health Champions/Leaders" in the community. This will also include the creation of various self-help groups bringing together engagement activities for various community groups who need support with the behavioral changes towards developing a healthy lifestyle that is sustainable. Sustainable changes at the heart of the community will create a positive camaraderie and support network that will benefit individuals and families.

#### Key actions:

Create a network of health champions/leaders, create and develop self- help groups

## SAI 4: Design and Display within stores





Purpose: to analyse aspects of food display and location in all the retail food outlets across the region. This will include small and medium stores in all the wards, the Lexicon and all the bigger supermarkets. Experts from across various disciplines have highlighted the importance of the environment where we work, live and play in having a massive impact on our health, including obesity-related factors. Retail grocery stores are considered to be pivotal sites for possible interventions to improve population health as they are the primary locations for food purchases

#### Key actions:

 Plan a feasibility study to test whether placing certain healthy foods at the checkout or at the front of the store will influence people's shopping and healthy eating behaviors

## Workshop with key stakeholders







A stakeholder workshop was held in March 2023. The purpose of the workshop was to share the findings from the consultations and SAI action plans and get feedback. The workshop was interactive with a mix of presentations, group work and team building exercises. It was well attended by stakeholders from across the NHS, council, voluntary sector and residents.

### 2021/2022 - Total number of referrals received was = 1198 2022/2023 - 727 (figure only cover

Q1,Q2 and Q3)

# Adult Weight Management Service: success stories



#### Case Study 1:

Weight Before: 113.8 kg

Weight After: 104.4kg

Weight Lost: 9kg

enlightening, I am now more aware of my behaviour concerning food habits. The environment was very friendly, with helpful staff who are very knowledgeable. I didn't feel pressure to lose weight and the class was very personal, we didn't know who lost weight or not. The focus was on what behaviour worked well for me each week. I love the keep fit part of the course. I have recommended a friend and now I drive her to her sessions where she can also improve her healthy eating lifestyle. Throughout the journey I have noticed my weight reducing slowly, I have gone down a dress size, I am also feeling healthier and fitter.

**Bracknell Residents** 

#### Case Study 2:

Weight Before: 95.3kg

Weight After: 85.9kg

Weight Lost: 9.4kg

Experience: I always wanted to improve my health and didn't know where to start. Since joining the programme, the changes to be life have been huge. I've seen improvements in both my diet and levels of exercise. The arthritis has improved allowing me to continue on my exercise journey. Having lost nearly 2 stone during the 12 weeks I genuinely feel like a different person, and I feel better in myself which is important. I was able to lose 5 inches of my waist dropping from a size 20 to a 16 across the 3 months of the programme which has been a massive confidence boost. Not only that but my mindset and relationship with food has improved as well as my knowledge around the importance and health benefits of a balance diet and exercise. I hope that moving forwards I can continue on this path of eating well and staying active to reach my goal of another 2 stone loss by the end of the year. To anyone unsure about joining the programme - just go for it! Bracknell Residents

## **CYP Weight Management Service**



- A free 12-week programme helping families to achieve a healthier lifestyle
- The service is multicomponent: healthy eating, physical activity, emotional wellbeing and parents' support
- Eligibility: CYP above 80th centile, aged 4 –
   12. Siblings can also attend
- Community venues including Everyone Active Leisure Centre and Bracknell Forest Open Learning Centre



## **CYP Weight Management Service**



- To support the programme, alive n kicking schools provides either 2-hour workshops or 6-week programmes in school settings.
- Healthy snacks and lunchbox workshops for parents after school and with HAF programme
- Schools selected through review of NCMP data
  - Fox Hill primary
  - Sandy Lane
  - The Pines School
  - Binfield Primary
  - Winkfield St Mary's C of E Primary
  - Jennets Park
  - St Joseph's Catholic Primary
  - College Town Primary
  - Holly Spring Primary

#### **Teach quotes**

"the sessions and booklets are brilliant and have great content. It matches the year 4 curriculum perfectly (PHSE – Healthy Living and Science)" Fox Hill Primary Children's quotes about what they learnt

"not to eat lots of sugary food",
"to make sure to make a healthy
packed lunch"
"continue with the fun activities
and exercises we learnt with
Everyone Health".





