

### Healthy Communities Scrutiny Sub-Committee

Tuesday 28 November 2017
7.00 pm
Ground Floor Meeting Room G02B - 160 Tooley Street, London SE1 2QH

### Membership

# Councillor Rebecca Lury (Chair) Councillor David Noakes (Vice-Chair) Councillor Helen Dennis Councillor Sunny Lambe Councillor Leo Pollak Councillor Maria Linforth-Hall Councillor Bill Williams

### Reserves

Councillor Gavin Edwards Councillor Octavia Lamb Councillor Eliza Mann Councillor Sandra Rhule Councillor Martin Seaton

### INFORMATION FOR MEMBERS OF THE PUBLIC

**Access to information** You have the right to request to inspect copies of minutes and reports on this agenda as well as the background documents used in the preparation of these reports.

**Babysitting/Carers allowances** If you are a resident of the borough and have paid someone to look after your children, an elderly dependant or a dependant with disabilities so that you could attend this meeting, you may claim an allowance from the council. Please collect a claim form at the meeting.

**Access** The council is committed to making its meetings accessible. Further details on building access, translation, provision of signers etc for this meeting are on the council's web site: <a href="https://www.southwark.gov.uk">www.southwark.gov.uk</a> or please contact the person below.

Contact Julie Timbrell on 020 7525 0514 or email: julie.timbrell@southwark.gov.uk

Members of the committee are summoned to attend this meeting **Eleanor Kelly**Chief Executive

Date: 20 November 2017





### **Healthy Communities Scrutiny Sub-Committee**

Tuesday 28 November 2017
7.00 pm
Ground Floor Meeting Room G02B - 160 Tooley Street, London SE1 2QH

### **Order of Business**

Item No. Title Page No.

**PART A - OPEN BUSINESS** 

- 1. APOLOGIES
- 1. NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR DEEMS URGENT

In special circumstances, an item of business may be added to an agenda within five clear working days of the meeting.

### 3. DISCLOSURE OF INTERESTS AND DISPENSATIONS

Members to declare any interests and dispensations in respect of any item of business to be considered at this meeting.

### 4. MINUTES

Minutes are to follow.

### 5. KING'S COLLEGE HOSPITAL UPDATE

King's College Hospital (KCH) Foundation Trust will attend and provide papers, to follow, on the below issues:

- i) Trust plans to improve KCH's financial position (with CCG in attendance)
- ii) Staffing retention and recruitment plans
- iii) A & E Denmark Hill update, including Emergency Recovery Plan

### 6. BETTER CARE FUND

### 7. PUBLIC HEALTH PRIORITIES

1 - 38

Public Health have provided the enclosed papers, giving an overview of the priorities and strategy for the year, with a particular focus on:

- Suicide Plan
- Sexual Health Services
- Drug services

### 8. WORK-PLAN

DISCUSSION OF ANY OTHER OPEN ITEMS AS NOTIFIED AT THE START OF THE MEETING.

**PART B - CLOSED BUSINESS** 

DISCUSSION OF ANY CLOSED ITEMS AS NOTIFIED AT THE START OF THE MEETING AND ACCEPTED BY THE CHAIR AS URGENT.

Date: 20 November 2017

### **EXCLUSION OF PRESS AND PUBLIC**

The following motion should be moved, seconded and approved if the sub-committee wishes to exclude the press and public to deal with reports revealing exempt information:

"That the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in paragraphs 1-7, Access to Information Procedure rules of the Constitution."

Item no.	Classification: Open	Date: 28th November 2017	Meeting Name: Healthy Communities Scrutiny Sub Committee
Report title:		Update on Public Health priorities	
Ward(s) or groups affected:		All	
		From: Director of Public Health	

#### SUMMARY

- 1. This is an update on the Public Health priorities for 2017-18.
- 2. The key issues affecting the health of Southwark's population are:
  - Wider determinants of health:
    - The borough is within the 20% most deprived in England.
    - More than a quarter of children in the borough live in poverty
    - Levels of long term unemployment are significantly higher than the England average.
  - Life expectancy is significantly higher than England for females in Southwark but significantly lower for males
  - Children in the borough tend to have a good start in life:
  - Infant mortality is now comparable to the England average.
  - Smoking during pregnancy is significantly lower in Southwark than the England average.
  - Breast feeding initiation is significantly higher than the England average.
  - Alcohol admissions among young people are significantly better than the England average.
  - However obesity among children is significantly above the London and England average and the gap has remained relatively stable since monitoring began. More than 1 in 4 children in Year 6 are obese.
  - Around 1 in 6 adults in the borough are current smokers, and the rate of smoking related deaths in Southwark is significantly above England.
  - The incidence of TB is significantly above the England average.
  - Premature deaths from cardiovascular disease and cancer are also significantly higher than England.
  - While local figures fluctuate each year due to the small number of cases, Southwark
    is one of seven London boroughs to report higher suicide rates than the national
    average in 2014-16 and has the third highest suicide rate of the London boroughs.
  - Levels of STIs in Southwark are high when compared to the rest of London and England. In 2016 there were 2,628 new STI diagnoses in Southwark residents, with the borough ranked 2<sup>nd</sup> highest in England.
  - In Southwark, it is estimated that there are approximately 20,000 hazardous drinkers and just over 30,000 binge-drinkers across the borough. Alcohol related admissions in Southwark, while declining, remain significantly higher than regional averages.
  - While drug use at population level has declined over the last twenty years, the types
    of drugs and the overlap with other conditions has changed. Today we see a rise in
    novel psychoactive substances and an increasingly old cohort of people who inject
    drugs who are now suffering from diseases of older age.

- 3. The Healthy Communities Scrutiny has requested more detailed information on 3 areas of interest:
  - Suicide
  - Sexual health
  - Drugs and alcohol

This information is included as appendices 1, 2 and 3.

- 4. The Healthy Communities Scrutiny has also requested an update on the public health priorities. Our 5 priorities are:
  - Social Regeneration: Making urban regeneration work for all communities
  - Better Care for All: Supporting the creation of sustainable, high quality, and effective local health and social care systems
  - Improving Health Outcomes: Improving health, wellbeing and tackling inequalities for all of Southwark's residents
  - Making health everyone's business: Developing and expanding a health in all policies approach in Southwark
  - Investing in our staff: Making the Southwark the best place to work for our staff and partners

Our strategic priorities are supported by 3 core values: (1) Tackling inequalities (2) Promoting effective partnerships (3) using data and evidence to inform practice and policies. The Public Health Business Plan is included as appendix 4.

### **BACKGROUND INFORMATION**

5. The health of Southwark's population is described in the Southwark JSNA and Annual Reports of the Director of Public Health

http://www.southwark.gov.uk/jsna

The new Annual Report for the Director of Public Health will be available in early 2018.

