

Equalities Monitoring – Services

I - Public Health

Annual Report - 2018-19



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1. Introduction

The equality duty is a general duty on public bodies and others that carry out public functions. It ensures that public bodies consider the needs of all individuals in their day to day work in shaping policy, in delivering services, and in relation to their own employees.

The council has a general duty under the Equality Act to pay due regard to three key equality objectives:

1. Eliminate discrimination, harassment and victimisation
2. Advance equality of opportunity between those who share relevant protected characteristics and those who do not
3. Foster good relations between those who share a relevant protected characteristic and those who do not

The protected characteristics covered by the equality duty are:



The health inequalities duty (Health and Social Care Act 2012)¹

The Health and Social Care Act 2012 introduced specific legal duties on health inequalities for the Secretary of State for Health which Public Health England (PHE) must meet on his behalf. The duty requires due regard to the need to reduce inequalities between the people of England with respect to the benefits that they can obtain from the health service. It applies to all PHE public health functions, not just healthcare focused work. The two legal duties are different but have synergies. For example, guidance on the Equality Act 2010 explains that having due regard to the need to advance equality of opportunity involves considering whether there is a need to tackle inequalities suffered by people who share a relevant protected characteristic. PHE has developed a separate Framework for Action on Health Inequalities, which aims to ensure that PHE supports the health system to reduce health inequalities and fulfils its legal duties related to health inequalities. The Act also brought in changes for local authorities on public health functions.

This report is therefore focused in two ways: it details the work we have done relating to equality during that time, as well as looking at some of the health inequities that we have addressed, thus illustrating how we are addressing the above objectives. We have made progress over the last year and are now investing more time and resources in looking at how we can improve our work on equality.

This report also highlights some of the work we were involved in that promotes equality more widely. It shows how our teams and services have worked with people from protected characteristics groups (those characteristics protected by law – see page 1) to better understand their needs and improve the services we provide for them. The report also provides an account of where we are as a Public Health service and recognises that we still have some way to go in improving our practice relating to equality, both now and in the future.

Public Health in Bracknell Forest has been committed in its general duty to impact policies practices and decisions on people with different protected characteristics – both internal and external to the local authority, by:

- Adopting and implementing a multi-agency system approach to achieving significant improvements in our public's health
- Working across sectors to improve the health of our children in their early years
- Developing and supporting primary and community care services to improve the public's health
- Supporting the NHS to improve outcomes for people using services
- Influencing policy to protect and improve health and reduce inequalities
- Protecting the public and continuously improving the quality, safety and effectiveness of the services we deliver
- Developing the Organisation through implementation of 'Health in All Policies'

The activities of the Public Health service through 2018 to 2019 have been focused on ensuring that equality considerations are built into any processes, practices and ways of working and that they are implemented as fairly and transparently as possible and kept under continuous review. The health summary below provides an overview of the health

¹ Health & Social Care Act 2102, <http://www.legislation.gov.uk/ukpga/2012/7/contents>

status of residents of Bracknell Forest across the life course and has thus assisted in the planning of services, decision making, setting service priorities and delivery of services.

1.1 Health in summary²

The health of people in Bracknell Forest is generally better than the England average. Bracknell Forest is one of the 20% least deprived districts/unitary authorities in England, however 9.1% (2,045) of children live in low-income families. Life expectancy for both men and women is higher than the England average.

Health inequalities

Life expectancy is 7.4 years lower for men and 2.6 years lower for women in the most deprived areas of Bracknell Forest than those in the least deprived areas.

Child health

In Year 6, 17.9% (234) of children are classified as obese, better than the average for England. The rate for alcohol-specific hospital admissions among those under 18 is 25*. This represents 7 admissions per year. Levels of teenage pregnancy and smoking in pregnancy are better than the England average.

Adult health

The rate for alcohol-related harm hospital admissions is 464*, better than the average for England. This represents 513 admissions per year. The rate for self-harm hospital admissions is 195. This represents 232 admissions per year. Estimated levels of smoking prevalence in adults (aged 18+), smoking prevalence (in routine and manual occupations) and physically active adults (aged 19+) are better than the England average. The rates of new sexually transmitted infections killed and seriously injured on roads and new cases of tuberculosis are better than the England average. The rates of statutory homelessness, violent crime (hospital admissions for violence), under 75 mortality rates from cardiovascular diseases and employment (aged 16-64) are better than the England average.

