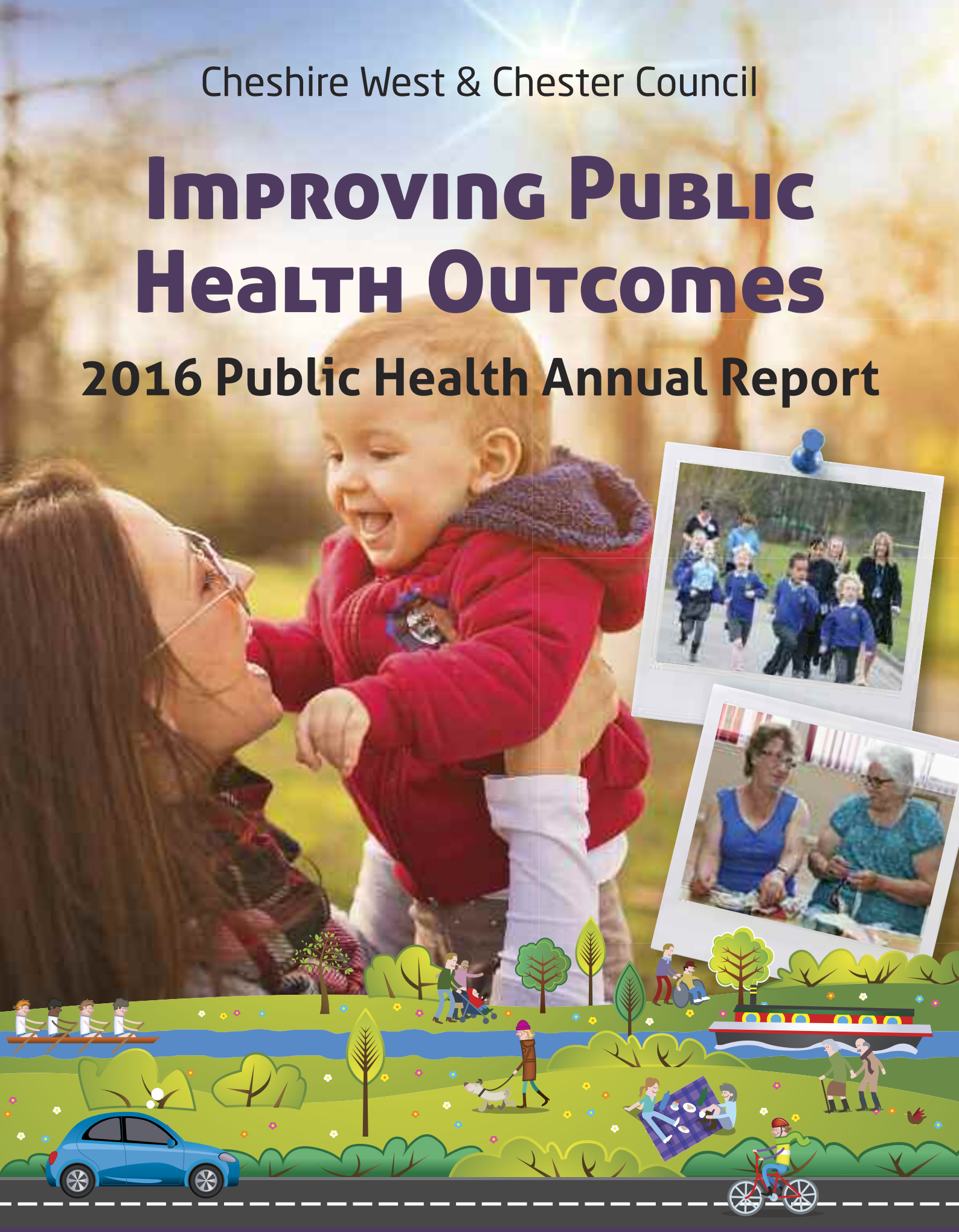
Cheshire West & Chester Council

Improving Public Health Outcomes

2016 Public Health Annual Report



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Cheshire West and Chester

Foreword

By Fiona Reynolds, Interim Director of Public Health

Welcome to the 2016 Public Health Annual Report.

This is my last report as Director of Public Health (interim) at Cheshire West and Chester Council and I am very proud of the work that has been undertaken to improve the health and wellbeing of residents and communities living within this Borough. We still have much to do – collectively as organisations and individually as people living and working here – to make a further difference to people's lives.

The report captures a year of work by the Public Health Team working in collaboration with other Teams and Directorates within the Council and in partnership with other agencies (in the statutory and voluntary sector) across Cheshire West and beyond.

Improving health and wellbeing is at the forefront of Cheshire West and Chester Council's Plan and this commitment is supported through the creation of ten priorities (and their action plans). These ten priorities are reflected in the structure of the 2016 Public Health Annual Report, so that readers can see how work within these outcomes contributes to supporting the public's health.

As ever, this report is presented as a magazine, providing a summary of the challenges that we have been working to address and case studies on some of the actions that we have undertaken. This report should be read with the Compendium of Statistics which provides detailed further information on the data.

My thanks for producing this report go to the individuals who submitted the reports and case studies, the Insight and Intelligence Team for their work on the Compendium and the editorial team: **Neil Boardman**, **Helen Bromley**, **Jenny Hampson**, **Samantha Sole** and **Helen Stott**, for compiling the finished result.

Fiona Reynolds

Fiona Reynolds
Interim Director of Public Health

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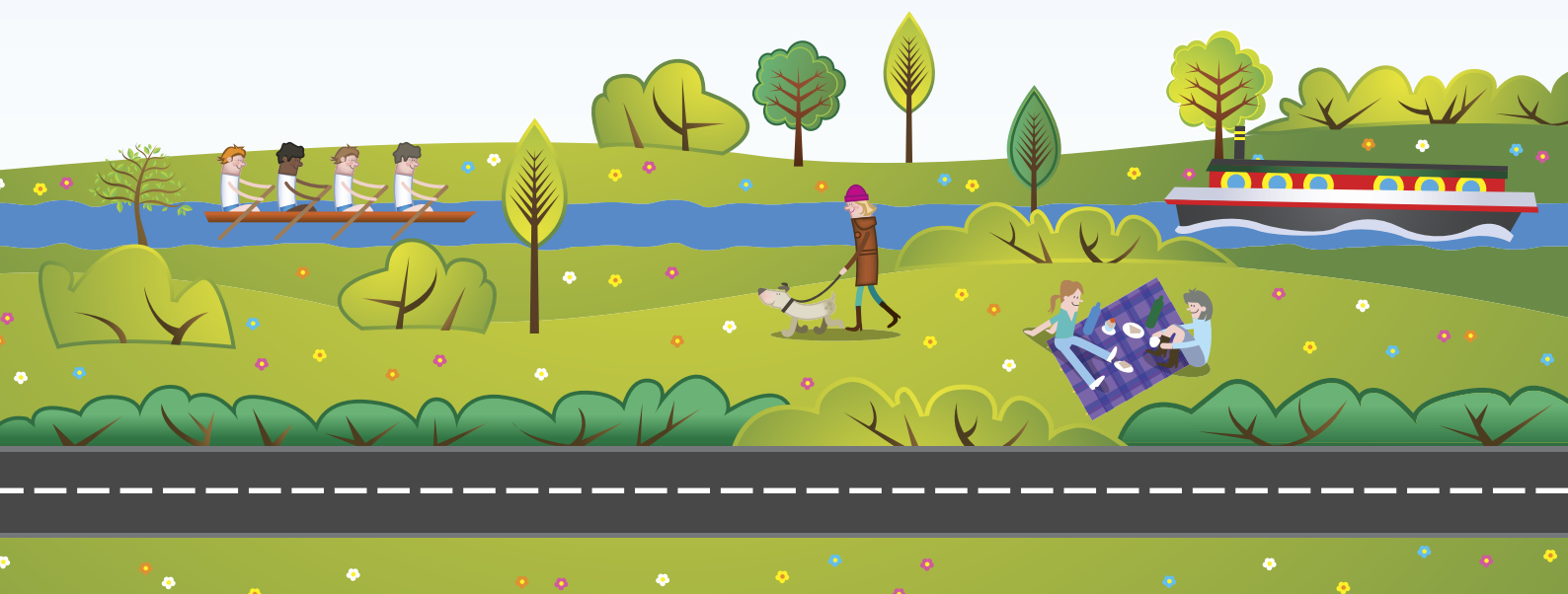


January

Healthy weight

COUNCIL OUTCOME: All of our families, children and young people are supported to get the best start in life

Upton Health C of E Primary School

Smile for a Mile

A partnership approach to creating active schools and children in West Cheshire.