### **KEY ISSUES FOR CONSIDERATION**

- 6. The public health work programme for 2017/18 will include:
  - Social Regeneration: Making urban regeneration work for all communities
    - Assess the health of communities living in major regeneration areas and develop health plans for these areas.
    - Develop a framework to link social regeneration to the Council Plan and broader priorities and an outcomes framework to underpin the model of social regeneration
    - Work in partnership with colleagues in Leisure and Parks in delivering health improvement programmes and initiatives in Southwark's leisure centres, parks and open spaces
    - Supporting healthy ageing and improving the care for older people and/or those with long term

- Better Care for All: Supporting the creation of sustainable, high quality, and effective local health and social care systems
  - Re-design the Stop Smoking service to target priority groups
  - Develop a new integrated system of delivery for the 0-5 Healthy Child Programme
  - Commission a holistic risky behaviour service for young people in Southwark
  - Support the outcomes-based commissioning agenda and provide thought leadership on segmentation and intelligence-driven approaches to service redesign
  - Work with NHS and GST Charity partners to improve the care of people with multiple long term conditions Develop access and use of EMIS to support the monitoring of health outcomes in primary care
  - Improving Health Outcomes: Improving health, wellbeing and tackling inequalities for all of Southwark's residents
    - Deliver the Fairer Future Promise to double the number of NHS Health Checks by 2018
    - Support the development and delivery of Southwark's new Child Weight Management service
    - Promote healthy workplaces through the Healthy Workplace Charter
    - Undertake a school health needs assessment of 5-19 year olds and take forward recommendations
    - Lead the development of a refreshed sexual and reproductive health strategy across Southwark, Lambeth and Lewisham
    - Support the development and delivery of Southwark's Joint Mental Health and Wellbeing Strategy
    - Support a multi-stakeholder Suicide Prevention Group and deliver a Suicide Prevention Strategy
- Making health everyone's business: Developing and expanding a health in all policies approach in Southwark
  - Develop and promote a health in all policies approach across the Council
  - Continue to deliver Southwark's Healthy Weight Strategy and Tobacco Control Strategy
  - Work to strengthen the child death overview process to identify trends in modifiable factors and work across the local authority and partners to disseminate learning to improve children's outcomes
  - Lead Southwark's Joint Strategic Needs Assessment (JSNA) with partners across the Council and health services; and develop a new web-based JSNA offer
  - Plan, coordinate and develop the Pharmaceutical Needs Assessment (2018-2021)

- Investing in our staff: Making the Southwark the best place to work for our staff and partners
  - Collaborate with Council and health partners in joint learning and skills sharing
  - Support the development of the future public health workforce through a high quality speciality training programme for foundation doctors and speciality registrars
  - Support Human Resources to promote healthy workplace policies in Southwark
  - Support and facilitate learning events for primary care staff
  - Provide support and training on analytics, needs assessment and evaluation

### **Legal implications**

9. There are no legal implications for the report.

Appendices	Title
1	Suicide
2	Sexual Health
3	Drugs and Alcohol
4	Public Health Business Plan

### **BACKGROUND DOCUMENTS**

Background Papers	Held At	Contact	
Annual Public Health	Public Health	Chris Williamson	
Reports		Chris.williamson@southwark.gov.uk	
CCG MOU	Public Health	Richard Pinder	
		Richard.pinder@southwark.gov.uk	

Public Health Directorate Environment & Social Regeneration



### Appendix 1 - Briefing for the Healthy Communities Scrutiny

Update on our suicide work programme

Last updated 31 October 2017

### **SUMMARY OF POPULATION NEEDS**

#### Suicide in Southwark

In 2014-16 the suicide rate in Southwark was 10.6 per 100,000 persons and remained above both the national and regional level for a second consecutive year. Over that three year period, there were 78 cases in the borough, an average of 26 deaths per year. While local figures fluctuate each year due to the small number of cases, there has been a general increasing trend in the number of suicides in Southwark since 2007-9, reflecting the national picture. Southwark is one of seven London boroughs to report higher suicide rates than the national average in 2014-16 and has the third highest suicide rate of the London boroughs.

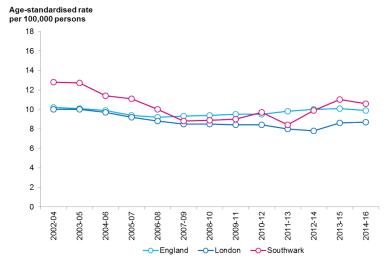


Figure 1: Age-standardised mortality rates from suicide and undetermined injury in Southwark, London and England

The majority of suicides in Southwark occur among men, mirroring the national picture. In 2013-15, just over four out of five local suicides were among men. This pattern has remained relatively stable over time. In Southwark the rate of suicide is highest among those in middle age, mirroring the national pattern. Deaths among those aged between 40 and 59 in Southwark account for approximately half of all suicides in the borough.

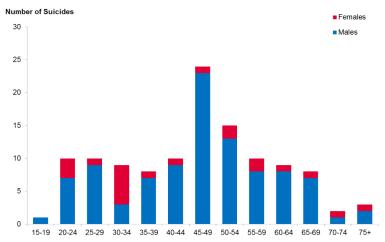


Figure 2: Number of suicides in Southwark by age, 2013-15

Hanging is the most common method of suicide in Southwark, accounting for half of all cases. Poisoning is the second most common method of suicide in the borough, accounting for around one in seven cases.

### Self-harm and attempted suicide

In a report produced by the Department of Health in 2017 – reflecting on the National Suicide Strategy - self-harm and attempted suicide was identified as the greatest determinant of future suicide risk. Self-harm is an intentional act of self-poisoning or self-injury without suicidal intent. Attempted suicide is an act of self-poisoning or self-injury with suicidal intent.

It is estimated that up to 1 in 14 adults in London report self-harming at some point in their lives. This equates to approximately 17,000 adults in Southwark. Young people are at greatest risk of self-harm, in particular young women. They are more than twice as likely to report having self-harmed as their male counterparts, with one in five young women (those aged 16 to 24) reporting having self-harmed at some point in their life.

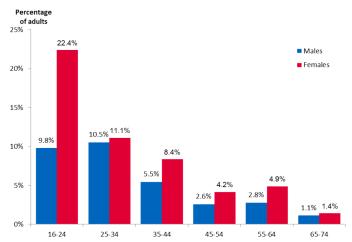


Figure 3: Self-harm and attempted suicide by age group and sex in England, 2014

### **EVIDENCE OF WHAT WORKS**

### National strategic guidance

Public Health England and the Independent Mental Health Taskforce have published guidance for local suicide planning and highlighted three main recommendations for local authorities:

- Establish a multi-agency suicide prevention group involving all key statutory agencies and voluntary organisations
- Explore opportunities to work with the local coroner court to complete a suicide audit
- Develop a suicide prevention strategy and/or action plan that is based on the national strategy and local data

### Opportunities for suicide prevention

Public Health England have developed a guidance for local suicide prevention planning which includes an overview of the latest evidence of what works, focusing on specific population groups;

- Reduce the risk of suicide in high risk groups
  - For men: Deliver information and support through trusted sources e.g. through peers and undertake outreach work in community rather than formal health settings.
  - For people in the care of mental health services: Ensuring access to specialist community teams, providing 24 hour crisis care and developing local policies on dual diagnosis patients.
  - For people in contact with the criminal justice system: Provide suicide awareness training for those who work in prisons, probation services and the courts and focus interventions on transition times
  - **For specific occupational groups:** Encourage employers to promote mental health in the workplace and reduce stigma to increase help seeking behaviour. Work with local occupational

health services to strengthen the support available to employees and regularly signpost staff to national and local support services.

- Tailoring approaches to improve mental health across all communities
  - Education of primary care doctors targeting depression recognition and treatment
  - Community based awareness campaigns to reduce stigma and discrimination and increase help seeking behaviour
  - Provide suicide prevention training to specific groups of people who have the greatest opportunity to identify people at risk of suicide e.g. GPs, mental health staff, faith leaders, teachers, community members
  - Provide financial and debt counselling support to vulnerable individuals
  - Develop school based awareness programmes targeted at specific times in the curriculum e.g. exams and transitions
- Prevention of suicide in high risk locations and reducing access to the means of suicide
  - Use local data gathered from suicide audits to identify high risk locations and consider implementing physical barriers, delivering suicide prevention training to staff (if appropriate) and fit Samaritans material such as signs and posters to increase help seeking behaviour
- Providing better information and support to those bereaved or affected by suicide
  - Distribute the Help is at Hand booklet to first responders, Coroner's offices, local funeral directors, bereavement support agencies and other voluntary organisations
  - Ensure individual approaches for anyone identified as being at risk of contagion, including rapid referral for community mental health support where needed
- Supporting the media in delivering sensitive approaches to suicide and suicidal behaviour
  - Ensure local media are aware of Samaritans' guidance on responsible media reporting
  - Encourage local media to provide information about sources of support and contact details of helplines when reporting mental health and suicides
- Reducing rated of self-harm as a key indicator of suicide risk
  - Ensure the implementation of the NICE standards and pathways CG16 and CG133 for managing patients who self-harm
- Supporting research, data collection, monitoring and information sharing
  - National guidance for local suicide prevention planning encourages working with the Coroner's Court to agree a data disclosure protocol and, if possible, carry out a suicide audit.