1.2 Public Health Information

In 2018, Public Health continued to strengthen focus on embedding and promoting equality in our programmes and functions.

- Joint Strategic Needs Assessment/Berkshire Observatory
The process of reviewing the Joint Strategic Needs Assessment (JSNA) for Bracknell Forest is now underway and the first stage of this process was the creation of the Berkshire Observatory which is a data suite that hosts all publicly available data relating to Bracknell Forest. The data relates to inequalities such as life expectancy,

² Bracknell Forest Local Authority Health Profile 2019, [https://fingertips.phe.org.uk/static-reports/health-profiles/2019/e06000036.html?area-name=bracknell forest](https://fingertips.phe.org.uk/static-reports/health-profiles/2019/e06000036.html?area-name=bracknell%20forest)

index of multiple deprivation, poverty, race and religion. The data will be used to inform strategic decisions at a higher level, such as what focus should be put on Public Health objectives and where more attention may be required in future.

The Berkshire Observatory

1.3 Healthcare Public Health/ Wider Determinants

Public Health provides specialist Public Health advice as required to NHS commissioners to ensure that joint strategic needs assessments reflect the needs of the whole population by:

- Supporting the development of commissioning strategies that meet the needs of vulnerable groups.
- Supporting the development of evidence-based care pathways and service specifications, contribute to the advice given regarding evidence-based prioritisation policies.
- Produce as necessary health needs audits and health equity audits.

1.4 Equity Impact Assessments (EIAs)

Public Health have conducted several EIAs to examine the main functions and policies of services that have been developed or changed, to see whether they have the potential to affect people differently. They have been undertaken to identify and address existing or potential inequalities, resulting from the policy and practice development. EIAs that have been completed in the time period are:

- Smoking Cessation
- Social Prescribing
- Fit for All
- Community Services redevelopment

2. Health Improvement – Working Together Across the Life course

During 2018–2019 we commissioned a range of services and programmes and worked with different communities across Bracknell to improve their experiences of the services we provide. The following sections highlight some of the work we have been involved with.

Public Health service mission is to increase healthy life expectancy and narrow health inequalities by ensuring disadvantaged groups receive the attention they need; promoting wellbeing and preventing avoidable early death, disability and ill health through informing and harnessing collective action, transforming services and changing social norms. Examples of services and programmes we commissioned or provided are as follows:

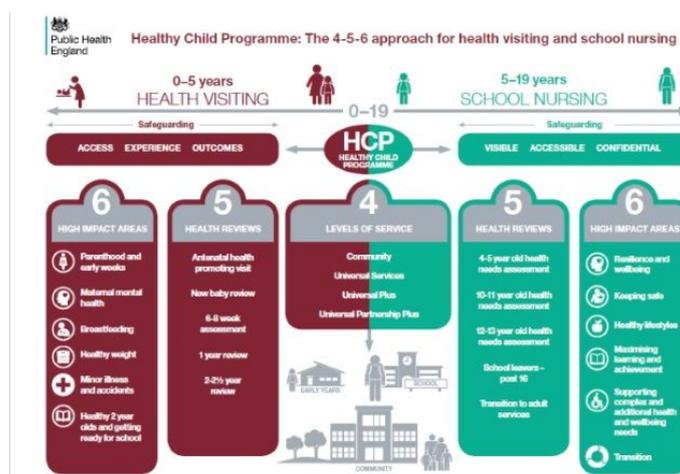
2.1 Commissioned Services and Supporting Programmes

Bracknell Forest Public Health endeavour to ensure that the procurement of goods, services and facilities is undertaken in line with the council's equality considerations, and as such we consider equality and fairness issues in all our work with partners, stakeholders, voluntary sector organisations, GPs and health and care professionals.

We ensure that businesses from diverse communities have an equal opportunity of competing for collaborative procurement contracts to supply goods and services, particularly in the development of our Public Health programmes, specifications and contracts and in the planning of services locally.