## Physical Activity Programme



 Public health deliver a range of community fitness classes to support residents keep fit and stay active. This includes Tai Chi, strength and balance (Fit for All), and wellbeing walks. We are currently putting together a plan to expand our offer to reach more wards in **Bracknell Forest** 



### Strength and balance Fitforall/Tai Chi Outcome

#### **Winter Wellness Tai Chi Classes**

Since January 2023 - December 2023:

- 98 Tai Chi classes were delivered in Bracknell
- 50 classes were delivered at Time Square
- 48 classes were delivered at the Library/KL dance studio
- Total attendees 1543

#### **FitforAll Classes**

Since January 2023- December 2023:

- Total number attended Great holland venue 756
- Total number attended New Priestwood venue 936
- Total number attended Owlsmoore venue 720
- Total estimated attendees 2,412
- Total number of classes delivered 138

## Physical Activity: Walks for Wellbeing

- Walks for Wellbeing is led by Sustrans
- The walk is part of Public Health plans to increase physical activity and improve years lived with good health.
- Walk covers:
  - Birch Hill, South Hill Park
  - Martins Heron, Lily Hill Park
  - Warfield / Priestwood, Cabbage Hill
  - Crowthorne, Buckler's Forest
  - Bracknell town centre, The Parks
  - Binfield, Popes Meadow
  - Jennett's Park, Peacock Meadow

Full details on each location and timings can be found on the <a href="Public Health Portal">Public Health Portal</a>.



Bracknell Forest Council

## Walks for Wellbeing: success stories

#### Bracknell Forest Council

#### Since January 2023-February 2024:

- Total number of walks delivered so far is 263
- Total individuals attended so far is 161
- Total miles walked 2812.6 km

#### Case Study 1:

"So happy to have found you now, You are so friendly & knowledgeable, Thank you so much, See you soon for more walks, Just letting you know you're making a big difference to people's lives, Thanks again."

**Bracknell Residents - Walk attendee** 

#### Case Study 2:

"Thank you so much for letting me know that J attended the walk yesterday, I am really pleased that she has found a walking group that she feels comfortable with. Thanks again."

**Social Prescriber** 

## Health and Wellbeing Physical Activity service

Everyone Active offers a health and wellbeing physical activity service for people with a long-term health conditions that would like support increasing their physical activity

Sessions are supported by a health and wellbeing physical activity coach who specialises in long term health conditions.

Those in receipt of 9 different benefits will receive the service free of charge, those who do not meet the criteria will pay a subsidised rate each month.

Public Health fund this project

Public Health team currently working with London South bank university to conduct a system mapping of physical activity locally and an evaluation of the health and wellbeing service, report due in March 2024.



BRACKNELL LEISURE CENTRE HEALTH & WELLBEING PHYSICAL ACTIVITY SERVICE

# PUT "YOU" FIRST... SHAPE THE ACTIVITY AND SUPPORT "YOU" NEED

Those in receipt of the below get the service free for 6 months:

- Income Support
- Job Seekers Allowance
- Pension Credit
- Housing benefit
- Universal Credit
- Council Tax Benefit
- Employment Support Allowance
- Disability Allowance

Those not in receipt of any listed exemptions will be able to access three 1-2-1 sessions FREE and then will pay a discounted rate of £29.98 per month at Bracknell Leisure Centre.

Ask your GP, Social Prescriber, Health Care Professional, Children Services, School Nurses, Adult Services, Midwife & various community partners today for a referral, or refer yourself by heading to the link below:

https://rb.gy/hq6v6

PUTTING EVERYONE IN CONTROL OF THEIR HEALTH

Bracknell Leisure Centre Bagshot Road, Bracknell, RG12 9SE





knell

### Mums and Babies

Everyone Active ran special pre- and postnatal sessions to help benefit pregnant people or those with new-borns looking to get back into safe exercise