### **CHALLENGES**

#### Data

Local public health teams have access to limited data on suicide, self-harm and attempted suicide that provides only a basic level of information to inform local planning. We are therefore exploring other opportunities to access data that can facilitate more informed, targeted suicide prevention work:

### Working with HM Coroner

Southwark Public Health Team is exploring opportunities to work with the local coroner to complete a suicide audit. Access to information from the Coroner's Court would provide a much richer understanding of suicide locally and inform more targeted and effective interventions. For example, we would be able to obtain demographic data such as age, country of birth, ethnicity, gender and sex, as well as information as to the events leading up to a death such as contact with services and other risk factors including substance misuse and employment status.

Establishing a near-real time monitoring

In England and Wales all suspected suicides are subject to a coroner inquest, which seeks to ascertain the cause of death. The death cannot be registered until the inquest is completed, which can take months and

sometimes years. Further, a coroner records a verdict of suicide when they have decided that there is evidence, beyond reasonable doubt, that the injury was self-inflicted and the deceased intended to take their own life. Open verdicts are given to cases where there is insufficient evidence to conclude that the death was a suicide or an accident. Due to this high burden of proof, deaths that are possibly suicide, but are not coded as such, may represent a significant population of preventable deaths within a local authority

Therefore, we would like to establish a process of the near-real time reporting of all cases of suspected suicide, and where possible, attempted suicide and self-harm. Public health are working with a number of partners from the suicide prevention steering group – British Transport Police, Network Rail, SLAM and Metropolitan Police Service – to develop this process.

### WHAT WE'RE DELIVERING

### Southwark's suicide prevention steering group

Our Director of Health and Wellbeing and the Public Health Directorate have spent the last year bringing partners together around suicide prevention. A multi-stakeholder Suicide Prevention Steering Group has been established. The group meets bi-annually and consists of the following partners; Public Health, Southwark NHS Clinical Commissioning Group (CCG), London Ambulance Service, Metropolitan Police Service, Network Rail, British Transport Police, South London and Maudsley NHS Foundation Trust (SLAM), primary care, the Samaritans and other local representatives from the voluntary and community sector.

### Our prevention strategy and action plan

One of the first activities of the steering group has been the co-production of a new Suicide Prevention Strategy and Action Plan – the previous suicide strategy was released in 2005. The new strategy and action plan will be taken to a public consultation event on Wednesday 1 November 2017 and a final draft is to be taken to the Health and Wellbeing Board towards the end of November.

The strategy vision draws on guidance published in the Five Year Forward View for Mental Health by the independent Mental Health Taskforce which sets a national ambition to reduce the suicide rate in England by 10 per cent by 2020/21. Southwark has therefore set an ambition to reduce the number of suicides across the borough by at least 10% over the five years of the strategy as well as reduce the incidence of self-harm and attempted suicide.

In order to achieve this vision, we have identified seven priority areas for action that have been built around the recommendations outlined in the National Suicide Prevention Strategy and tailored to local needs:

- 1. Reduce the risk of suicide in high risk groups
- 2. Tailoring approaches to improve mental health across all communities
- 3. Prevention of suicide in high risk locations and reducing access to the means of suicide
- 4. Providing better information and support to those bereaved or affected by suicide
- 5. Supporting the media in delivering sensitive approaches to suicide and suicidal behaviour
- 6. Reducing rated of self-harm as a key indicator of suicide risk
- 7. Supporting research, data collection, monitoring and information sharing

To inform the strategy Southwark's Public Health Team completed a health needs assessment on suicide and self-harm in Southwark as part of the 2016/17 Joint Strategic Needs Assessment (JSNA).

### Working with the coroner

On behalf of the other four boroughs in the Inner East South London coroner patch, Southwark Public Health has led discussions with HM Coroner to agree a data disclosure proposal. HM Coroner has agreed the proposal in principle and a follow up meeting is scheduled to take place later in November.

### PRIORITY ACTIONS TO TAKLE THESE AREAS

Southwark's Suicide Prevention Steering Group have committed a number of actions that will contribute towards our local vision of reducing the number of suicides at least 10% as well as reduce the incidence of self-harm and attempted suicide. A number of actions have been proposed under each of the seven priority areas. An example of an action per each priority area is shown in the table below:

Priority area		Example of action	
1.	Reduce the risk of suicide in high risk groups	Provide a training workshop to staff at local bail hostels to increase awareness of suicide and how to identify those who are at risk	
2.	Tailoring approaches to improve mental health across all communities	Improve engagement with local schools and explore opportunities to develop a programme of work around emotional health and wellbeing among young people, recognising that self-harm is prevalent	
3.	Prevention of suicide in high risk locations and reducing access to the means of suicide	Identify and assess risk area locations and consider implementing physical barriers. Increase signposting to help and support services in these locations.	
4.	Providing better information and support to those bereaved or affected by suicide	Improve signposting for patients and families/carers affected by suicide to additional support	
5.	Supporting the media in delivering sensitive approaches to suicide and suicidal behaviour	Ensure local media are aware of , the guidance published by the Samaritans on responsible media reporting of suicide	
6.	Reducing rates of self-harm as a key indicator of suicide risk	Develop an appropriate out of hours pathway for individuals in distress / at crisis point, alternative to A&E	
7.	Supporting research, data collection, monitoring and information sharing	Explore opportunities to work with the HM Coroner to conduct a suicide audit	

Author
Carolyn Sharpe | Public Health Policy Officer | carolyn.sharpe@southwark.gov.uk
Richard Pinder | Consultant in Public Health Medicine | Richard.pinder@southwark.gov.uk

**END** 

Appendix 2 **Report for Healthy Communities Scrutiny** Sexual Health

Southwark Public Health

7 November 2017

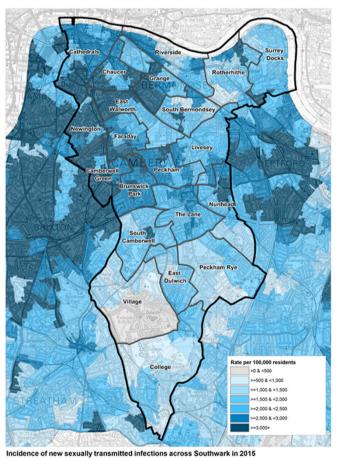






# Needs remain high, but rates of infection, teenage pregnancy and abortion are declining

### SEXUALLY TRANSMITTED INFECTIONS AND REPRODUCTIVE HEALTH



#### ncidence of new sexually transmitted infections across Southwark in 2015 bate source: Palick Health England - QUALCAD & CTAD systems Southwark Public Health Department I People & Health Intelligence I chris. williamson@southwark.gov.uk. June 2017.

#### References

1. Public Health Outcomes Framework 2016

### There are an estimated 232,000 sexually active people living in Southwark

Nationally and in Southwark, young people, men who have sex with men (MSM), and black communities are known to suffer the poorest sexual and reproductive health, and are priority groups for sexual health improvement.

### Levels of STIs in Southwark are high when compared to the rest of London and England

- In 2016 there were 2,628 new STI diagnoses in Southwark residents, with the borough ranked 2<sup>nd</sup> highest in England
- The newly diagnosed STI rate in Southwark decreased by 8.5% between 2015 and 2016; the lowest rate since 2013.