2.2 Healthy Child Programme

The Healthy Child Programme (HCP) 0-19 is a universal public health programme consisting of the health visiting service (ages 0-5), and the school health service (ages 5-19).



Bracknell Forest Council has had responsibility for commissioning the HCP since the transfer of its commissioning responsibilities from the NHS in 2013 for the school health service followed in 2015 by the health visiting service.

The health visiting service which spans from pregnancy and continues throughout the early years is a universal service offered to children aged 5 and under and their families. The core elements include health and development reviews, screening, immunisations, social and emotional development, support for parenting and health promotion. It delivers the five mandated contacts and an enhanced offer to those children and families who require additional support.

Health visiting teams deliver services in a range of settings to maximise reach into communities, for example, in the home, in children's centres, in the community and general practices. Health Visitors understand their local population and communities, including their

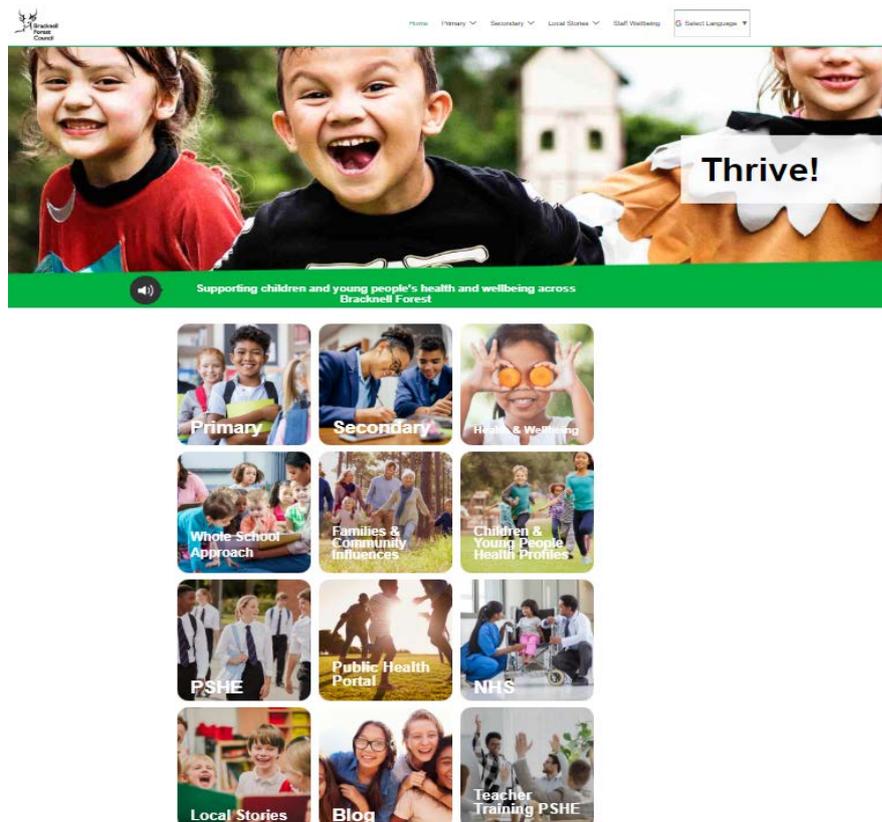
racial make-up and lifestyle patterns, such as travelling communities and in addition, include support for those with a special educational need or disability. They have a key role to play in identifying need and providing additional care programmes and ongoing support.

Health visitors are well placed in the early identification referral and management of mental health issues in respect of children and parents.

The school health service is a universal service which works in partnership with children, young people and their families in a range of settings including schools and community settings to ensure their physical and mental health needs are supported. An enhanced support is offered for those most in need working closely with other services.

Failure to meet the health needs of children and young people can lead to problems or difficulties in the future and may have a profound impact on their adult health. Thus, the principle of 'early help' is crucial to identifying need and establishing appropriate support to avoid crisis. The health visiting services is crucial to delivering the 'early help' offer using a range of tools and resources. By using local tools such as the Joint Strategic Needs Assessment, the health visiting, and school health teams are encouraged to adapt services so that a universal offer is available to all parts of the community they serve with an understanding of cultural attitudes to family health. This may involve working with local community groups and providing services in appropriate venues or localities.