The Daily Mile began in Stirling, Scotland and is a successful physical activity programme run in nursery and primary schools. It is an inclusive, whole-school approach, where children and teachers are encouraged to run or walk a mile a day during school time. This provides an extra 15 minutes of physical activity, and contributes to an active environment and culture within the school. It has been credited with improving the health of its pupils and staff.

In Cheshire West and Chester, the Daily Mile has been branded by local children as '**Smile for a Mile**.' Smile for a Mile was launched in six schools in March 2016 and was so successful that it has now been rolled out to other primary schools across West Cheshire. The Public Health Team deliver Smile for a Mile in partnership with NHS West Cheshire Clinical Commissioning Group and Active Cheshire, maximising expertise, knowledge and resources.

Since its launch, schools across West Cheshire have been signing up to Smile for a Mile, adding their footsteps to the scheme, with over 2,100 children locally now doing their daily mile.

Local schools participating in Smile for a Mile have reported the following benefits:

- Improved focus/attention of children
- Encouraging children to enjoy being outdoors
- Reduction in the number of overweight children
- Improved fitness
- Children sleep and eat better

The scheme has been so successful that the journey - from St Ninians Primary School in Stirling, to Horns Mill Primary School in Helsby - was even featured on The BBC One Show!

Upton Health C of E Primary School

Key statistics

In England, in 2015/16:

- 22.2% of reception-aged children (4-5 years old) were either overweight or obese
- 34.2% of children in Year 6 (10-11 years old) were overweight or obese
- 52.4% of 15 year olds met the recommended '5 a day' target (fruit and vegetable consumption)

In Cheshire West and Chester in 2015/16:

- 20.5% of reception-aged children were either overweight or obese
- 33.6% aged 10-11 were either overweight or obese
- 53.7% of 15 year olds met the recommended '5 a day' target (fruit and vegetable consumption)

Case Study

"This has proven to be a wonderful and really popular initiative for our school family. The Smile for a Mile has really improved our children's fitness levels and when they head back to the classroom, they are happy, pink cheeked and refreshed. The children are ready to start learning again with a renewed vigour and higher concentration levels. It's such a simple thing to do yet it is having an amazing impact."

Jane Hopkins, Head teacher,
Shocklach Oviatt CE Primary School

February

Falls prevention

COUNCIL OUTCOME: Vulnerable adults and children feel safe and protected

The experience of a fall or falls can permanently reduce a person's physical and mental health and wellbeing. Every year many people fall and injure themselves, sometimes severely, resulting in a hospital stay. Often, with the timely involvement of services, these falls could have been prevented, or the consequences of the fall reduced.

Reducing the number of injuries sustained from falls in the borough is a key priority for Cheshire West and Chester Council's Health and Wellbeing Board, and locally, many organisations are working together to prevent falls. The multi-agency Cheshire West and Chester Falls Prevention Group is led by Public Health and brings together representatives from many relevant stakeholders, including older people and those with lived experience of falling; the Voluntary Sector; the NHS; Cheshire Fire and Rescue Service; and the Ambulance Service. The group has recently produced the borough-wide Falls Prevention Strategy to guide future work in this area.

The Fire and Rescue Service carry out hundreds of thousands of home fire safety checks in England each year, and are extending these to become 'Safe and Well' visits, helping to improve the health of vulnerable, older householders. Cheshire Fire and Rescue Service currently delivers 25,000 Safe and Well visits a year.

Safe and Well involves advice on slips, trips and falls; stopping smoking and alcohol reduction messages; and encouragement to do the bowel cancer screening test. Phase 2, due to start later in 2017, will include hospital discharge; checking blood pressure; and advice on fuel poverty.

Case Studies

Age UK falls prevention

Mrs G is 87 years old and lives with her 40 year old grandson. She has a number of long-term conditions, including kidney disease and high blood pressure. The Information and Advice Caseworker at Age UK Cheshire referred Mrs G to the Age UK Falls Prevention Service as she was struggling with mobility and stumbled frequently.

The Falls Prevention Coordinator established that a second banister on the stairs and grab rails at certain points around the house would be beneficial. There were also some dangerous mats and the Falls Prevention Coordinator recommended removing these, replacing them with mats with rubber surrounds and non-slip backing. A schedule of works was completed by the Falls Prevention Coordinator to ensure that the necessary adaptions were installed. Three months later, Mrs G told the Coordinator that the banister rail was "fantastic"; it had given her "so much more confidence when using the stairs." She told the Falls Prevention Coordinator that she "thanks Age UK every time she uses it."

Cheshire Fire and Rescue Service (CFRS)

Susan is a 76 year old lady, living alone with two pet dogs. She was generally in poor health, and was receiving hospital treatment for poor circulation and badly swollen legs. As part of a targeted visit, CFRS found Susan on the floor in her home, where she had been for the past 3 hours. CFRS organised and arranged for Adult Social Care and her GP to visit her. Susan had a short spell in hospital, and is now living back at home, with a care plan in place. The Housing Trust said: "Cheshire FRS had not only done the best for Susan; they gained her trust and had gone over and above in looking at ways of removing the hazards that put her at risk from a fall, maintaining contact with her and continued to monitor her home environment."

Photos courtesy of Cheshire Fire and Rescue Service

Strength and balance classes.
Photo: courtesy of Healthbox CIC

Key statistics

In England:

- Falls are a major cause of disability and the leading cause of death resulting from injury in people aged 75 and older
- People aged 65 and older have the highest risk of falling
- Around 30% of adults over the age of 65 and living at home will experience at least one fall a year - about 2.5 million people in England
- Every year, approximately 5% of older people living in the community who fall, experience a fracture or require hospitalisation
- Falls are estimated to cost the NHS more than £2.3 billion per year and this cost is likely to be proportionately similar for Local Authorities
- In 2011, falls and fractures in people aged 65 and over accounted for over 4 million hospital bed days in England

In Cheshire West and Chester in 2014/15:

- There were 1,564 hospital admissions for people aged 65 and over, with an injury related to a fall. This figure was significantly higher than the average admission rate for England
- 68% of these admissions were in people aged over 80 years
- Falls in the over 80's were more likely to result in a fractured neck of femur, accounting for over a quarter (26%) of falls in this age group, compared to 21% in those aged 65-79
- There were 378 hospital admissions for hip fractures in people aged 65 and over. This equates to hospital costs of £2,171,232, or £5,744 per person
- If all admissions had been taken to hospital by ambulance, it would have cost a further £86,940, or £230 per person

Case Study

Healthbox falls prevention – strength and balance programme

The Healthbox Strength & Balance programme combines physiotherapist led, participant tailored exercise with nutritional advice. The programme concentrates on reducing the participant's overall risk factors for falling and suffering injuries and fractures through the following objectives:

- To increase strength, balance, endurance, flexibility, coordination and movement in individuals referred into the programme
- To prevent a first fall by reducing risk factors in individuals recognised as having an increased risk
- To reduce the risk of falling in frequent or previous fallers by combining group strength and balance exercises with supplementary home exercise programmes
- To retrain or maintain the ability to get up from the floor to avoid a 'long lie' after a non-injurious fall
- To increase confidence and reduce the fear of falling in all individuals participating in the programme

The programme also enables participants to:

- Increase levels of regular activity which improves their overall health
- Preserve independent living and postpone age-related reductions in physiological function

"As you get older you aren't as active so you need to exercise to keep going."