### Reproductive health needs are significant

- On average, women spend about 30 years of their life needing to avert an unplanned pregnancy
- The under-18 conception rate has fallen by 72% since 1998, to 24.7 conceptions per 1,000 women aged 15-17 years, abortion and repeat abortion rates continue to decline
- Long-acting methods of contraception (LARC) are more effective at preventing pregnancy than other methods (e.g. pill, condoms), but need to be more accessible

southwark.gov.uk

# There are over 2,500 people in Southwark who have been diagnosed with HIV

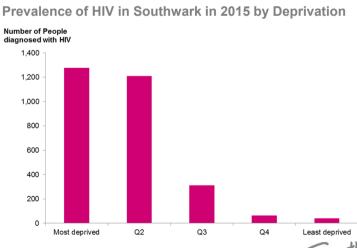
### HIV

Levels of HIV in Southwark are particularly high, with the borough having the second highest new HIV diagnostic rate in England, after Lambeth

- Males accounted for around 75% of diagnosed HIV cases in the borough in 2015. Figures for that year show the ethnic make up of our HIV population varies significantly by sex, with 65% of male cases of white ethnic background, compared to less than 10% of female cases
- Those diagnosed with HIV in Southwark are much more likely to live in deprived areas, with 43% living in communities classed as the 20% most deprived nationally

In 2016 there were 114 new cases of HIV diagnosed in Southwark – but the rate of new diagnoses declined by nearly 54% between 2011 and 2016, and the rate of late diagnosis declined by 21% over the same period

- For the period 2014-16, 36.5% of HIV diagnoses were made at a late stage of infection, but this was significantly higher among those from a Black African background
- Late diagnosis is a key predictor of HIV-related illness and early death, and therefore remains a priority area for Southwark and nationally



#### References

1. Survey of Prevalent HIV Infections Diagnosed (SOPHID), 2015. Public Health England.

# Local programmes are aligned with national frameworks and guidelines for sexual health improvement

### THE EVIDENCE BASE

Southwark Council has a mandatory responsibility to commission comprehensive, open-access sexual health and contraception services for its residents, as well as HIV prevention, and to promote good sexual and reproductive health.

- The <u>Framework for Sexual Health Improvement in England</u> (Department of Health, 2013) set out key areas for improving sexual health, based on the evidence:
  - Tackle stigma, discrimination and prejudice associated with sexual health, especially in at-risk communities (black communities, MSM, young people)
  - Reduce the rate of STI infections by facilitating easy access to tests, encouraging testing in those at risk (including partners of those with a diagnosed STI), and treating infections early
  - Reduce unwanted pregnancies by ensuring that people have access to the full range of contraception, can obtain their chosen method quickly and easily and can take control to plan the number of and spacing between any children
  - Tackle HIV through universal and targeted prevention approaches, and increase access to testing to enable early diagnosis and treatment
  - Promote integration, quality, value for money and innovation in the development of sexual health interventions and services

We commission services and programmes in line with all of these principles, and with other relevant guidelines including NICE and BASHH.

Slide 4

# Southwark Council provides a range of evidence-based, cost-effective sexual health services for residents

### OPEN ACCESS AND TARGETED PROVISION ACROSS THE LIFE COURSE

Southwark Council works in close partnership with Lambeth and Lewisham to commission sexual and reproductive health services, due to our similar population needs, and with partners across London for an integrated city-wide approach. Southwark Council has a range of services and programmes in place to improve sexual health outcomes for residents, including:

- Specialist, modern genitourinary medicine (GUM) and reproductive sexual health services delivered by King's College Hospital and Guy's and St Thomas' Hospital NHS Trusts;
- Innovative online sexual health self-testing service, SH:24, which has increased the accessibility of tests and helped to reduce demand on busy local clinics;
- Community-based HIV and sexual health promotion, outreach and testing to Black African and Caribbean communities and MSM, via the Rise Partnership;
- Specialist young people's services, with a new contract for an innovative, integrated sexual health, substance misuse, and mental wellbeing service commencing on 1 December 2017;
- Expanding and improving the quality of sexual and reproductive health services in general practice and pharmacies across the borough;
- Expanding HIV testing in a range of settings, through:
  - awareness campaigns with the public (via the pan-London HIV Prevention Programme, 'Do It London', of which Southwark is the second largest contributor) and with professionals (e.g. GPs);
  - exploring a new partnership with the Elton John AIDS Foundation to expand HIV testing and to reduce HIV-related stigma.

# Southwark has made enormous progress with sexual health improvement, but challenges remain

### **CHALLENGES**

We have had a number of key successes in Southwark, including falls in new diagnoses of HIV, STIs, teenage pregnancy, and abortion. However, demand for sexual and reproductive health services is increasing, in the face of significant budget reductions from central government.

- Through commissioning and providing our services, we must continue to strive to ensure that no community is being left behind and that regardless of age, ethnicity or financial means, everyone in Southwark has whatever they need to stay healthy and achieve sexual and reproductive wellbeing.
- It is therefore critical that we find lower cost and more efficient ways of providing residents with high quality sexual health services that will meet needs in the coming years, and we are working to deliver this locally and as part of the pan-London sexual health transformation programme.

The national pre-exposure prophylaxis (PrEP) trial (commenced October 2017) is expected to have an enormously positive impact on HIV transmission, but may have local resource implications

- PrEP is an effective method of HIV prevention for people who do not have HIV but are at substantial risk of contracting it. It consists of taking (usually daily) antiviral medication which reduces the risk of HIV establishing permanent infection if exposed.
- Southwark Council is excited about the opportunity PrEP offers in reducing new HIV infections not just in MSM, but in heterosexual transmission too. We are fully engaged in the London HIV Prevention Board and have been supporting our local trusts in implementing the national PrEP trial.
- As trial participants are enrolled at and monitored through GUM clinics, it is expected that there will be a small increase in clinic usage and STI testing, which may have a cost implication over the 3-year trial period. This will be monitored on an ongoing basis.

Slide 6

# Southwark Council is leading on the development of a new sexual and reproductive health strategy for LSL

### STRATEGIC PLAN 2018-21

Our shared vision for sexual and reproductive health improvement in Lambeth, Southwark and Lewisham will be summarised in our 'four pillars'

- Safe and healthy relationships
- Good reproductive health across the life course
- High quality STI testing and treatment
- Living well with HIV

Our strategy, to be completed in early 2018, will extend from upstream prevention (e.g. supporting high quality PSHE in schools), to tackling stigma in at-risk communities (e.g. working with faith groups and community-led programmes to increase HIV testing), to improving knowledge of and access to the range of contraceptive choices (e.g. through work with primary care), to providing high quality, cost-effective clinical services (in clinics and online), and beyond.

Partners across Lambeth, Southwark and Lewisham have agreed to work collectively under the following shared principles:

- Working in partnership at a local, London, and national level
- High quality commissioning for effective and financially sustainable services
- Listening to service users' views and experiences, and using these to improve what we do
- Focus on reducing inequalities in sexual and reproductive health
- Build capacity and capability around sexual and reproductive health
- Capitalising on technological innovations



### 17

### **CONTACT DETAILS**

Lead Author: Kirsten Watters

Job Title: Consultant in Public Health

Email: kirsten.watters@southwark.gov.uk

Acknowledgements: Sigrid Blackman

Chris Williamson

Approved by: Kevin Fenton



### Public Health Directorate Environment & Social Regeneration



### Appendix 3 Briefing for the Healthy Communities Scrutiny Update on our drugs and alcohol work

Last updated 1 November 2017

### **SUMMARY OF POPULATION NEEDS**

Like other inner London boroughs, Southwark residents face the challenges of addiction – whether through drug or alcohol misuse. These are problems that affect some of our most vulnerable residents as well as some of our most affluent.

Drug related deaths – a proxy indicator of underlying need – have risen over recent years in Southwark, but remain similar to the national rate. There were 35 deaths registered in Southwark over the 2013-15 period with an underlying cause of drug misuse, equating to approximately 12 cases each year.

Based on national prevalence levels, an estimated 25,750 residents in Southwark would have used a drug in the last year and 13,190 residents would have taken a drug in the past month. The proportion of individuals taking drugs is higher among young people, with approximately 18% of 16-24 year olds reported using a drug in the last year, equivalent to 6,600 young people in Southwark. There are approximately 7,200 frequent drug users across the borough.