2.2 The Thrive! Website



Bracknell Forest Public Health host THRIVE which will be launched at the end of November 2019. This website brings together information on children and young people's physical, mental and social health and wellbeing. It is a place for teachers, parents and carers to

access resources, information and support on health and wellbeing and covers a variety of topics, as outlined in the new statutory Guidance around Relationships Education, Relationships and Sex Education and Health Education.

Following accessibility and equalities testing, two widgets were added to improve accessibility to those with disabilities and English as a Second Language (ESL). This includes a translator, allowing users to select different languages, and a voice speaker, allowing users to select for the content to be read aloud. This learning will be implemented into our Public Health Portal refresh in 2020.

2.3 Kooth

Kooth is an online service that provides mental health advice and counselling for young people ages 11 – 19 years. Data is collected and monitored on a range of protected characteristics including age, gender, race and sexual orientation. The number of new registrations who define themselves as “gender fluid” and “A gender” continues to increase, suggesting that Kooth offers a source of support for young people from minority genders. An increase has been seen in those submitting online messages over chat sessions. Feedback notes this is particularly helpful to those for whom English is their second language as it allows for young people to take their time in writing a message to a counsellor. This option has been promoted more within school assemblies through the integration and participation worker. The service is currently being recommissioned and as part of that process we are working with CCG to complete an EIA.

2.4 Young Health Champions

This is a peer education programme that aims to give young people the skills, knowledge and confidence to act as peer educators, increasing awareness of healthy lifestyle and encouraging involvement in activities to promote positive physical and emotional wellbeing.

As part of this work the young people delivered a peer message on World Mental Health day, helping to support a school environment which normalises the conversation about mental health. They also received Youth Mental Health First Aid training, giving them an in depth understanding of young people’s mental health and the confidence to reassure and support a young person in distress.

Young Health Champions – what young people are telling us about mental health



2.6 NHS Health Checks

This is a mandatory programme for adults in England between the ages of 40 and 74. It is aimed at prevention of heart disease, stroke, diabetes, kidney disease and dementia. Most health checks are delivered by local GP's. The invite sent from practices aims to ensure equitable access. Future planning to increase uptake of NHS Health Check will be to target specific BAME groups.

2.7 Obesity

The current weight management programme has had a full EIA. All protected characteristics groupings can access this service via a range of referral routes. This service provides good access across all sections of our community, especially via referral routes such as Children's Centres and community groups.

2.8 Physical Activity

The Fit for All programme which is subsidised by Public Health has continued in 2019. There are currently 8 classes running across Bracknell Forest at a low-cost per session, with the first session free of charge in order to increase uptake and reduce barriers to trying out the class. Each class is followed by a 30-minute social, facilitated by the instructor, which encourages participants to engage and socialise with each other in a safe environment. In order to increase inclusivity in 2019, a new seated exercise class was launched which was aimed at those individuals who are wheelchair bound, or otherwise have mobility issues.



The poster features a purple header with the text 'Fit for All' in white, followed by the 'Bracknell Forest Health Improvement Programme' and 'Bracknell Forest Council' logos. Below the header, the title 'Seated Exercise' is written in large blue font. The central part of the poster is a purple rectangle containing ten white icons of a person sitting in a chair performing various exercises, arranged in two rows of five. At the bottom, the text 'Gentle movement in a supported & beginner friendly environment' is displayed in white and pink font.

2.9 Smoking Cessation

Our current in-house smoking cessation service has been in operation since April 2018 and is a telephone-based service which accepts referrals from any individual aged 18+ who lives or work in Bracknell Forest. Data that is collected to inform the service development includes gender, age, ethnicity, occupation, pregnancy status, mental health status and postcode. Reviews of this data have shown that there are gaps both in the current service delivery and the wider system working which need to be addressed. One example of this is the offering around supporting pregnant smokers to quit. Following this review, a smoking in pregnancy working group has been established across the Frimley ICS and is chaired by a Public Health representative from Bracknell Forest and includes representation from the local maternity system workstream, smoking cessation services and Public Health teams. The aims of this group are to improve the support available for pregnant smokers wishing to quit and combat the “postcode lottery” which often comes from available services across a wider geographical footprint.