"I had a hip op and I'm feeling much better"

"Gives you confidence"

March

Improving the lives of older people

COUNCIL OUTCOME: Older people and vulnerable adults are compassionately supported to lead fulfilled and independent lives

For older people who are socially isolated, one of the few regular social interactions they may have is with healthcare professionals. GPs and other healthcare workers however, are under huge time pressures and often have only ten minutes to spend with a patient – usually not long enough to get to the root of the problem of loneliness, and almost certainly not long enough to do anything meaningful towards alleviating it.

Social Prescribing offers a way for healthcare professionals to help lonely and socially isolated patients by referring them into community-based services that can help them to manage their own wellbeing.

Public Health contributes actively to the **Brightlife Project**, a Big Lottery-funded partnership set up to improve the lives of older people across the borough. Amongst other things, Brightlife runs social prescribing schemes in the three key areas of the borough: Chester, Winsford and Malpas.

A range of healthcare professionals including GPs and nurses, as well as local hospital discharge teams and social workers, can identify older people in these areas who are at risk of loneliness and offer them a 'social prescription' in the form of a referral to Brightlife. There are three tiers of engagement available depending on how vulnerable the patient is, ranging from basic signposting into available services, through to intensive and ongoing support including access to peer befriending projects.

By giving older people choice and helping to build their confidence, Brightlife is empowering people to get involved in their own community and to rebuild their own social support networks.

Case Study

Grace became lonely after her husband died, and found it hard to meet new people as her confidence was low. She rarely left the house except to visit her GP. Whilst visiting her GP practice she saw a leaflet about Brightlife's Social Prescribing scheme and asked her GP for more information who then referred her.

Grace received a home visit from Jackie, her local Social Prescribing Coordinator, who asked her about the things she used to like doing before her husband died. Over the next few weeks, Jackie helped her find some local clubs and groups that were of interest to her, including an arts and craft group run by Brightlife partner, Community Compass.

Grace was initially nervous about going, but with Jackie's encouragement she gave it a try. She had a wonderful time, and even re-connected with an old friend who coincidentally also attended the group. Now, Grace attends the art and craft group every week, and often sees her friend outside of the group. She is happier, more confident and, for the first time since losing her husband, feels positive about the future.

Grace pictured right, photos courtesy of Brightlife

Key statistics

In England:

- In 2015/16, 45.4% of adult social care users had as much social contact as they would like
- In 2014/15, 38.5% of adult carers had as much social contact as they would like

In Cheshire West and Chester:

- Nearly 10,000 older people in Cheshire West and Chester are lonely, with many seeing friends and family less than once a week
- In 2015/16, 46.8% of adult social care users had as much social contact as they would like
- In 2014/15, 44.5% of adult carers had as much social contact as they would like

April

Smoking

COUNCIL OUTCOMES: All of our families, children and young people are supported to get the best start in life

Cleanest, safest and most sustainable neighbourhoods in the country

Children become aware of cigarettes at an early age. Three out of four children are aware of cigarettes before they reach the age of five, irrespective of whether or not the parents smoke. However, if young people see smoking as a normal part of everyday life, they are more likely to become smokers themselves.

Child and adolescent smoking causes serious risks to lung health both in the short and long term. Children who smoke are two to six times more susceptible to coughs and increased phlegm, wheeziness and shortness of breath than those who do not smoke. Smoking impairs lung growth and initiates early decline in lung performance which may lead to an increased risk of chronic obstructive lung disease later in life. The earlier children become regular smokers and persist in the habit as adults, the greater their risk of developing lung cancer or heart disease.

Evidence suggests that decreasing the visibility of smoking among children lessens the likelihood of them viewing smoking as a socially acceptable behaviour, thereby reducing the chances of them beginning to smoke.

The number of children that start smoking each year is decreasing. By ensuring further preventative action, we continue to work towards the ultimate goal of a smokefree generation.

Case Study

Cheshire West and Chester Council promotes smokefree initiatives such as Smokefree Cars and Smokefree Playgrounds, to help protect young people from the harms of smoking and prevent them from taking it up. Consultation with the public revealed that the idea of Smokefree Playgrounds had strong local support, with 92.7% of 218 local residents backing not smoking in playground areas.

In March 2016 the Council implemented a voluntary Smokefree Code of Practice within park playground areas, covering more than one hundred play areas in the borough.

The purpose of the Play Smokefree code is to:

- Deter young people from smoking
- Reduce the risk of exposure to second-hand smoke
- Reduce smoking-related litter and the threat of cigarette butts, which are non-biodegradable and toxic to children, wildlife and the environment
- Reduce fire risk
- Offer the potential for increased use of parks and recreation areas

Park rangers and wardens promote the code with play area visitors, and colourful Play Smokefree signs, which have been designed by local children, are on display to remind people not to light up.

For help to quit smoking contact your local Stop Smoking Service through the Cheshire Change Hub, visit **www.cheshirechangehub.org** or telephone **0300 777 0033**.

Adam Smith, Advanced Health Improvement Practitioner for Cheshire West and Chester Council with Councillor Louise Gittins, Cabinet Member for Communities and Wellbeing next to a smoke free playground.

Key statistics

In the UK:

- Smoking causes 96,000 preventable deaths each year
- Around 207,000 children in the UK try smoking each year

In Cheshire West and Chester:

- There are approximately 1,594 smoking related deaths per year
- Approximately 930 children aged 11-15 years smoke

Key facts about stopping smoking

- After 20 minutes, your blood pressure and pulse return to normal
- After 24 hours, your lungs start to clear
- After two days, your body is nicotine-free and your sense of taste and smell improve
- After one year, your heart attack risk is half that of a smoker
- After 10 years, your lung cancer risk is half that of a smoker

May

Housing, homelessness and health

COUNCIL OUTCOMES: Vulnerable adults and children feel safe and are protected

Good quality and affordable housing that meets the needs of our diverse communities

There are risks to an individual's physical and mental health associated with living in:

- a cold, damp, or otherwise hazardous home (an unhealthy home)
- a home that doesn't meet the household's needs due to risks such as being overcrowded or inaccessible to a disabled or older person (an unsuitable home)
- a home that does not provide a sense of safety and security including precarious living circumstances and/or homelessness (an unstable home)

The right home environment protects and improves health and wellbeing, and prevents physical and mental ill health. It also enables people to:

- manage their own health and care needs, including long term conditions
- live independently, safely and well in their own home for as long as they choose
- complete treatment and recover from substance misuse, tuberculosis or other ill-health problems
- move on successfully from homelessness or other traumatic life events
- access and sustain education, training and employment
- participate and contribute to society

In Cheshire West and Chester, a wide range of agencies work together in a Health & Housing partnership which works to improve access to good quality, healthy homes, particularly for the most vulnerable people in the borough. Public Health contributes actively to this partnership.

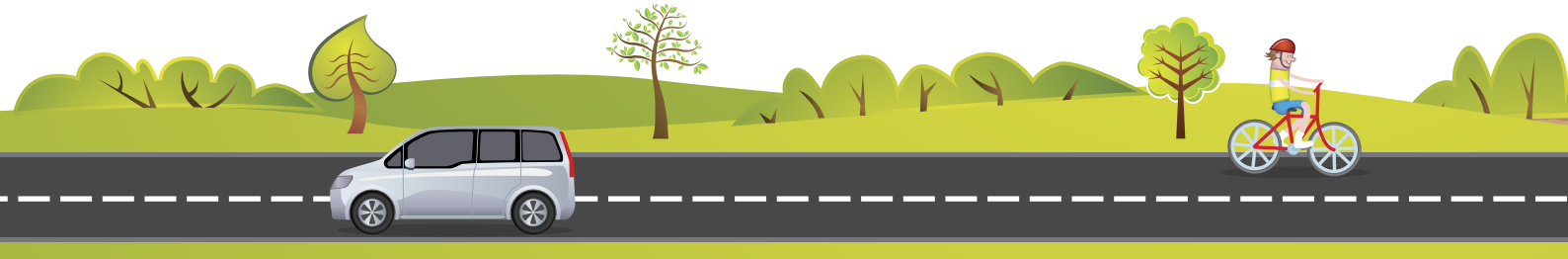
Case Study

Foundation Enterprises North West (FENW) provides services for people experiencing homelessness in the borough. They have worked with a range of partners to improve access to health care provision for single homeless people, including the provision of respite and End of Life care. FENW have recently invested in the development of a dedicated and specifically equipped health suite, which provides a specialist unit of accommodation to be used for medical respite and end of life care as required.