#### Programmes included were

- Pregnancy yoga
- Baby massage
- Mum & baby fitness
- Mum & baby pilates

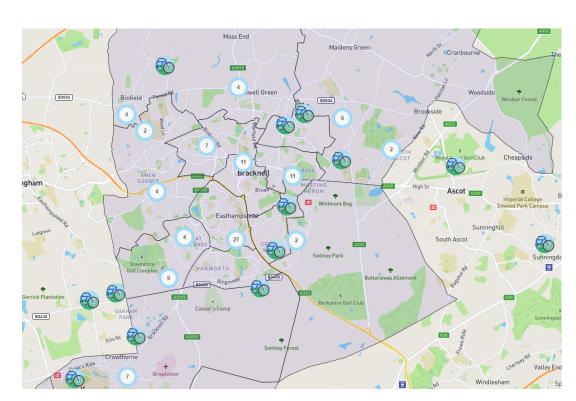




# Mapping physical activity opportunities in the borough



- The 'My Community Map' programme aims to map local assets that help to promote wellbeing
- Platform supports professionals and residents to easily find information on local activities, clubs, societies and groups
- Get active category, 137 physical activity opportunities mapped
- Activities mapped include everything from local walking groups, tug of war, football groups, bowling groups, Scottish dancing, yoga, tai chi and more.



### **Eco Rewards**



- Eco Rewards offers rewards and incentives for schools, businesses and communities for active travel choices.
- Walking, cycling and green travel can be reported using an app or by scanning QR codes across the borough.
- League tables, prize draws, medals and carbon savings calculator help to motivate those participating.



## Next steps



# Progress to phase 5 of the whole system approach to obesity

 Managing the system network and implementing the four strategic actions Reducing harm from tobacco - update Health and Wellbeing Board 14<sup>th</sup> March 2024



Priority 5 Increase years lived with good health and happiness: Focus on smoking and tobacco control Priority 2: Improve lives and health of people living with mental illness: Focus on reducing smoking related inequalities

### Content

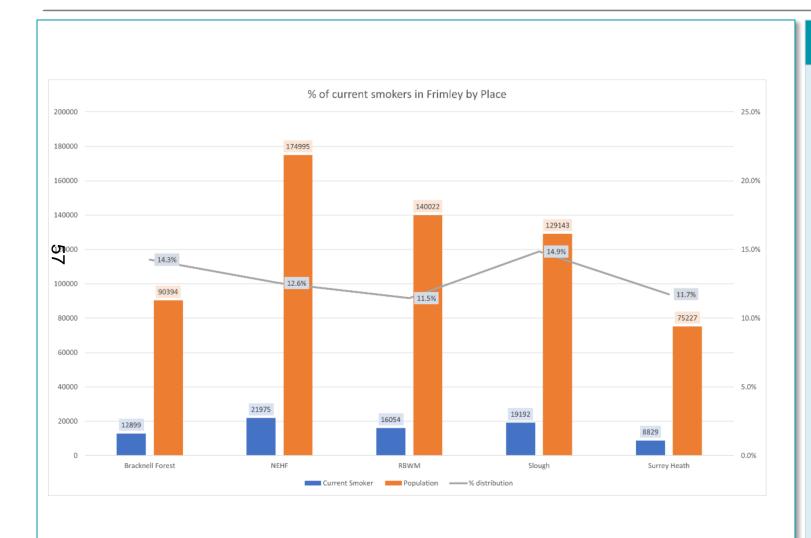
Bracknell Forest Council

- Current estimated prevalence of cigarette smoking and other tobacco products in Bracknell Forest
- Vaping use and abuse
- Vaping in young people –Local insights
- Support for stop vaping
- Support for stop smoking
- Tobacco Control Tackling the wider determinants of tobacco use