Like many other areas, we are observing an increasingly old cohort of people who inject drugs – who are now suffering from diseases of older age. As a result their needs are changing. There are fewer younger people injecting heroin and other opiates – considered as being the 'harder' end of the substance misuse spectrum. In 2015/16, 65% of Southwark's treatment caseload were aged 40 or over.

While drug use at population level has declined over the last twenty years, the types of drugs and the overlap with other conditions has changed. Today we see a rise in novel psychoactive substances – a highly varied set of drugs associated with younger people and the club scene. Until recently many of these were legal – so-called legal highs. Cannabis too continues to be used frequently in Southwark. Another emerging trend is addiction to prescription drugs, although the scale and nature of the problem is still to be fully understood.

Substance misuse is often associated with other mental health problems – whether diagnosed or not diagnosed. This area is termed 'dual diagnosis'. We also see other health risks that are driven by substance misuse: for example injecting drugs increases the risks of blood borne infections such as HIV, Hepatitis B and Hepatitis C. In Southwark it is estimated 2,900 residents are infected with Hepatitis C.

Alcohol remains a major challenge in Southwark. It is estimated that there are approximately 20,000 hazardous drinkers and just over 30,000 binge-drinkers across the borough. Alcohol related admissions in Southwark, while declining, remain significantly higher than regional averages. Additionally, compared to both national and regional comparators, Southwark has much higher mortality rates attributable to alcohol overconsumption. Southwark has historically been faced with alcohol in the context of deprivation: 80% of our homeless population report a substance misuse or mental health problem. Yet the regeneration of the borough presents challenges too. More affluent residents tend to consume more alcohol. The bustling night time economy in Southwark also draws in alcohol related problems from other parts of London and the country. As such, alcohol related harm including violence, crime and disorder represent a significant burden on local night-time economy services

In summary, addictions and alcohol-related harms are changing. This necessitates timely needs assessment from Public Health and the Drug and Alcohol Action Team – the results of which inform our commissioning decisions and public health actions that we take.

### **EVIDENCE OF WHAT WORKS**

In 2015 the Department of Health commissioned Public Health England to review the evidence on the outcomes of drug and alcohol treatment to inform policy.

The review found the following outcomes for drug treatment in England: The net 'Benefit-Cost' ratio for drug treatment in England is 2.5 to 1 Unemployment Needle Opiate Psychosocial Exchange Substitute interventions and **Programmes Treatment** impact has homelessness have a significant reduce the (OST) such as varied results. rates of HIV methadone and however was negative impact on treatment and Hepatitis buprenorphine shown to C in injecting outcomes and reduces illicit reduce criminal drug users people without drug use. behaviour injecting, crime homes or jobs are more likely to and mortality relapse

The evidence for substance misuse prevention and treatment is strong. A more recent review by Public Health England in January 2017 issues the following advice:

- Ensure drug treatment continues to address a broad range of outcomes, including harm reduction, social integration and recovery, through integrated treatment and recovery support systems;
- Review how outcomes of success in treatment is measured;
- Deliver treatment to support a predicted ageing population, with the ability to support the complex and multiple health and social issues this cohort may present with, in addition to adopting a realistic recovery ambition for a group that are less likely to successfully complete treatment;
- Provide long term and effective housing and employment support to help service users gain and maintain appropriate housing and jobs;
- And develop strategies to address the recent increase on drug related deaths throughout the nation.

Also this year, the Department of Health published updated clinical management guidelines suggesting the following best practice:

- Assessment of drug misusers must be holistic in nature, and consider at least drug and/or alcohol misuse, health, social functioning and criminal involvement
- All service users must consent to treatment, have a consistent and named keyworker, and a mutually agreed recovery plan which is reviewed regularly
- Prescribed interventions must always be complimented with psycho-social interventions
- Effective partnerships with primary and secondary health care providers is increasingly important to respond to general healthcare needs
- Services must have a flexible outlook on treatment, responding to the ever changing needs of the service users and should include individuals, families and carers in service development
- Aftercare or rapid re-engagement is important to reduce the risk of relapse and/or harm

### **CHALLENGES & RESPONSE**

The Southwark Community Safety Partnership Rolling Plan 2017-20 and the draft Alcohol Action Plan have and been and continue to be impacted by the financial challenges faced by the key stakeholders: local authorities, criminal justice, policing, health and voluntary sector partners.

On an individual level too, austerity has seen mitigation and support withdrawn: employment and housing support make recovery more challenging. Treatment and recovery are best achieved as part of a wider response.

Southwark Council has committed to the Drug and Alcohol Action Team and Public Health resource as a means to mitigate these challenges. The capability to continue to engage and support partners is critical to developing and sustaining a system of support for some of our most vulnerable residents. The resources also enable us to undertake needs assessment, identify relevant priorities (as the need changes) and commission effective and consistent services.

### WHAT WE'RE DELIVERING

### Partnership Working and Strategy

Southwark Council is undertaking detailed needs assessments to better identify unmet need as the epidemiology and burden of substance misuse changes. An alcohol needs assessment has been published and a Joint Strategic Needs Assessment on club drugs is underway and a further programme of JSNA is in development.

Southwark has also recently convened a Drug Related Deaths (DRD) Overview Panel which meets regularly to drive quality improvement through the treatment system. Chaired by the Drug and Alcohol Action Team, the DRD has brought together service providers and other clinicians to strengthen accountability and clinical quality. The group is now working with HM Coroner to identify opportunities to share information in a more effective and timely manner.

The teams are also seizing the opportunities for more joined-up working. More coordination with health partners has resulted in opportunities to improve the continuity of care for those with mental health problems and substance misuse issues. Our recent award of an integrated contract for children and young people that spans sexual health and substance misuse is another example of more integrated working.

The Alcohol Prevention Group was established in 2016 and brings together a large number of statutory and non-statutory partners – from regulatory services and licensing through to hospital clinicians. The group has built upon joint working in alcohol licensing and has completed a number of work packages including a nationally-recognised alcohol policy and practice self-audit.

### Commissioned Services

In Southwark we commission a range of services (approximately £5.0m per year) to both prevent and treat substance misuse.

Tier	What is it?	Where does it happen?
1	Information, screening, advice and referral in generalist settings (such as IBA)	Via NHS General Practice, Schools and others
2	Similar to Tier I, but provided in outreach or more specialist settings and can target 'at risk' individuals for problematic drug and/or alcohol use	Through the Adult Integrated Drug and Alcohol Treatment System and other providers including Recovery Support; a separate integrated service with sexual health is in the process of being launched for children and young people. We also
3	More intensive support provided by specialists involving personal / group therapy. The treatment is structured in nature. Includes pharmacological interventions such as Opiate Substitute Treatment	have provision in other locations such as supervised dispensing and administration in pharmacies and needle exchange services.
4	Residential Treatment, such as inpatient detoxification facilities and rehabilitation centres	Specialist providers

The last three years has seen significant changes to commissioning arrangements with almost all the services transferred from a series of grants into more transparent and accountable contracts. Our new

integrated adult treatment system provider CGL has attracted praise from local general practitioners who've observed improvements in continuity and quality of substance misuse support. At the same time, the philosophy underpinning treatment has also shifted from more medically-centric models to a theme of recovery – in-line with national guidance and best practice. At present there is a recommissioning underway of the Tier 4 services for residential and non-residential rehabilitation.