Homeless people are often at increased risk of serious illness and have reduced life expectancy. The End of Life services introduced by FENW this year aims to ensure that residents at Richmond Court have the right to determine where they wish to receive care at the end of their life.

FENW have also developed a health treatment room within Richmond Court which enables residents and other homeless service users access to medical treatment, specialist health care services for example, oral health, and medical respite in a supportive community setting.

Photo courtesy of FENW



Key statistics

In England:

- In 2014, 10.6% of households experienced fuel poverty
- In 2011, 4.8% of households were defined as overcrowded
- In 2014/15, the rate of emergency hospital admissions for injuries due to falls in persons aged 65+ per 100,000 population was 2,125

In Cheshire West and Chester in 2014:

- In 2014, 10% of households experienced fuel poverty - 14,461 households in the borough
- In 2011, 2.4% of households were defined as overcrowded - 3,378 households in the borough
- In 2014/15, the rate of emergency hospital admissions for injuries due to falls in persons aged 65+ per 100,000 population was 2,272 – 1,564 admissions in the borough. This is significantly worse than the England average

June

Dementia

COUNCIL OUTCOME: Vibrant and healthy communities with inclusive leisure, heritage and culture opportunities

Dementia is not an inevitable part of ageing, but it is a condition that is increasingly common in older age, impacting on individuals, families, friends and communities.

The council is committed to enabling people with dementia to live as full a life as possible and encourage communities to work together to help people to stay healthier for longer.

Together with our partners and communities, we are working hard to develop innovative ways to support individuals, their carers and families, enabling those with dementia to remain independent and socially connected.

Local examples of dementia friendly designed environments include:

- Baron's Quay development in Northwich and Chester Storyhouse (the new cultural centre including theatre, cinema, library)
- Chester Northgate scheme (development including retail and leisure)
- Chester Bus Interchange
- Weaver Square redevelopment (Northwich town centre)

In 2016, Public Health led a borough-wide partnership to develop a new Dementia Strategy. The vision is to create a borough which supports and is inclusive of people with dementia, their carers and their families, so that they can enjoy the best possible quality of life and remain independent for longer. The Strategy commits to improving the quality of life for people living with dementia, and provides advice on how the risk of dementia can be reduced by making simple lifestyle and wellbeing behaviour changes. Public Health is also an active supporter of **#DementiaDo…the Basics**.

Case Study

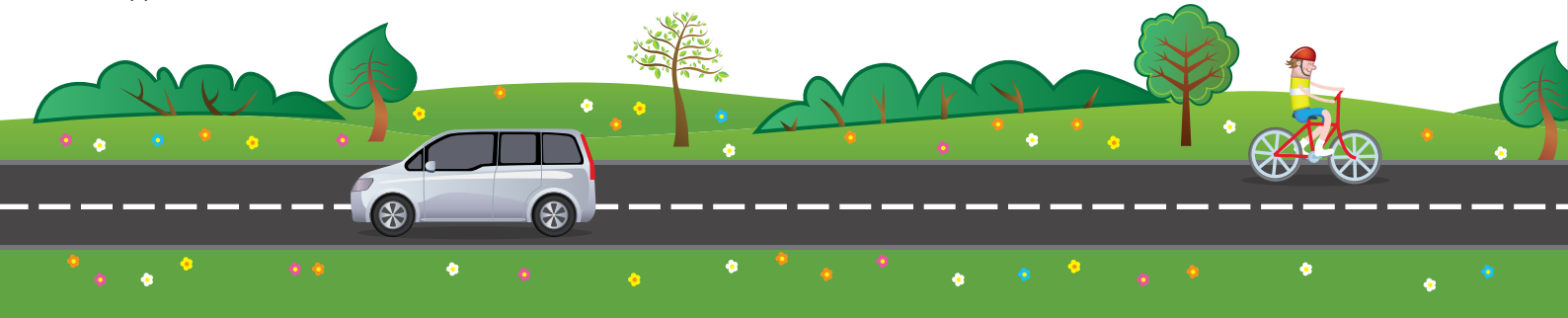
Training #DementiaDo….the Basics

Andy Tysoe (Memory Nurse at the Countess of Chester Hospital seconded to Cheshire West and Chester Council part-time), has been instrumental in changing the way we think about Dementia locally. Andy devised #DementiaDO after growing tired of seeing society expecting people with dementia to fit around them instead of the other way around. Based on the Alzheimer's Society's Dementia Friends model, Andy delivers information and awareness sessions on dementia locally. The aim is to work towards creating dementia-friendly communities and create more dementia friends for the Alzheimer's Society. Sessions have been delivered to a range of organisations, schools, businesses, voluntary sector and communities.

To date, Andy has been responsible for signing up thousands of Dementia Friends, a number of whom have been inspired to become dementia friend champions. On the 15 February 2017, at the Countess of Chester Hospital, the 6,000th person attended a #DementiaDO…the Basics session - true collaboration between health, social care and the public!

Andy's sessions and events have inspired many people across the region, with Cheshire Museums and Cheshire Police officers among those who have used Andy's stories to change the way they work. Following a session with Andy, Cheshire Museums were inspired to re-badge their café into a themed memory café and have made exhibitions dementia-friendly. And following a session, around 200 officers were inspired to produce a role-play for new recruits called to 'arrest' a gentleman with dementia in a shop, who walked out without paying. They are intending to film this and share with other forces.

On Twitter the #DementiaDO hashtag has garnered more than two million impressions during that time, with NHS Improvement and NHS England frequently tweeting about it.



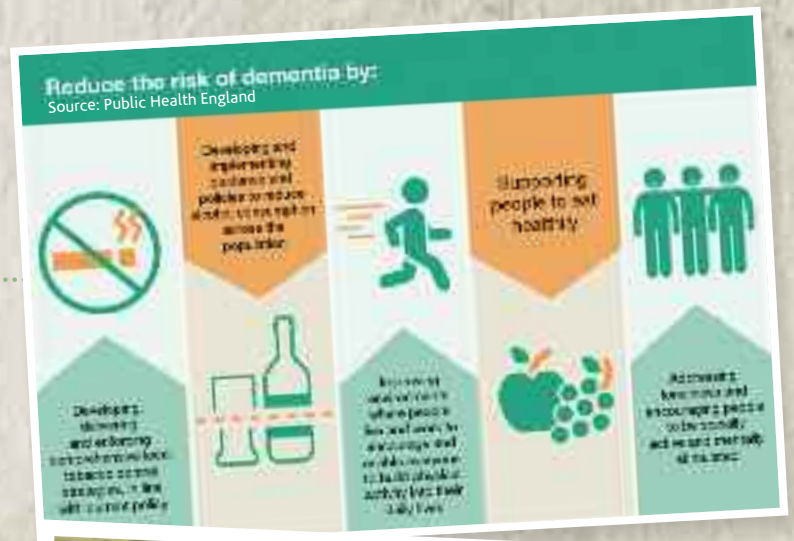


Photo courtesy of Andy Tysoe

Key statistics

In the UK:

- An estimated 21 million people have a close friend or family member living with dementia
- 62% of people with dementia are female and 38% are male
- The Alzheimer's Society estimates that the overall impact of dementia is £26.3 billion
- This is higher than the cost of cancer, heart disease, or stroke

In Cheshire West and Chester:

- There are 68,900 people over the age of 65. Of these, 8,800 are over the age of 85
- By 2032, there will be a 60% increase in older population, to number approximately 102,000. Numbers aged 85 and over will increase to 20,000.
- The greatest increase in older people will be in the borough's rural locality
- In 2015/16, there were 2,864 people with a diagnosis of dementia in Cheshire West and Chester- 0.8% of the borough's population.
- 4% of people diagnosed with dementia are under the age of 65

Dementia Friends

Tarporley High School Lower VI, photo courtesy of Andy Tysoe

July

Antimicrobial stewardship

COUNCIL OUTCOMES: Vibrant and healthy communities with inclusive leisure, heritage and culture opportunities

Our resources are well managed and reflect the priorities of our residents

Antibiotics are medicines that treat infections by killing bacteria, but now the bacteria are fighting back. Antibiotics are becoming less effective, which means more complications for people receiving treatment in hospital and more people dying as a result. We need to tackle this problem now, before it gets worse.