#### Place Breakdown – Current smoker in Frimley





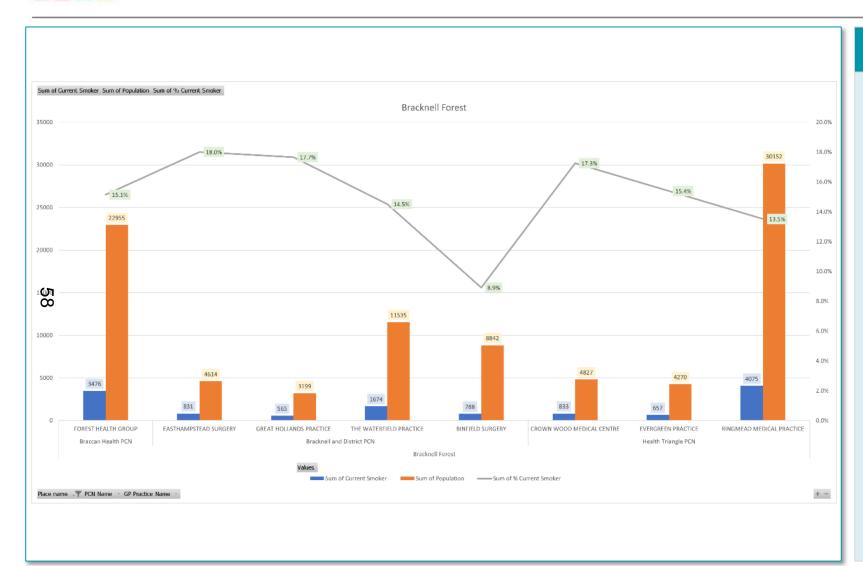
#### **Key insights**

- This chart shows the percentage of the current smokers in Frimley by Place.
- The current smoker cohort is filtered by Age 18+, excluding patients who have registered on palliative care, or patients who have opted out of secondary uses of their data.
- The population is filtered by Age 18+, excluding patients who have opted out of secondary uses of their data.
- Bracknell Forest has an overall smoking prevalence of 14.3%.
- The North East Hampshire and Farnham (NEHF) region has an overall smoking prevalence of 12.6%.
- The Royal Borough of Windsor and Maidenhead (RBWM) has an overall smoking prevalence of 11.5%.
- Slough has an overall smoking prevalence of 14.9%.
- Surrey Heath has an overall smoking prevalence of 11.7%.



### Place Breakdown – Bracknell Forest





#### **Key insights**

- This chart shows the distribution of the Current smoking cohort in Bracknell Forest per PCN per practice. This cohort is filtered by Age 18+, excluding patients who have registered on palliative care, or patients who have opted out of secondary uses of their data.
- Bracknell Forest has an overall smoking prevalence of 14.3%. Braccan Health PCN, Forest Health Group, and Health Triangle PCN exhibit notable smoking prevalences at 15.1% and 14.2%, respectively.
- Easthampstead Surgery and Great Hollands Practice have higher prevalence rates at 18.0% and 17.7%, respectively, while Binfield Surgery has a lower prevalence at 8.9%.

## Inequalities in Smoking Prevalence



Indicator	Period	Bracknell F			Region England		England		
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best
Smoking in pregnancy									
Smoking in early pregnancy	2018/19	-	-	-	-	-	-		
Smoking status at time of delivery New data	2022/23	-	65	6.7%	8.1%	8.8%	19.4%	C	3.4%
Routine and manual occupations									
Smoking prevalence in adults in routine and manual occupations (18-64) - current smokers (APS) New data	2022	-	-	38.1%	22.7%	22.5%	38.1%		
Odds of current smoking (self-reported) among adults aged 18-64 with a routine and manual occupation (APS) New data	2022	-	-	5.88	2.42	2.24	8.60		0.47
Mental health									
Smoking prevalence in adults with a long term mental health condition (18+) - current smokers (GPPS) New data	2022/23	-	-	26.1%	23.8%	25.1%	43.6%	q	15.3%
Odds of current smoking (self-reported) among adults aged 18+ diagnosed with a long-term mental health condition New data	2022/23	-	-	3.0	2.6	2.4	6.1		1.2
Smoking prevalence in adults with anxiety or depression (18+) - current smokers (GPPS)	2016/17	-	-	13.6%	24.3%	25.8%	36.3%		0
Smoking prevalence in adults (18+) with serious mental illness (SMI)	2014/15	-	253	37.6%	38.5%*	40.5%	52.3%		)
Substance misuse									
Smoking prevalence in adults (18+) admitted to treatment for substance misuse (NDTMS) - all opiates	2019/20		36	69.2%	69.9%	70.2%	90.9%	Image: Control of the	
Smoking prevalence in adults (18+) admitted to treatment for substance misuse (NDTMS) - alcohol & non-opiates			26	70.3%	67.6%	64.6%	92.4%	0	
Smoking prevalence in adults (18+) admitted to treatment for substance misuse (NDTMS) - non-opiates			23	63.9%	62.2%	62.0%	91.2%	O	
Smoking prevalence in adults (18+) admitted to treatment for substance misuse (NDTMS) - alcohol	2019/20	-	40	51.9%	44.2%	43.9%	63.6%		