#### **Authors**

Carolyn Sharpe | Public Health Policy Officer | <a href="mailto:carolyn.sharpe@southwark.gov.uk">carolyn.sharpe@southwark.gov.uk</a>
Amy Harmsworth | Analyst, Drugs and Alcohol Action Team | <a href="mailto:amy.harmsworth@southwark.gov.uk">amy.harmsworth@southwark.gov.uk</a>
Donna Timms | Manager, Drugs and Alcohol Action Team | <a href="mailto:donna.timms@southwark.gov.uk">donna.timms@southwark.gov.uk</a>
Richard Pinder | Consultant in Public Health Medicine | <a href="mailto:richard.pinder@southwark.gov.uk">richard.pinder@southwark.gov.uk</a>

**END** 

# Making health everyone's business

Public Health Directorate
Business Plan 2017/18

Last updated 30 September 2017

Environment and Social Regeneration







### **Foreword**

### Cllr Maisie Anderson | Cabinet Member for Public Health and Social Regeneration

What links the Roman orator Cicero with a sexual health clinic in Walworth? "The Health of the People is the Highest Law" - a stone plaque brandishing this proclamation by Cicero still sits above the entrance to the Walworth Clinic today. Built in the 1930s, the borough architects of the Clinic clearly wanted to make a symbolic declaration in the face of the poor health – and healthcare – endured by those living in our part of London at the time.

Southwark is a very different place now – not least since the establishment of the NHS in 1948 - and we know that health inequalities in our part of London have reduced monumentally in so many ways. But there is still a way to go. If we are to truly achieve our 21st Century goal of a "Fairer Future for All" then the work done by our Southwark Public Health team continues to be of critical importance.

Since joining the Council in 2013, the Public Health team has gone from strength to strength. From working on the delivery of Free Swim & Gym and Free Healthy School

meals to reducing rates of smoking and delivering a new obesity strategy - the Public Health team has been doing some visionary work. Social Regeneration - ensuring that the wellbeing of communities is at the heart of change in the borough - is a new area of focus for the Council and the Public Health team has a big part to play in making this happen. An exciting new cross council initiative, Social Regeneration puts Southwark at the forefront of thinking on this area in the UK and globally.

This latest business plan sets out the key areas of focus for the team going forward, as well as showcasing the great achievements that Public Health have already delivered in our borough. By working with every department in the Council – and making sure that health concerns are always front and centre – our Public Health team continue to bring Cicero's proclamation to life so many centuries after he made it.







### Fairer future Delivering our promises

### **Delivering a Fairer Future for All** Southwark Council plan 2014/15 to 2017/18



### Value for moneu

We will continue to keep Council Tax low by delivering value for money across all our high quality services.

### Free swimming and gyms

We will make it easier to be healthier with free swimming and gyms for all residents and will double the number of NHS health checks.

#### Oualitu affordable homes

We will improve housing standards and build more homes of every kind including 11,000 new council homes with 1,500 built by 2018. We will make all council homes warm, dry and safe and start the roll out of our quality kitchen and bathroom guarantee.

#### More and better schools

We will meet the demand for primary and secondary school places and drive up standards across our schools so at least 70 per cent of students at every secondary get at least five good GCSEs.

#### Nurseries and childcare

We will help parents to balance work and family life including investment in our children's centres to deliver more quality affordable childcare and open two new community nurseries.

#### A greener borough

We will protect our environment by diverting more than 95 per cent of waste away from landfill, doubling the estates receiving green energy and invest in our parks and open spaces.

#### Safer communities

We will make Southwark safer with increased CCTV, more estate security doors and a Women's Safety Charter. We will have zero tolerance on noisy neighbours.

### ducation, employment and training

We will guarantee education, employment or training for every school leaver, support 5,000 more local people into jobs and create 2.000 new apprenticeships.

We will revitalise our neighbourhoods to make them places in which we can all be proud to live and work, transforming Elephant and Castle, the Aylesbury and starting regeneration of the Old Kent Road.

### Aae friendlu borovah

We want you to get the best out of Southwark whatever your age so we will become an age friendly borough including the delivery of an Ethical Care Charter and an older people's centre of excellence.

### Ovality affordable homes

Good quality affordable homes are essential to maintaining strong communities and making this a borough which all residents are proud to call home. We are determined to lead the way in London. We'll build more homes of every kind across the borough and use every tool at our disposal to increase the supply of all different kinds of homes in the borough.

Homes in Southwark will be of such quality that when you come to see families and friends in Southwark. you will not know whether you are visiting homes in private, housing association or council ownership. We will make sure that vulnerable residents and

families are helped to find the right housing and live as independently as possible. We aim for our residents to take pride in and feel responsible for their homes and the local area too.

### Rest start in life

We believe in giving all our young people the best start in life. We want them to be in a safe, stable and healthy environment where they have the opportunity to develop, make choices and feel in control of their lives and future.

We will offer our young people and families. including those who are more vulnerable or have special educational needs, the right support at the right time, from their early years through adolescence and into successful adult life.

We will work with our looked-after children to find them stable and loving homes. In our schools,

the high demand for new primary and secondary places means we'll make sure there are enough places for all. Our children deserve the very best and that's what we'll always



### Strong local economy

When our economy is strong, then all our residents benefit. It brings more opportunities for people in Southwark to find work, get into training and achieve their aspirations.

We want our town centres and high streets to thrive. We want to make Southwark the place to do business in a central London and global economy. where business owners know this is the borough where their enterprises will grow and prosper.

We want our residents to be and stay financially independent. With local business and other partners we'll make sure our residents are equipped with the skills and knowledge to access the many exciting opportunities that being in Southwark brings.



### Healthu active lives

For people to lead healthy lives, we need to tackle the root causes of ill health and reduce the inequalities that limit the lives of too many in our society. The council is now responsible for public health and we will work across the council to reduce health inequalities and improve people's lives; for example, by making all council homes warm, dry and safe and by building quality new homes, we are helping people to live healthier lives.

We will work with residents and our partners to build resilient communities, extending opportunities to all to maintain and improve their health and wellbeing.

We're also committed to people remaining in their own homes for longer and we want our most vulnerable residents to lead and enjoy independent lives, achieve their goals and have a great future in Southwark.



### Cleaner greener safer

We want people to feel safe in their borough, to walk down clean streets and to know that their borough is leading the way when it comes to things that matter like recycling and reducing landfill waste. With local people our aim is to deliver the very best so the borough is clean, green and a safe place to be.

We'll keep getting the basics right and continue to do all we can to be as efficient as possible in

providing the essential services you need. We want to make a positive difference to the quality of life in Southwark and by providing good services well, we know we can deliver.



### Revitalised neighbourhoods

We are a borough with a proud heritage and a great future. It's a future filled with potential, with some of the most exciting and ambitious regeneration programmes in the country being delivered right on our doorstep.

We will continue work with our local communities to make our neighbourhoods places that we are proud to live and work in. We will ensure that all our residents can access the benefits of our regeneration programmes and the opportunities created by those programmes - new homes, new jobs, new infrastructure.

Southwark is a borough that is growing for the future and we'll ensure that our residents and neighbourhoods prosper from that growth.



Our Values...

1 Treating residents as if they were a valued member of our own family

Being open, honest and accountable

Spending money as if it were from our own pocket

4 Working for everyone to realise their own potential

Making Southwark a place

### Introduction

### Professor Kevin Fenton | Director of Health and Wellbeing

These are uncertain, complex and challenging times in which political austerity, contraction of the social state, declining trust in traditional authorities, pressures on local government funding, growing demand on services and demographic change have placed significant challenges on families and communities. Although the everyday living experience for Southwark residents has improved and continues to do so, now more than ever, it is essential that we use all the tools available to us to support the transformation of lives and communities throughout the borough.

In addressing the wider determinants of health, Southwark's urban regeneration has been a key strategy to revitalise communities by transforming the built environment and injecting enhanced economic opportunities. Regeneration is a long term process involving redevelopment and the use of social, economic, and environmental action to reverse urban decline and create sustainable communities. We now have an opportunity through social regeneration to continue this transformation of our community by making health and wellbeing a primary outcome of our regeneration efforts and making regeneration work for everyone.