The damaging effects of antimicrobial resistance are already showing themselves across the world. Antimicrobial-resistant infections currently claim at least 50,000 lives each year across Europe and the US alone, with many hundreds of thousands more dying in other parts of the world. But reliable estimates of the true burden are scarce.

The European Centre for Disease Prevention and Control estimates that 25,000 people die each year as a result of hospital infections caused by five key resistant bacteria, adding – on a conservative estimate – €1.5 billion to hospital treatment and societal costs.

There are many reasons why antibiotics lose their effectiveness, but the two key ones are:

- We take antibiotics when we don't need them. Antibiotics don't help most coughs or colds, but many people still request them
- We make things worse when we don't take antibiotics exactly as prescribed, for instance missing doses

You can help in the fight against antimicrobial resistance by:

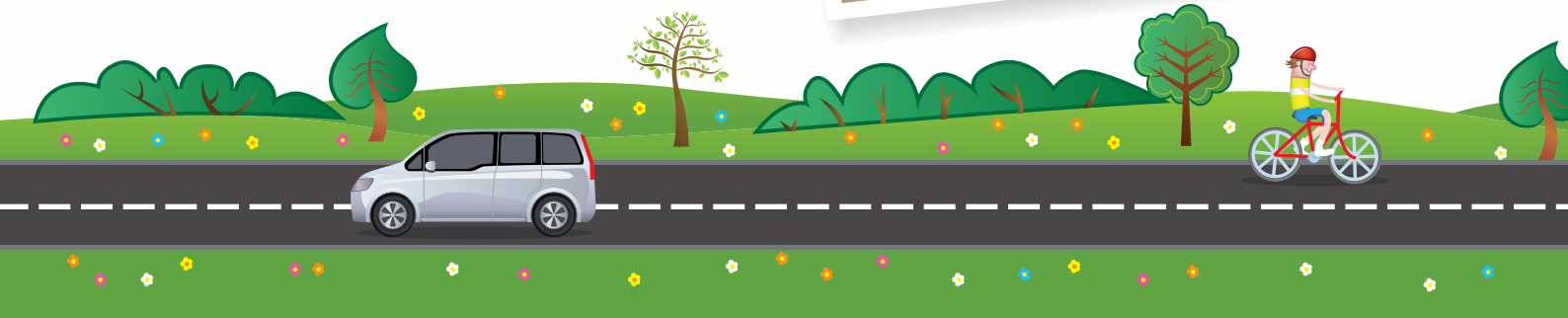
- Not asking for antibiotics – treat your cold and flu symptoms with a pharmacist's advice and over the counter medicines
- Take antibiotics as prescribed and never share them with others or save them for later
- Spread the word, tell your friends and family about antibiotic resistance
- Pledge to be an Antibiotic Guardian at **www.antibioticguardian.com**

Case Study

Fighting antimicrobial resistance requires joined up efforts by a wide range of organisations and the public. Recently, health and social care organisations across Cheshire West and Chester came together to hold an Antimicrobial Stewardship Summit to fight antimicrobial resistance. Partners in the summit include: All NHS health care settings, Local Authority, Clinical Commissioning Groups, Dentists and Community Pharmacies.

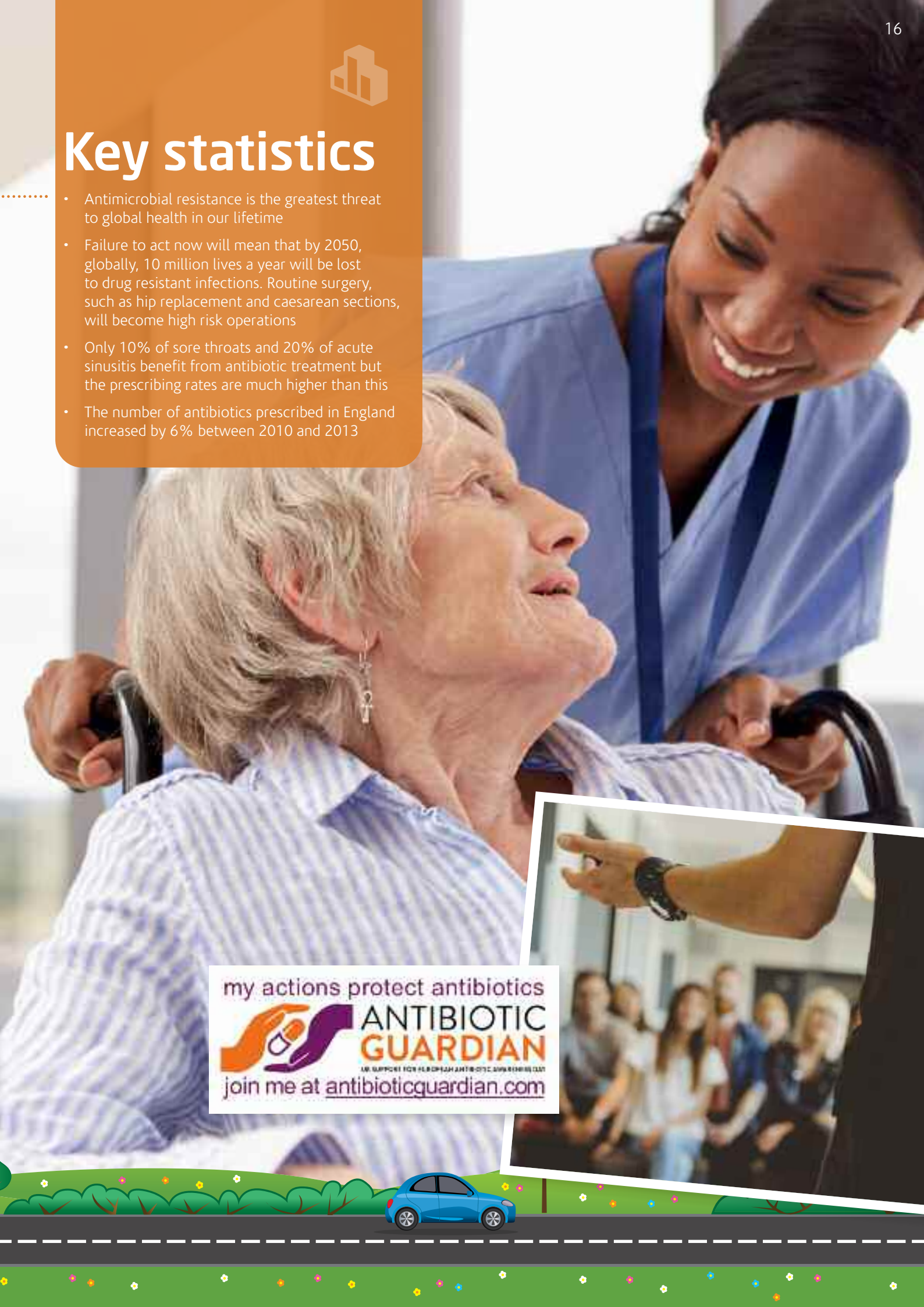
Key issues the group want to address:

- Ensuring that the right medicines are prescribed in the right way and monitoring this
- Reducing the numbers of antibiotics which are prescribed
- Ensuring all health and care workers are trained appropriately and understand their role as Antibiotic Guardians
- Raising public awareness of antimicrobial resistance and developing Antimicrobial Guardians in the community



Key statistics

- Antimicrobial resistance is the greatest threat to global health in our lifetime
- Failure to act now will mean that by 2050, globally, 10 million lives a year will be lost to drug resistant infections. Routine surgery, such as hip replacement and caesarean sections, will become high risk operations
- Only 10% of sore throats and 20% of acute sinusitis benefit from antibiotic treatment but the prescribing rates are much higher than this
- The number of antibiotics prescribed in England increased by 6% between 2010 and 2013



August

Economy, work and health

COUNCIL OUTCOMES: People are well educated, skilled and earn a decent living

A great place to do business

Cheshire West and Chester Council's vision is a thriving borough, with a flourishing economy, residents and communities by 2020. Strong businesses are a vital part of sustaining a strong economy, providing valuable jobs and a good quality of life - both of which have a major influence on our health.