2.10 Making Every Contact Count

This is a brief intervention skills training programme that enables participants through reflection to look at their work practices. In addition, participants are also introduced to the wider determinants of health and how these factors may also contribute to health inequalities for the clients they support.

2.11 Social Prescribing

The Social Prescribing Service is available to any Bracknell Forest resident aged 18 or over. We collect data on gender and age and have recently added ethnic group to the data collected. The service has been working with a number of communities to ensure that individuals can access the plethora of services, activities and resources available in the community across Bracknell Forest, with the aim of reducing health inequalities. In addition, the Social Prescribers, work within communities to identify those individuals that may be socially isolated, lonely or experiencing mental ill-health.

2.12 Digital and Information Platforms

2.12.1 Community Kiosks

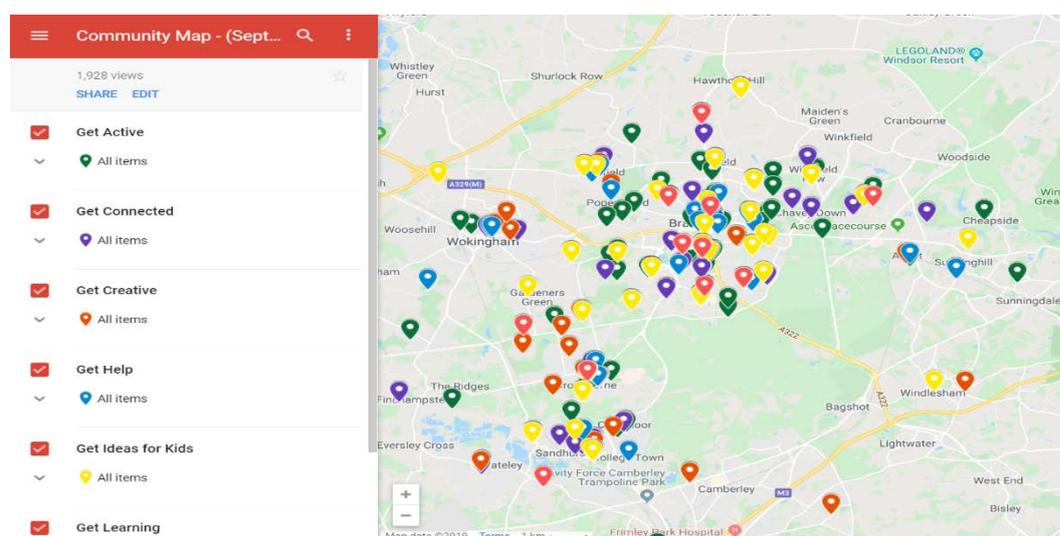
Four interactive community kiosks were installed throughout the borough in early 2019, and data estimates that these have been used over 1,000 times since installation. They have been placed at 9 different locations in 2019, with a further 8 planned for 2020. The aim of the community kiosks is to enable those individuals which do not have internet access at home, or who are not confident using the internet, to access the information out in the community. The kiosks were specifically designed to be used by those with long-term disabilities or health conditions, such as being wheelchair bound, visually impaired or with learning difficulties. To ensure this was the case, the kiosks were designed following a user-feedback forum to gain suggestions and comments around how best to meet the needs of these target groups.

One of the community kiosks in Shop mobility:



2.12.2 Public Health Community Mapping

The Bracknell Forest Council community map, hosted on the Public Health portal, remains an invaluable method for all residents in Bracknell Forest to research and identify community support groups to enable them to meet individuals with similar beliefs, circumstances and life experience. The map currently contains over 450 groups and activities which cater for individuals with protected characteristics. Specific examples of this include Berkshire Gay link, Berkshire Stags Visually Impaired Cricket Club, Pregnancy Yoga, Red Diamond, Ascot Area Alzheimer's and Mental Health Carers' Support Group. When adding a new community group to the map, a member of the Public Health Team discusses the group details with the leader and ensures that the group is open to all individuals. If there are 'select' criteria (e.g. only for mum's) this information is advertised on the community map to ensure that all individuals are aware.