However changing the built and social environment will only be part of the solution. We need to engage everyone who lives, works and plays in the borough to be more engaged in their healthy and wellbeing. Getting this message out to people is more important than ever, with <a href="new analysis from PHE">new analysis from PHE</a> showing that 8 out of 10 people aged 40 to 60 either weigh too much, drink too much or don't exercise enough. It's understandable that when people are busy with work, with families and with the daily grind, sometimes their own health is the least of their priorities. The <a href="Global Burden of Disease">Global Burden of Disease</a> study revealed that more than 60% of the top four health conditions contributing to premature death and ill health (heart disease, stroke, lung cancer and breast cancer) can be attributed to behavioural or a combination of behavioural and non-behavioural risks.

This 2017/18 Public Health Department Business Plan highlights new priorities for Southwark Council, aligning our work fully with the Southwark Our Fairer Future principles and commitments particularly: (1) Working for everyone to realise their own potential and (2) Making Southwark a place to be proud of. We want opportunities to be available to everyone in Southwark, allowing all to have a good quality of life, and it is important that people and communities in danger of being left behind are supported to access these opportunities.







### Who are we?

### The Southwark Public Health Team

Public Health: working with you for a healthier and happier Southwark.

The Public Health team works to improve and protect the health and wellbeing of people living and working in Southwark. We collaborate with a wide range of partners to enable healthy choices, reduce health inequalities and ensure services are delivered effectively, fairly and sustainably.

Southwark's public health team is a multidisciplinary group of about 30 experts, with backgrounds in medicine, nursing, social work, social sciences, geography, natural sciences and the arts. We work within Southwark Council and closely with NHS Southwark CCG to improve health outcomes and leverage the statutory and voluntary sectors' capacity and spend. We publish reports and analysis to underpin investment and policy decisions.

We are responsible for commissioning sexual health services, children's public health nursing services, drug and alcohol services, and a range of other health improvement services and initiatives.

We cover a huge portfolio: from suicide prevention through to how many hours bars can sell alcohol, sexual health, smoking cessation, regeneration, immunisation and screening, transport systems and urban planning.

### Our teams:

- Place and Health Improvement
- Children and Health Protection
- People and Health Intelligence
- Business administration







# What are our priorities?

### Southwark Public Health focus areas

Priority	Area for action
1	Social Regeneration: Making urban regeneration work for all communities
2	Better Care for All: Supporting the creation of sustainable, high quality, and effective local health and social care systems
3	Improving Health Outcomes: Improving health, wellbeing and tackling inequalities for all of Southwark's residents
4	Making health everyone's business: Developing and expanding a health in all policies approach in Southwark
5	Investing in our staff: Making the Southwark the best place to work for our staff and partners

Our strategic priorities are supported by 3 core values: (1) Tackling inequalities (2) Promoting effective partnerships (3) using data and evidence to inform practice and policies







### What do we do?

### Our core offer: Essential public health services

In response to the health and wellbeing challenges in our times, the ten essential public health services describe the activities that should be undertaken by public health teams for all communities and provide a guiding framework for the responsibilities of local public health systems.

The public health team in Southwark possess the skills, capacity and training to provide advice, support and delivery on each of these areas:

- 1. Monitor the health status of the community
- 2. Investigate and diagnose health problems and hazards
- 3. Inform and educate people regarding health issues
- 4. Mobilize partnerships to solve community problems
- 5. Support policies and plans to achieve health goals
- 6. Enforce laws and regulations to protect health and safety
- 7. Link people to needed personal health services
- 8. Ensure a skilled, competent public health workforce
- 9. Evaluate effectiveness, accessibility and quality of health services
- 10. Research and apply innovative solutions







### **Transforming lives in Southwark**

### Our recent Public Health accomplishments



In 2016/17 the Public Health team has made significant achievements in promoting health and wellbeing:

- ✓ We published the Annual Public Health Report 2016, providing a comprehensive overview of health and wellbeing in the borough which has underpinned a number of other projects.
- ✓ We successfully won a bid to participate in the Home Office Local Alcohol Action Area programme.
- ✓ Southwark has made significant progress in reducing the numbers of teenage conceptions, with a 72% reduction since 1998.
- ✓ We have commissioned several innovative sexual health services for Southwark's residents, including an online sexual health testing service, a new HIV prevention service and a condom distribution scheme.
- ✓ About 46,000 people smoke in Southwark, marking a reduction from 21% in 2010 to 16% today: lower than the average for London and England.
- ✓ The number of NHS Health Checks completed in Southwark is increasing every year and we are on a trajectory to meet the national target of 75%.
- ✓ We co-ordinated an opportunity to work with Sainsbury's in piloting a £50,000 community initiative in South Camberwell to help people waste less food, save money, and eat more healthily.







## 1. Social regeneration

### Making regeneration work for everyone, with wellbeing a primary outcome

Southwark is a dynamic and enterprising borough at a time of fast-paced development. While urban regeneration is important and has benefits for both individuals and the society at large, it is also associated with health and wellbeing challenges. In Public Health, we are committed to making the borough work for everyone through social regeneration. This is an active process that ensures the places where people live, now and in the future, positively shape life opportunities and wellbeing, reduce inequalities and create engaged communities.

#### The team's core function is:

- Develop and promote the social regeneration approach to major urban regeneration in Southwark
- Support the development of Southwark's built environment to promote health and wellbeing

Areas of focus for 2017/18	Lead Team
Assess the health impact of large scale redevelopments eg. Old Kent Road and Canada Water	Place
Advise partners on behavioural science methodologies to improve healthy choice architecture	Place
Develop a framework to link social regeneration to the Council Plan and broader priorities	Place
Develop an outcomes framework to underpin the model of social regeneration	Health Intelligence
Work in partnership with colleagues in Leisure and Parks in delivering health improvement programmes and initiatives in Southwark's leisure centres, parks and open spaces	Health Improvement
Supporting healthy ageing and improving the care for older people and/or those with long term conditions	People & Health Intelligence







### 2. Better care for all

### Applying public health approaches to improve outcomes, quality and value

Public Health supports the creation of sustainable, high quality and effective local health and social care systems. We will work with commissioners and providers of health and social care services to ensure that our residents have access to quality care that is safe and effective.

#### The team's core functions include:

- Provide evidence based strategic advice on health and social care system development and integration
- Take forward evidence based approaches to embed prevention and early identification into Council and health services
- Commission high quality and financially sustainable health services including NHS Health Checks, Stop Smoking, sexual health services and substance misuse services
- Monitor patterns of variation in service delivery across the range of health service and Council partners

Areas of focus for 2017/18	Lead Team
Re-orientate the Stop Smoking service to target priority groups	Health Improvement
Develop a new integrated system of delivery for the 0-5 Healthy Child Programme	Children & Health Protection
Commission a holistic risky behaviour service for young people in Southwark	Children & Health Protection
Support the outcomes-based commissioning agenda and provide thought leadership on segmentation and intelligence-driven approaches to service redesign	People & Health Intelligence
Work with NHS and GST Charity partners to improve the care of people with multiple long term conditions	People & Health Intelligence
Develop access and use of EMIS to support the monitoring of health outcomes in primary care	Health Intelligence







## 3. Improving health outcomes

### Improving health and wellbeing across the life-course and reducing inequalities

Southwark is a diverse and dynamic borough with modern health and care challenges. Public Health is committed to working with our partners across the system to improve health, wellbeing and tackle inequalities for all of our residents.