Health contributes to the local economy through four main routes:

- Higher productivity
- Higher labour supply
- Improved skills as a result of greater education and training
- Increased savings available for investment

Education, employment and skills are therefore key for a healthy local economy and work is a key determinant of health. Healthy workers lose less time from work due to ill health and are more productive when working. There are many connections between work and health. It can promote good physical and mental health, but work - or lack of it - can also have negative effects on health. Being out of work is associated with an increased risk of poor health and increases a person's risk of limiting illness, heart disease, poor mental health, suicide and health damaging behaviours such as smoking. Lower paid workers with fewer skills or qualifications are more likely to experience poorer working conditions and worse physical and mental health.

Case Studies

Cheshire West and Chester Council's staff health and wellbeing

Acknowledging the links between work and health, Cheshire West and Chester Council has made its own staff's health an organisational priority. During 2016, the Public Health Team supported the drive to improve staff health and wellbeing, identifying actions and potential programmes across which could be implemented from the individual service level to the whole organisation. The team also supported a number of very successful Health and Wellbeing events in the Council. These aimed to raise the profile of healthy lifestyles and support the Council's Health and Wellbeing plans, helping staff improve their own health and wellbeing. Blood pressure checks, cholesterol tests and mindfulness taster workshops were just some of the sessions on offer. Trained staff were also on hand to advise on physical activity, nutrition, managing stress, and work-life balance including managing multiple roles such as worker and carer.

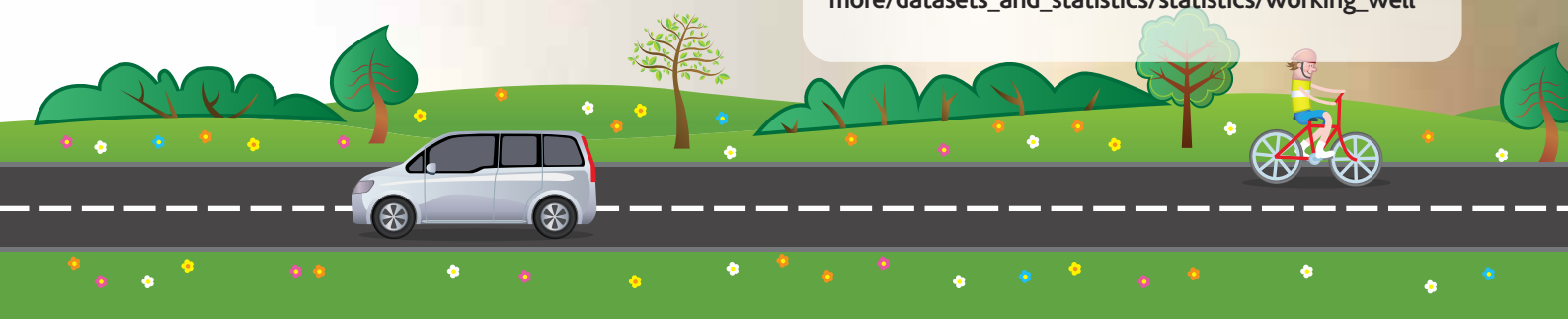
The economic dashboard

Recognising the organisational need for easy-to-understand economic information, and the links between the economy and health, the Public Health and Economic Growth teams have developed an Economic Dashboard. It is designed to be simple, easy to use and understand. Originally containing 31 data sets grouped into seven themes, it has since been further enhanced through suggestions and feedback from the local business community.

The Dashboard can be used by staff, Councillors, local business and members of the public as a handy, 'one-stop-shop' resource for local economic information. It is by no means an exhaustive catalogue; rather its purpose is to provide a basic overview of local economic issues. Further information or analysis can be requested from the Council's Insight and Intelligence Team.

The Dashboard is one of a number of tools used by the Council to drive evidenced-based decision making, and policy and project development. It can be found on Cheshire West and Chester Council's Joint Strategic Needs Assessment page:

http://inside.cheshirewestandchester.gov.uk/find_out_more/datasets_and_statistics/statistics/working_well



Key statistics

In England:

- In 2015/16, 57.0 % of children in state funded schools achieved 5 or more A* to C grades including English and Maths
- The employment rate (numbers) of resident 16 to 64 year olds, July 2015-June 2016 was 74% (25,509,100)
- Accounting for household composition, the annual average income is £26,990
- Between 2010 and 2015 there was a 66% increase in business births

In Cheshire West and Chester:

- In 2015/16, 63.3% of children in state funded schools achieved 5 or more A* to C grades including English and Maths
- The employment rate (numbers) of resident 16 to 64 year olds July 2015-June 2016 was 72.1% (147,300)
- Accounting for household composition, the annual average income is £27,970
- Areas with lower average incomes are clustered around our urban/industrial areas including some parts of Chester, Northwich, Winsford and Ellesmere Port
- Wards with higher levels of household incomes are found in our rural areas
- Between 2010 and 2015 there was a 56% increase in business births

September

Seasonal flu vaccination

COUNCIL OUTCOMES: **Vulnerable adults and children feel safe and are protected**

Vibrant and healthy communities with inclusive leisure, heritage and culture opportunities

For most healthy people, flu can be unpleasant but usually recovered from within a week or two. However, for some people such as pregnant women, older people and those with long-term health conditions, flu can cause serious illness and complications. Vaccination is one of the most effective ways to prevent seasonal flu and the Public Health Team work with a range of partner organisations to encourage uptake of the vaccination.

If you are eligible for a free seasonal flu vaccination it is important that you take up the offer every year. By getting the flu vaccine, you not only reduce the risk of getting flu yourself, you'll help to protect your family and friends.

As in previous years, the adult flu vaccine is offered free to people who are more at risk of complications should they catch flu. These include:

- Pregnant women
- Those aged 65 or over
- Those aged under 65 with long-term health conditions
- People who live in a long stay residential home
- People who are immune-suppressed
- Carers and those people who live with someone who is immunocompromised
- People who are very overweight

Flu vaccination is now provided free for the above groups at many local pharmacies in addition to GP practices. Children aged 2-6 are also offered free flu immunisation via a nasal spray at their GP practice or school, and health and social care workers should be offered vaccination by their employer.

If you aren't eligible for a free flu vaccination, many pharmacies now offer a private vaccination service for a small fee.