# National evidence on other forms of tobacco use



- Increasing trend (non-linear) in exclusive use of non-cigarette tobacco smoking among adults England from 151,200 to 772,800. There was a step change in increase from 2020. 1
- Groups with higher overall use –younger adults, men, non-binary people, minority ethnic groups and current vapers
- The use of vapes among 11-18 year old has doubled from 2021 to 2022 2
  - 11-15 year old from 2.2% to 4%
  - 16-17 year old from 5.9% to 14.1%
  - 18 year old from 9.6% to 20.1%
- Shisha (Water pipes)Among general British population it is 1%, in young adults (18-24 year old) 2% and 7% in Asian/Asian British.
- Oral (smokeless) tobacco use is common among South East Asian Community. The risk of oral cancer is high with use of oral tobacco

<sup>1.</sup> S Jackson Nicotine & Tobacco Research, ntae021, https://doi.org/10.1093/ntr/ntae021

<sup>2.</sup> ASH (2022) Use of e-cigarettes (vapes) among young people in Great Britain

# Local actions in response to vaping in young people



- Developed vaping policy guidance and distributed to all schools
- Letter and information for parents / carers on vaping and risks of illegal vapes.
- Resources for schools distributed new PSHE resources on vaping
- Consultation with Designated Safeguarding Leads, School Nurses and Young Health Champions.
- We have worked in collaboration with PPP on training for teachers, school nurses and professionals who work with young people provided by the National Centre Smoking Cessation Training.
- Data capture via Oxwell schools health survey on youth vaping behaviour locally aligned with national survey by ASH.
- Youth vaping insight project exploratory research with young people and parents on their views and experiences of vaping.

# Local insights from exploratory research about vaping



Based on focus groups with 65 young people(vapers and non vapers) and parents of children that vape four themes

- Capability (understanding and awareness)
- Easy access to vapes (opportunity)
- Social aspects of vaping (opportunity)
- Motivation

Vaping is an addiction

There is limited evidence on health impacts of vaping - young people often do not understand why they should not be vaping, or are not worried.

Young people who vape don't know how to stop.

## **Capability**

Yeah, after the nic rush wears off, they get very paranoid and yeah. So then they take another puff. It wears off and the cycle just keeps going until it runs out [...] Although I've seen some people when their vape runs out, they get really annoyed, paranoid and anxious.

If I make them stop vaping, that's just going to increase their stress levels and make them more anxious and cause other issues. So I'm just gonna let them be for now because they've got GCSEs, they've got this, they've got that.

## **Opportunity (Physical)**

Vapes are easy to access, they can be bought without ID, stolen, or picked up off the floor.

Vapes are cheap to buy (but vaping costs add up over time with addiction).

Many feel that a banned will not prevent access.

It is easy to hide vaping at school/home.

Limiting access to vapes may work for some.

# **Opportunity (Physical)**

I find if you give kids something to do.

A hobby a sports club, an after-school club, anything that keeps them preoccupied on a regular basis that might help prevent like kids vaping, especially if there's like adult supervision.

- parent

My youngest, you know, she can name a number of places that she could go to and get them, and they wouldn't be questioned.

parent

At my school everyone just, like, leaves the lesson to go vape in toilet. Sleeves, pockets, go to toilet, hides behind corners.

## **Opportunity (Social)**

Young people often start vaping to look 'cool' or fit in with peers.

Parents and older siblings often model or encourage vaping.

Young people often start through sharing vapes within social groups at school/parties.

Less stigma around vaping compared to smoking, vaping is more visible.

Social media for young people presents vapes as appealing.

