

**TO: HEALTH AND WELL BEING BOARD  
17 SEPTEMBER 2014**

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## **PUBLIC HEALTH: REVIEW OF FIRST YEAR IN BRACKNELL FOREST COUNCIL**

**Director of Adult Social Care, Health and Housing  
Strategic Director of Public Health**

### **1 PURPOSE OF REPORT**

- 1.1 This paper provides an overview of Public Health work and performance across 2013/14.
- 1.2 The paper also summarises plans for Public Health work in 2014/15, outlining key themes and areas of for future development.

### **2 RECOMMENDATIONS**

**That the Health and Well Being Board:**

- 2.1 **NOTE** the report and presentation on Public Health performance in 2013/14.
- 2.2 **AGREE** the top level plans for Public Health in 2014/15

### **3 REASONS FOR RECOMMENDATION(S)**

- 3.1 2013/14 represented the first year in which Bracknell Forest Council had responsibility for Public Health work. Given the fact that Public Health work has involved officers from across the council it is important that the Health and Well Being Board is sighted on performance to date and plans for 2014/15.

### **4 ALTERNATIVE OPTIONS CONSIDERED**

- 4.1 None

### **5 SUPPORTING INFORMATION**

- 5.1 In England, responsibility for Public Health transferred from the NHS to local government on 1<sup>st</sup> April 2013. Since then, Public Health work has been delivered by a local team Public Health in Bracknell Forest Council working in collaboration with other council departments, the local Clinical Commissioning Group and the 'Shared' Public Health team
- 5.2 One overarching objective of the new team was to integrate Public Health work across the organisation, harnessing existing work and enhancing the contribution of the whole council to improved health and well-being outcomes.
- 5.3 Another top level objective was to develop and improve the performance of key health improvement services for which responsibility had transferred to the council. These

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included the Stop Smoking Service, the Health Check Programme, Weight Management Support and Sexual Health Services.

- 5.4 In addition to this Health Improvement function, the Public Health team were also set the objective of redeveloping the health 'intelligence and insight' programme centred on the Joint Strategic Needs Assessment.
- 5.5 At the end of 2013/14 the Public Health team were able to report on a number of key successes in relation to these objectives. Selected examples include:
  - 5.5.1 The Health Checks Programme had an uptake rate (74%) which was the highest in Berkshire. The improvement in delivery rate was also the highest in the county and surpassed 10% of the eligible population (the national target).
  - 5.5.2 The stop smoking quit success rate (70%) was one of the highest in the country and the number of successful quitters reached 763 people (105% of the target).
  - 5.5.3 A new weight management programme has been commissioned featuring an expanded system of referral aimed at maximising uptake. This has already led to a rise in new starters from an average of 5 per month to 20 per month.
  - 5.5.4 An innovative alcohol harm reduction campaign was run in collaboration with the National Charity 'Drinkaware' and local community pharmacies. The independent evaluation of the programme revealed significant and positive effects on alcohol related attitudes and behaviour. The project was selected for presentation by the Faculty of Public Health at their annual conference in Manchester (June 2014).
  - 5.5.5 A comprehensive review of sexual health services, including a health needs assessment, stakeholder consultation and financial analysis, has been completed. This has informed the recommissioning of sexual health services as well as a planned expansion of these services, including the introduction of a new targeted outreach programme.
  - 5.5.6 All 'intelligence and insight' projects have been successfully completed, including the redesign of the JSNA, the first ever comprehensive Public Health Survey conducted by a council. This programme has been highlighted as an example of best practice and will be featured at the national Public Health England Conference in Warwick (September 2014)
  - 5.5.7 The Public Health team has also invested in several work streams in other departments that were making significant contributions to health and well-being. These included programmes aimed at increasing sports participation among children and a service supporting people with learning disabilities to access leisure services. Aside from boosting the delivery of these programmes, the investment of Public Health funds enabled the release of monies in these other departments towards savings.
- 5.6 In all of these achievements, close working and collaboration with other council departments and / or the local Clinical Commissioning Group (CCG) has been fundamental. For example, the Health Checks programme included work with Human Resources on a new work-based initiative allowing employees to access Health Checks at work rather than having to make an appointment with their GP. Other collaborations included the 'Beat the Streets' physical activity programme in

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conjunction with Environment, Culture and Communities, and an intensive childhood obesity programme with Children, Young People and Learning.

5.7 Work is already underway to build on these achievements in 2014/15. The focus on integrated and collaborative working will be maintained in efforts to develop existing programmes of work and launch initiatives in new areas. Key plans include:

5.7.1 The tailoring of Health Improvement services to make them more accessible to 'priority groups', thus maximising their impact on health and well-being outcomes. For example, the Public Health team is working with Berkshire Healthcare Foundation Trust in the development of Stop Smoking Programmes tailored to the needs of people with mental health conditions, as well as working with the local CCG in a 'Stop Before Your Op' initiative aimed at increasing the number of people stopping smoking prior to elective surgery. Similarly, weight management programmes will be delivered that specifically address the needs of people with diabetes.

5.7.2 New initiatives will be delivered aimed at enhancing the well-being of young people. For example, in relation to Sexual Health, access to prescribing services via youth centres will be expanded, as well as the permanent funding of a sexual health outreach nurse. Additionally, in relation to mental health, a new online support and counselling service will be piloted with aim of alleviating mental health issues at an early stage and reducing the need for specialist mental health care further down the line. Finally, the transfer of responsibility of services for children aged 0 to 5 will present a range of new opportunities for public health development.

5.7.3 At the other end of the age range, a key priority will be on the prevention of falls related injuries among our older residents. Forming part of the council's Better Care Fund work, a multi level falls programme will significantly expand access to falls risk assessments and professional falls prevention advice. By doing so, the aim will be to reduce the number of emergency admissions due to falls, benefitting individuals and families as well as health and social care resources.

5.8 In summary, Bracknell Forest Council has used the first year of responsibility for Public Health to achieve high quality health improvement services while also innovating in a way that has captured regional and national attention. The council will build on this success in 2014/15 in a way that utilises its strong collaborative links with partners and continues the clear focus on positive outcomes and efficient delivery.

## **6 ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS**

### Borough Solicitor

6.1 The contents of this report are noted.

### Borough Treasurer

6.2 There are no direct financial implications within this report, for the Council.

Equalities Impact Assessment

- 6.3 The Public Health programmes described in this report are all specifically aimed at reducing health inequalities and expanding access to all groups in society.

Strategic Risk Management Issues

- 6.4 None

**7 CONSULTATION**

Principal Groups Consulted

- 7.1 Reviews of services (eg: sexual health) have involved a range of stakeholder groups including health care providers, commissioners and patient or public representatives.

Method of Consultation

- 7.2 Meetings, stakeholder events, consultation surveys.

Representations Received

- 7.3 None

Background Papers

Annex A: Presentation Slide Set

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