Case Studies

Flu vaccination animation

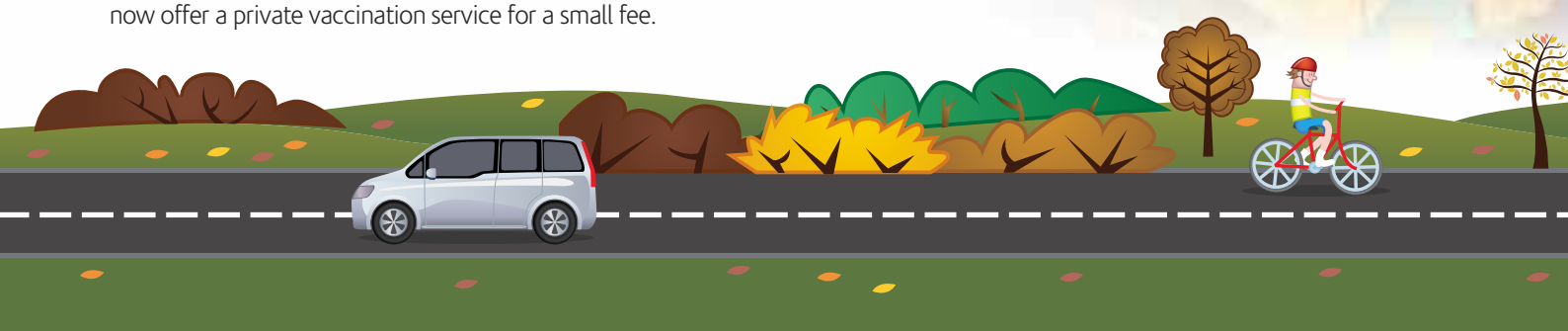
With funding from NHS England, employees from Cheshire West and Chester Council worked collaboratively to develop an animation designed to dispel the most common myths about seasonal flu vaccination. This has been shared widely across the borough and with neighbouring local authorities, to encourage people in 'at risk' groups to get a seasonal flu vaccination. The full animation is available to view at: **https://www.cheshirewestandchester.gov.uk/news-and-views/campaigns/flu-vaccinations.aspx**

Community pharmacy flu vaccination service

Health and social care workers should be offered vaccination by their employer. This is because seasonal flu vaccination not only protects employees but the service users they work closely with. Last year the Public Health Team developed a community pharmacy seasonal flu vaccination service. The service provides a low cost and accessible solution to help local health and social care organisations comply with their legal obligation. If you are a health and social care provider and would like your employees to be able to access this service, please contact: **publichealth@cheshirewestandchester.gov.uk**

Pandemic Flu Training

In addition to work on seasonal flu, the Public Health Team organised a pandemic flu training event in partnership with the Countess of Chester Hospital, Cheshire and Wirral Partnership, NHS England and Public Health England. The event helped to increase knowledge, resilience and preparedness and strengthened the interface between local health and social care providers and key partners.



Key statistics

Eligible group	Seasonal flu vaccination programme percentage uptake		
	West Cheshire CCG (%)	Vale Royal CCG (%)	England average (%)
Clinical risk groups aged six months to under 65 years	48.3	52.2	45.1
Pregnant women	46.2	49.4	42.3
Two years old	46.9	39.3	35.4
Three years old	47.1	44.9	37.7
Four years old	37.1	34.6	30.0
Five years old	Data unavailable		54.4
Six years old	Data unavailable		52.9
65 and over	73.4	74.3	71

October

Road safety

COUNCIL OUTCOME: **A well connected and accessible borough**

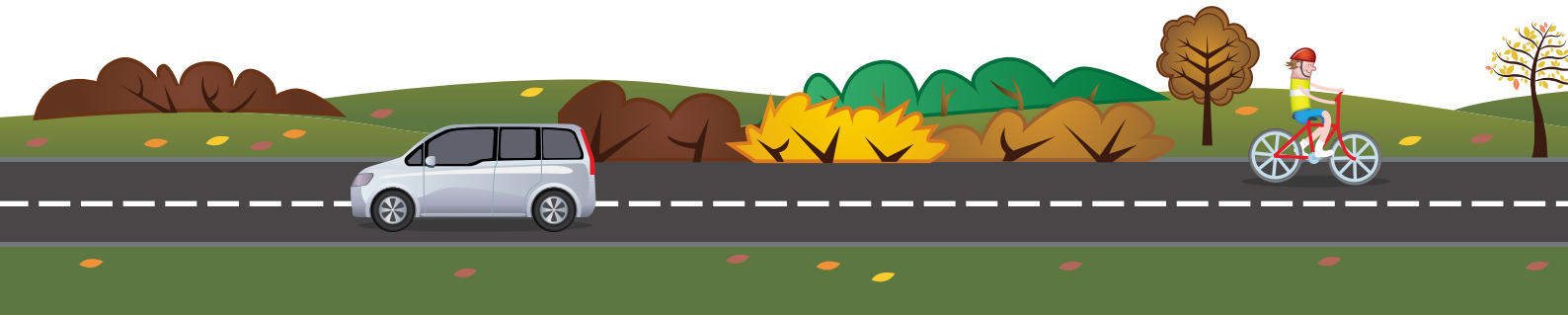
Whilst the Council continues to perform well in reducing road traffic casualties on the highway network, one casualty is considered too many. There are a number of road safety activities undertaken across the borough that ensure co-ordinated and effective delivery of road safety improvements. The ultimate aim is to reduce the numbers and severity of casualties involved in road traffic collisions on the highway network.

Road safety is not just about providing facilities, but also about people's behaviour, having the skills to be safe, together with individual responsibility and an awareness of road safety. The council works with schools, colleges, businesses and local communities to raise awareness, educate and train all types of road users in order to improve skills and behaviour.

Speeding continues to be one of the key road safety concerns continually raised by local communities. Reductions in average vehicle speed have the potential for delivering significant benefits across the transportation, environmental and health agendas. As a result, the Council is introducing 20mph speed limits in some residential areas to reduce collisions, encourage more children to walk to school and reduce pollution. 20mph speed limits encourage slower speeds, fostering active, sustainable and shared travel, with more children likely to walk and cycle to school on their own. Parents are not tied to the school run and children have their freedom increased. Those people who have concerns about cycling become more likely to cycle than previously. With slower traffic, people are more likely to spend time in their street and to allow their children to play outside, thereby increasing their physical activity.

During the last 12 months, the Road Safety team have undertaken a number of key road safety activities including:

- The provision of the **Driver Engage programme** that provides driving instructors with the specialist resources and training that will enable them to discuss a range of key road safety topics with their learners
- Young children from schools across the borough have an opportunity to become safe and independent cycle users through the **Bikeability scheme**
- Working with the Council's Public Health team to actively promote the widespread health benefits and provide education to schools across the borough through the **Let's Walk scheme**
- A scheme in partnership with Cheshire Police involving Year 6 children being appointed as **Junior Safety Officers** for their school to help promote safety messages to fellow pupils and their families
- Children being encouraged to think about why parking is not acceptable in certain places, and take the message home to their parents. This work is delivered by Road Safety Officers through the **DIPZY** assembly in schools
- A non-alcoholic bar that tours sixth forms and colleges around Christmas and Summer promoting the anti-drink message focusing on the impossibility of calculating a safe alcohol limit and the dangers of the morning after. This work is done through the **Cheers Bar** (Drink Drive display)
- **Too young to die** is an initiative designed to raise awareness of the consequences of irresponsible driving and to influence young people's attitudes learning to drive, the driving test and the longer term skill of safe driving for life. The **Too Young To Die** presentation includes a number of video interviews with road crash victims



Case Study

Further to requests from the public, the Council has approved 20mph speed limits being introduced in a range of residential areas across the borough where existing average vehicle speeds were less than 24mph and around schools where the average speeds were less than 30mph. The Council has approved a Capital budget to deliver a programme of 20mph schemes over a 4 year period.

The 20mph speed limit scheme has a particular focus around schools, in order to reduce traffic collisions, encourage more children to walk to school and reduce pollution. It is anticipated that local communities will have a positive view of lower speed limits in the area they live in. The programme delivers 'signed only' schemes and therefore would not include physical traffic calming measures.

The Council identified 223 zones covering 740km of highway that potentially met the criteria for a 20mph speed limit. Each area requires a speed limit assessment to determine this and priority for implementation is given to those zones with higher numbers of schools or recorded injury collisions.

The first year of the programme (2016/17) identified 36 schemes covering 192km of highway. 23 scheme areas were introduced within the first year with the remaining schemes to be delivered by the end of March 2017.

As part of the 20mph scheme, the Council is engaging with all schools in the borough and putting a '20's plenty' banner outside schools. These banners are temporary for approximately two weeks in order to get the message across to parents and other road users.