2.12.3 Communication via digital platforms

Public Health campaigns and services are promoted online through means such as Facebook, Twitter, Instagram and our Public Health Portal. We have had 28,130 individual users use the portal since it was created and 90,496-page views. Facebook remains the

avenue in which we get most engagement from the public. The page currently has 2775 likes and is used for more targeted campaigns as you can select an audience you wish to target (such as an age range or postcodes). For example, campaigns include flu and over 65s, and an awareness raising campaign aimed at veterans, encouraging them find out more from their GPs about what services are available to them. Though our online promotion is positive, we recognise the need to reach the public through means other than digital solutions which we will be further exploring.

3. Health Protection

Provides information and intelligence to support local public health services and support the public in making healthier choices.

3.1 Immunisations and Vaccinations

Vaccination as a Public Health intervention has had a positive impact on health and wellbeing that is almost unprecedented, drastically reducing the global burden of infectious disease.

Although vaccination is most often associated with childhood, vaccination at other life course stages is important for good health. Vaccinations during working-age adulthood and older age are becoming increasingly important as the UK population ages. Vaccinating across the life course – not just in childhood – is becoming increasingly important as the population of Bracknell ages rapidly, and different issues are likely to affect uptake at each life course stage.

Thus, supporting healthy ageing is high on the agenda for public health and vaccinations are a crucial tool, as ageing increases vulnerability to infectious disease due to the natural decline of immune function and the increase of other health conditions which can make it harder to fight off disease. In addition, low uptake is seen in people from lower socio-economic groups who tend to have a disproportionately higher prevalence of chronic conditions compared to the general population. Since those in clinical risk groups have lower overall uptake, then those who are socioeconomically disadvantaged may also have a disproportionately low uptake.

3.2 Influenza

Annual Health Protection Planning work related to influenza, has aimed to work with higher risk groups/targeted population. Over 65s, Children, People with Learning disabilities, Carers. We are currently developing a working relationship with the local Polish community via social media and shops to utilise PHE translated materials, related to increasing uptake of the flu vaccine.

3.3 Sexual Health

Local Sexual Health Programmes that are commissioned by Public Health have taken the following steps to ensure compliance with the Equality Act.

- Contract monitoring tools i.e. audit, monthly reporting, customer satisfaction surveys are used to ensure providers are meeting the needs of customers from all equality groups and that services are accessible to all groups.
- An expansion of existing sexual health services into community pharmacies to address access to Emergency Hormonal Contraception for young women.
- Promoting routine and regular HIV testing in most at risk populations (that is, men who have sex with men and black African communities) across the life course.

- Promoting access to STI self-testing pack that can be ordered online
- Promoting access to Pre-exposure prophylaxis (PrEP)
- Increasing sexual health outreach services to Children and Young People, vulnerable women and groups.
- Data relating to these activities includes uptake on the service as well as reactive results organised by ethnicity, gender (including transgender), sexual orientation, and age.

4. Summary

This report has highlighted some of the work the Public Health team are involved in that promotes equality more widely. It shows how the team and services have worked with people from protected characteristics groups (those characteristics protected by law) to better understand their needs and improve the services we provide for them.

We have made progress over the last year and recognise that there is still more to do to make sure the work and services we provide have positive benefits for the people who use them. The team are fully committed to investing more time and resources in looking at how we can improve our work on equality and will therefore be working to achieve the objectives below for 2019-2020.

4.1 Public Health Equality objectives 2019 -2020

Objective 1 People of all ages, including those who represent groups with protected characteristics, and use their insights to support and direct our work.

Objective 2: Communicate our messages in ways that everyone can access, including people with protected characteristics.

Objective 3: Make sure all our policies and decisions treat all groups of people fairly and include everyone.

Objective 4: Build a closer working relationship with other public sector partners to improve how we gather and analyse information.

Objective 5: Be recognised as a fair, inclusive and innovative employer.