# **Opportunity (Social)**

Almost, like, a lot
of parents smoke so
for children almost
to vape, it's, like, natural.
It's, like, it's the starting
point.

parent

There's a Tik Tok trend where you breathe out smoke at the point of a sound or point of a beat, and that would then want people to want to do that. So, then they start vaping to be able to do that.

Yeah, I feel like that's what usually happens. You start vaping with your friends, like, your friend's vaping, and you're like, "oh my God, let me have a puff". And then you start vaping.

- Young person

## **Motivation**

Young believe that vaping is 'cool'.

Vape flavours and colours are attractive.

Some vape because of boredom.

Some vape as a coping mechanism when depressed, anxious or stressed.

Young people who vape often, do not want to stop because they enjoy it.

Some who don't vape, think of vaping as 'cringe' or embarrassing.

## **Motivation**

I don't want anything [to stop vaping]... for me it's not that big of a concern. I don't think many people do want to quit anyway,

but mostly because most people in [school] think it's cool to smoke and stuff like that.

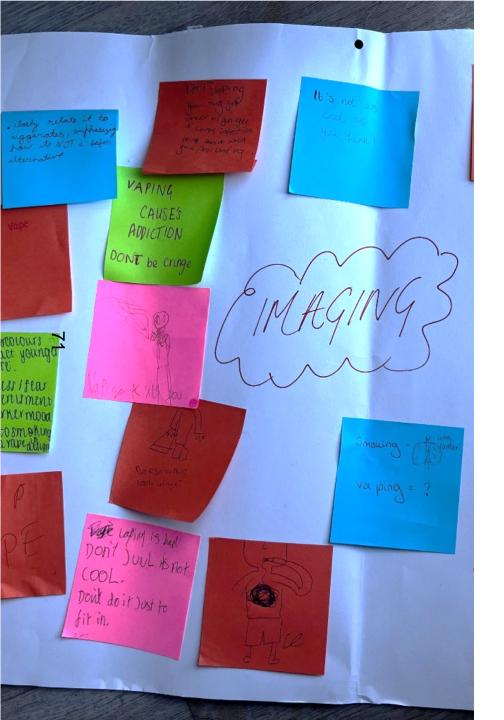
- Young person

I had this conversation with my daughter about the education on vapes and she said to me, 'I don't care'. Like if I you know, I'm not worried now. I'm 14/15. I'm not worried now if I'm gonna have something wrong with me in 20 year's time.

At least amongst my group of friends, we always think that like vaping's a bit embarrassing.

- parent

- Young person



# **Example**messaging

"Cancer has never tasted better"

"Vaping causes addiction. Don't be cringe"

"Do you know the chemicals in vapes?"

"Vaping is an ugly habit. Don't waste money"

# Stop Smoking Service support for young people who want to quit vaping -pilot



- To provide a tailored service based on the needs of the users.
- To set up comms channels via leaflets posters and social media and targeted campaigns
- To evaluate the service and provide a report
- Set up referral pathways
- To provide face to face, online and telephone support based on user needs.
- To set up fields on data base to capture outcomes for those receiving support.
- To provide single NRT/milligram reduction to assist with reduction based on user level of MG used where appropriate.
- Create a guide that can be distributed to schools.

## Focus on inequalities in smoking



### **Target Groups**

### People in routine and manual occupations

One-in-two service users (50.8%, n=595) were in routine and manual occupations compared with 24.3% of Bracknell Forest residents in the 2021 census.

### People with mental health illness

On-in-five (19.9%, n=233) service users had a mental health problem, this includes those with depression, anxiety and severe mental illness. In comparison to the stop smoking service population, the estimated prevalence of depression and severe mental illness in the Bracknell Forest GP-registered population in 2022/23 were 15.1% (95% CI 14.9-15.3) ref and 0.69% (95% CI 0.65-0.74) r

## Next steps



- Volunteers from workshop to form small working group to continue with recommendations and actions for different audiences
- Approaches will form part of wider tobacco control for young people and adults – smoke free generation.
- Creative social marketing campaign Young Health Champions.
- A local partnership approach with representatives from key departments and organisations.
- ADPH report on vaping provides local context and data.
- Any questions...?