Key statistics

In Great Britain in 2015:

- Road deaths decreased by 2% compared with 2014, falling to 1,732
- The number of people seriously injured decreased by 3% to 22,137
- There were a total of 186,209 casualties of all severities
- In England, the rate of people killed or seriously injured (KSI) on the roads, all ages, per 100,000 resident population is 39.3

In Cheshire West and Chester:

- There has been a steady decline in KSI in the past 10 years
- In 2014, 191 KSIs were recorded compared to 171 in 2015
- The rate of people KSI on the roads per 100,000 resident population is 54.5. This is significantly higher than the England average

St. Theresa's Catholic Primary School, Blacon

Kingsley CP and Nursery School on Middle Lane, Kingsley in Frodsham

November

An evidence-based, outcomes focused Council

COUNCIL OUTCOMES: Vibrant and healthy communities with inclusive leisure, heritage and culture

Our resources are well managed and reflect the priorities of residents

Cheshire West and Chester's Public Health Team promotes the use of evidence - and evidence-based practice - into the work of the Council. This includes systematically finding, appraising and using scientific research and other information. The insight and knowledge gained helps develop policies and practices that improve health outcomes and performance, as well as allowing for more efficient use of resources.

Together, with the **Public Health Analysts** in the Council's **Insight and Intelligence Team**, we shape and produce the **Joint Strategic Needs Assessment (JSNA)**. The JSNA brings together data and intelligence that helps us understand the needs of our local population and 'tells the story' of the borough. The information contained within the JSNA includes a combination of statistics and the views of local people to produce a detailed picture. This is a key resource that is used to help plan and re-shape local health and care services to meet the needs of the local community.

The Public Health Team uses scientific research and other evidence as part of their toolkit to improve health and reduce inequalities. Evidence such as the JSNA and NICE Guidance is considered carefully when developing strategies, planning services and prioritising resources, and the Public Health Team is well placed to advise others who want to get the best out of the evidence-base for a particular issue. This ensures that we are supporting our residents whilst making sure that our resources are well managed.

Case Study

A perinatal mental health JSNA was developed with key partners as part of a wider programme on mental health and wellbeing for the Pioneer Mental Health Commissioning Review Group. Perinatal mental health problems are those which occur during pregnancy and the year after birth.

Depression and anxiety are the most common mental health problems during pregnancy and also affect 15 to 20% of women in the first year after childbirth. Serious perinatal mental health problems affect around 3% of women, who will require referral to psychiatric services. The JSNA highlighted that across Cheshire mental health receives relatively little attention during pregnancy and most antenatal care is heavily focused on the physical health of the mother. Low detection rates mean that a high proportion of cases of depression and anxiety go unrecognised and untreated during the perinatal period.

Health visitors play an important role in promoting and supporting the emotional health and wellbeing of both parents and babies. Supported by evidence from the JSNA, commissioners agreed funding for all Health Visitors to undertake Brazelton training. This training is an evidence-based approach to supporting parents in understanding how their babies communicate. Research shows that supporting parents in the ante and postnatal period can prevent difficult relationships forming and possibly prevent symptoms of post-natal depression developing. The training teaches practitioners about baby behaviour in order to enhance their skills in supporting parents communicate with their baby in the first three months. Training commenced in January and all Health Visitors will be trained by the end of 2017.

Key statistics

- The Local Government and Public Involvement in Health Act 2007 requires local authorities and the NHS to jointly produce a strategic needs assessment (JSNA) of the health and wellbeing of their local community
- The JSNA looks at the wider determinants of health, working with our Clinical Commissioning Groups, third sector providers and other local partners
- The Cheshire West and Chester JSNA provides a suite of powerful indicators to establish current and future health and care needs of our local population
- This in turn supports better targeting of interventions to reduce health inequalities

December

Celebrating diversity in our communities

COUNCIL OUTCOME: Vibrant and healthy communities with inclusive leisure, heritage and culture opportunities

The Public Health Team is committed to supporting the health and wellbeing of all of our diverse communities in the borough. Lesbian, Gay, Bisexual and Transgender (LGBT) individuals and communities face particular health and wellbeing challenges and inequalities.

We work to improve the health and wellbeing of LGBT individuals and communities by enabling them to make healthy lifestyle choices, seek support and access services, and address the issues underlying poor health. The long term objective is to decrease health inequalities in the LGBT community.

Cheshire West and Chester Council's Director of Public Health is the LGBT Champion for the organisation. Over the past year she has worked hard to support the work of Equality and Diversity Leads in ensuring we are an inclusive organisation. Over the last few years, the Council has supported **Chester Pride**, created a staff **LGBT Network** and a **LGBT Friends Group**. We also held a Trans-Inclusion Conference in November 2016, highlighting health and wellbeing issues faced by individuals who have transitioned or are transitioning.

Each year the Council takes part in Stonewall's Workplace Equality Index, which measures and drives work on equality and inclusion in public, private and third sector organisations from across the country. Last year we were 171st out of the 415 organisations that entered and this year we have risen almost 100 places to 75th in the index, achieving recognition in Stonewall's top 100 LGBT friendly organisations for the first time. A place in this prestigious list is a real honour and reflects our commitment as an organisation to making sure all colleagues feel able to be themselves at work.

The Council's success is down to a number of factors, including the successful LGBT Friends scheme, support from senior managers and elected members, additional staff training, effective partnership work, changes to a number of policies and procedures and increased visibility at community events like Chester Pride.

Case Study

In 2014, Chester Pride became a registered charity made up of volunteers from the LGBT community and their straight allies.

The Chester Pride Campaign for 2016 'Talk with Pride' launched in July and focused on mental wellbeing. Posters, the internet, and social media messages encouraged individuals to talk to someone and seek support around their mental health, and signposted to services in the local area. A Talk with Pride conference took place with speakers talking about LGBT and mental health experiences, to help professionals and services understand the complexities. This included the topics of LGBT and Islam, the farming community, preventing young suicide, Trans inclusion and young people, trans inequality in healthcare, and compound stigma in LGBT people. In addition, a focus group and survey was carried out with LGBT young people to advise on the design of a Public Health campaign around mental health and young people.

Public Health has also supported the Chester Pride Team in developing a LGBT youth project. This included volunteer training and resources for project work. Chester Pride began working with a newly formed LGBT youth group in Chester called '**Phoenix**' run by the Proud Trust and Chester Pride volunteers in December 2016. Chester Pride will be undertaking a variety of Chester Pride projects with the young people throughout 2017. This will include guest speakers at the youth group, working together on the 2017 Chester Pride campaign, and getting the young people involved in the Chester Pride festival by producing something for the parade.

Photos courtesy of Chester Pride

Key statistics

In England:

- It is estimated that between 5 and 7% of the adult population identify as lesbian, gay or bisexual: 3.6 million people in England

In Cheshire West and Chester:

- If national estimates are applied to the local population of those aged 18 and over, there may be 13,400 to 18,700 people who identify as lesbian, gay or bisexual (LGB)

Public Health

Cheshire West and Chester Council

Our Vision

To work with communities and partners to improve the health and wellbeing of the population of Cheshire West and Chester.

Public Health Priorities include:

Working with partners to help to reduce the gap in life expectancy between the worst and best off in Cheshire West and Chester

Working with departments across the Council to help achieve the Council's outcomes

Helping create opportunities for individuals and families to make positive changes to their own lives using their own strengths and skills to make a difference to themselves and their communities

Supporting people to make healthier lifestyle choices

Increasing awareness and access to services so that people can better help themselves to live healthier lives

Promoting community spirit, helping to build more supportive relationships

Contact us:

Public Health Team,
Cheshire West and Chester Council,
3rd Floor HQ Building, 58 Nicholas Street, Chester, CH1 2NP

General enquiries: 01244 977020
Email: publichealth@cheshirewestandchester.gov.uk

Accessing Cheshire West and Chester Council information and services.

Council information is also available in Audio, Braille, Large Print or other formats. If you would like a copy in a different format, in another language or require a BSL interpreter, please email us at: **equalities@cheshirewestandchester.gov.uk**

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