### The teams' core functions include:

- Develop and deliver local policies and strategies that promote healthier lifestyles and reduce inequalities in Southwark, ensuring that all activity is based on evidence and best practice
- Enhance the delivery of the Healthy Child Programme 0-19 years and drive value through health visiting, school nursing and Family Nurse Partnership
- Coordinate and deliver the statutory Child Death Overview Panel (CDOP) on behalf of Lambeth and Southwark
- Enable a coordinated response to outbreaks and local health protection incidents

Areas of focus for 2017/18	Lead Team
Deliver the Fairer Future Promise to double the number of NHS Health Checks by 2018	Health Improvement
Support the development and delivery of Southwark's new Child Weight Management service	Health Improvement
Promote healthy workplaces through the Healthy Workplace Charter	Place
Undertake a school health needs assessment of 5-19 year olds and take forward recommendations	Children & Health Protection
Lead the development of a refreshed sexual and reproductive health strategy across Southwark, Lambeth and Lewisham	Children & Health Protection
Support the development and delivery of Southwark's Joint Mental Health and Wellbeing Strategy	People & Health Intelligence
Support a multi-stakeholder Suicide Prevention Group and deliver a Suicide Prevention Strategy	People & Health Intelligence







### 4. Making health everyone's business

### Mainstreaming a health in all policies approach across Southwark

As part of the Health and Social Care reforms in 2012, local authorities have been given renewed responsibility for improving the public's health. Public Health will seek to influence all the wider stakeholders to engage in the health and wellbeing agenda and take forward a collaborative approach to improving health. Public Health will develop and expand a health in all policies approach in Southwark and promote "Making Every Contact Count" (MECC).

#### The team's core functions include:

- Embed MECC in the work of every Council, health and NHS partner
- Advocate for public health in all local plans, strategies and projects
- Develop strong relationships across the Council, health service and voluntary community sector
- Provide support to partners on the use and interpretation of health intelligence and other data
- Build capacity to improve data quality and use and interpretation of health intelligence across the organisation

Areas of focus for 2017/18	Lead Team
Develop and promote a health in all policies approach across the Council	Health Improvement
Continue to deliver Southwark's Healthy Weight Strategy and Tobacco Control Strategy	Health Improvement
Work to strengthen the child death overview process to identify trends in modifiable factors and work across the local authority and partners to disseminate learning to improve children's outcomes	Children & Health Protection
Lead Southwark's Joint Strategic Needs Assessment (JSNA) with partners across the Council and health services; and develop a new web-based JSNA offer	People & Health Intelligence
Plan, coordinate and develop the Pharmaceutical Needs Assessment (2018-2021)	People







# 5. Investing in our staff

Developing skills, capacity and opportunities for population health and prevention

In Public Health, we are committed to the on-going learning and professional development of all of our staff as well as ensuring that our working environment promotes positive wellbeing. In addition, Public Health is interested in identifying opportunities to exchange and disseminate knowledge, experience and approach with our key partners across the health and care system to promote our visibility and improve practice. Above all, Public Health will ensure that Southwark is the best place to work for our staff and partners.

### The team's core functions include:

- Ensure on-going learning and professional development for permanent and trainee members of the team
- Provide training for Health Education England Public Health registrars and junior doctors from King's College Hospital NHS
   Foundation Trust
- Provide opportunities for volunteering and external career development

Areas of focus for 2017/18	Lead Team
Collaborate with Council and health partners in joint learning and skills sharing	All teams
Support the development of the future public health workforce through a high quality speciality training programme for foundation doctors and speciality registrars	All teams
Support Human Resources to promote healthy workplace policies in Southwark	Place
Support and facilitate learning events for primary care staff	Children & Health Protection
Provide support and training on analytics, needs assessment and evaluation	People & Health Intelligence







### **Business administration**

The business administration team provides a high quality support function to the Director of Public Health and the wider public health team. This includes acting as first point of contact for stakeholders and maintaining a strong working relationship with the local authority and governing bodies to work cohesively towards our shared goals.

### The team delivers the business administration function in a number of ways:

- Ensure robust business continuity is in places
- Ensure robust financial governance is in places
- Ensure all staff members are compliant in mandatory areas of training
- Support and work towards Public Health's strategic vision
- Undertake all work in accordance with the equal opportunity, health and safety and data protection policies and procedures.

### Our areas of focus in 2017/18:

- Financial governance
- Risk management
- Budget monitoring and savings
- Forward planning
- Continuing to support and work towards the shared strategic vision
- Compliance in all mandatory areas of training







# People and budgets

Southwark Public Health team is a multi-disciplinary group of approximately 30 experts, with backgrounds in medicine, nursing, social work, social sciences, geography, natural sciences and the arts. We provide training placements for approximately six public health specialty trainees and junior doctors per year.

We work collaboratively with several partner organisation, they include:

- Other Council departments such as Housing, Planning and Local Economy Team
- NHS Southwark Clinical Commissioning Group (CCG)
- Children and Young People's Health Partnership
- King's Health Partners (including King's College London)
- Guy's and St Thomas' NHS Foundation Trust
- King's College Hospital NHS Foundation Trust
- South London and Maudsley NHS Foundation Trust
- School of Public Health, Imperial College London

### Our budget for 2017/18

### £28,194k from the ring-fenced Public Health Grant.

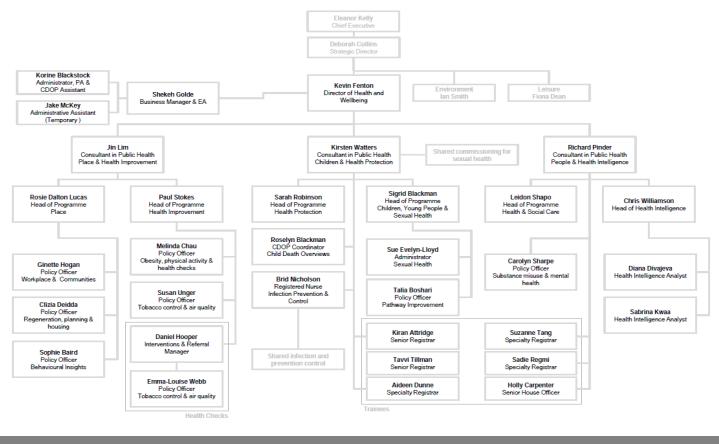
We will spend approximately £7m on sexual and reproductive health services, £7m on health visiting and school nursing and £5m on substance misuse services among many other public health services and programmes.







# **Appendix I: Organisational chart**









# **Appendix II: Work Plans**

This appendix details the work plan for each section of Public Health for 2017/18:

- I. Place and Health Improvement
- II. Children and Health Protection
- III. People and Health Intelligence
- IV. Business administration







This page is intentionally blank

### HEALTHY COMMUNITIES SCRUTINY SUB-COMMITTEE MUNICIPAL YEAR 2017-18

### **AGENDA DISTRIBUTION LIST (OPEN)**

NOTE: Original held by Scrutiny Team; all amendments/queries to Julie Timbrell Tel: 020 7525 0514

Name	No of	Name	No of copies
Sub-Committee Members  Councillor David Noakes (Vice-Chair) Councillor Sunny Lambe Councillor Leo Pollak Councillor Maria Linforth-Hall  Health Partners  Matthew Patrick, CEO, SLaM NHS Trust Jo Kent, SLAM, Service Director, Acute CAG, SLaM Lord Kerslake, Chair, KCH Hospital NHS Trust Sarah Willoughby, Head of Stakeholder Relations King's College Hospital KCH FT	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Council Officers  David Quirke-Thornton, Strategic Director of Children's & Adults Services Andrew Bland, Chief Officer, Southwark CCG Malcolm Hines, Southwark CCG Kevin Fenton, Director of Public Health Jin Lim, Consultant Public Health Jay Stickland, Director Adult Social Care Shelley Burke, Head of Overview & Scrutiny Sarah Feasey, Legal Chris Page, Head of External Affairs Tamsin Hewett, Liberal Democrat Political Assistant Julie Timbrell, Scrutiny Team SPARES  External Tom White, Southwark Pensioners' Action Group Aarti Gandesha Healthwatch Southwark Elizabeth Rylance-Watson	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Electronic agenda (no hard copy)  Reserves Councillor Gavin Edwards Councillor Octavia Lamb Councillor Eliza Mann Councillor Sandra Rhule Councillor Martin Seaton  Members Councillor Rebecca Lury (Chair) Councillor Helen Dennis Councillor Bill Williams		Total:34  Dated: October 2017	