

## **Integration Joint Board**

Date of Meeting: 21 September 2022

Title of Report Public Health Team Annual Report 2021-22 and Living

Well Mid-Strategy Report 2012-22/Prevention approach

Presented by: Alison McGrory, Interim Associate Director of Public

Health

### The Integrated Joint Board/Committee is asked to:

- Note the reports on Living Well 2019 2022 and Public Health Team activity in 2021-2022
- Note the strategic approach to prevention in Argyll and Bute
- Endorse the role of the IJB in providing leadership to prevent health and social care problems from arising

### 1. EXECUTIVE SUMMARY

This paper outlines public health activity in Argyll and Bute to prevent ill-health and improve health and wellbeing outcomes for the population. The detail of the paper covers the following three areas:

- Public Health Team Annual Report for 2021-2022
- Living Well Mid-strategy Report for 2019 2022
- Update on the strategic approach to prevention in the HSCP

Full reports are available to view here:

https://bit.ly/ABPublicHealthAnnualReport-2021-22 https://www.ablivingwell.org/s/Final-Living-Well-interim-report-rr66.pdf

#### 2. INTRODUCTION

Argyll and Bute Health and Social Care Partnership (HSCP) has a Public Health Team that works towards improving the health and wellbeing outcomes of the population of Argyll and Bute. This team is part of a wider NHS Highland directorate. The steer for this Public Health work comes from different directions, for example: national strategy; national Public Health priorities; HSCP strategic

priorities; and community led aspirations. The Christie Commission of 2011 estimated that 40% of public sector spending is on problems that could be avoided given earlier intervention.

Prevention of health problems can take place at three levels:

- Primary population wide health improvement and laying the foundations of good health
- **Secondary** targeting health improvement to those at risk of ill-health
- Tertiary directed activity with people already experiencing ill-health to minimise escalating problems

### 3. DETAIL OF REPORT

### 3.1 Public Health Team Annual Report for 2021-2022

The Public Health Team in Argyll and Bute includes health improvement, health intelligence/data analysis and the Alcohol and Drug Partnership support team. An annual work plan sets out the work of the team and this is reported at the end of each year.

Throughout 2021 – 2022 there were ongoing demands on the team to support the pandemic response; however there was an active remobilisation of core work and recognition of the important contribution the team makes to pandemic recovery as well as addressing the social determinants of health and prevention. The full report provides detail on the range of activity delivered; highlights of this work include:

- Overseeing the commissioning of Community Links Workers in primary care
- Cool2Talk online support for young people
- Smoking cessation
- Smoke free education in primary and secondary schools
- Contribution to strategic priorities such as Suicide Prevention action plan, the Child Poverty plan and the Social Mitigation strategy
- Screening inequalities research
- Youth mental health first aid training
- Health behaviour change training
- Income maximisation and child poverty work
- Type 2 diabetes, physical activity and health weight work
- Covid-19 health surveillance, testing and vaccination activity
- Pathway for residential rehabilitation for people with drug problems
- Implementation of treatment pathways for people with drug problems
- Naloxone training for those at risk of drug overdose

# 3.2 Living Well Mid-strategy Report for 2019 – 2021

The Living Well Strategy was launched by Argyll and Bute's JB in September 2019 as a strategic approach to preventing long term health conditions and enabling people to live well, and also supporting people already living with a long term health diagnosis. At the time a strategic approach to long term health conditions was considered to achieve the following:

- More efficient and effective patient pathways and support for people with long term conditions
- Improved health and wellbeing outcomes for Argyll and Bute's people
- Reduced demands on health and social care services

The intentions of the Living Well strategy include:

- People People living in Argyll and Bute will have the tools and support they need to enable them to Live Well
- Community A wide range of local services exist to support people to Live Well
- Our workforce Staff are able and motivated to support people to Live Well
- Leadership Effective leadership directs delivery of the Living Well Strategy

There is a compelling case to prevent ill-health - both to improve quality of life for individuals and to ensure the sustainability of health and social care services. Long term health conditions are very common and increase with age. The Scottish Health Survey 2020¹ estimates 47% of people in Scotland are living with a diagnosis, for example 18% have cardiovascular disease and 6% have diabetes.

Since September 2019, a multi-disciplinary steering group has met to oversee the delivery of a Living Well action plan and it is notable that this work continued throughout the pandemic. The Living Well Strategy covers a 5-year period to 2024 and this paper provides a mid-term progress report of the outputs of Living Well activity.

Highlights of this work include:

- An active multi-disciplinary steering group that meets regularly and reports
  to the Prevention Programme Board and in turn to the Transformational
  Programme Board. Members of the steering group comprise health
  improvement staff, wider health and social care staff e.g. allied health
  professionals, Third Sector Interface and community representatives, key
  partners such as Live Argyll and Versus Arthritis.
- A dynamic action plan that includes key priorities that are agreed in partnership and is responsive to the needs of communities and involves effective engagement. An example of this includes the mental health engagement and signposting activity that took place from autumn 2020 to autumn 2021.

<sup>&</sup>lt;sup>1</sup> <u>Scottish Health Survey – telephone survey – August/September 2020: main report - gov.scot (www.gov.scot)</u>

 Capacity building with communities and across the health and social care system to widen the range of people with an interest in preventing the problems that arise from long term health conditions. Examples of this work include health behaviour change training and small grants to the third sector.

## 3.3 Wider Prevention Activity

In 2021 the HSCP developed a clearer strategic response to preventing health and social care problems. This response recognises that although there is a wider societal aspect to health and wellbeing, the HSCP is a key stakeholder both as a provider and a commissioner of health and social care services. A multi-disciplinary Prevention Programme Board has formed to review the approach and this in turn reports to the Transformation Programme Board. The group looks inwards to how services can support prevention and outwards to how people can live healthy lives within their local communities – both via commissioning and via co-production. The prevention action plan is also closely aligned to the Strategic Plan and the Commissioning Plan. Current activity of the group includes:

- Co-production workshop in June 2022 attended by more than 30 people to review approaches to working alongside communities to support the delivery and sustainability of community based health and wellbeing services.
- Mapping of how existing contracts include prevention in their key performance indicators.
- Mapping of core community based services that support the prevention of health problems and a gap analysis of where there is disparity. Examples include signposting to community support; support for carers; debt advice; peer support groups e.g. for mental health; and opportunities for physical activity.
- A physical activity workstream to increase physical activity rates and improve opportunities for physical activity.
- Joint working with the Third Sector Interface to promote the new Argyll and Bute Community Directory.
- A multi-agency engagement plan to develop local design solutions coproduced with Macmillan, Live Argyll, Argyll &Bute Council, HSCP and TSI initiative. This will link with existing structures such as Locality Planning Groups and Living Well networks.

# 4. RELEVANT DATA AND INDICATORS

Full details of the outputs of Public Health activity is published in the reports.

### 5. CONTRIBUTION TO STRATEGIC PRIORITIES

The work of the Public Health Team is linked to:

## The Strategic Plan

Promote health and wellbeing across our communities and age groups

## **The Commissioning Plan**

- · Prevention, early intervention and enablement
- Living Well and active citizenship
- Community Co-production

### 6. GOVERNANCE IMPLICATIONS

# 6.1 Financial Impact

The Public Health Team is resourced from core HSCP funds and in-year Scottish Government allocations to the sum of approximately £1.5 million. This paper is not asking for additional investment in Public Health. However, it is a topic for debate to consider early upstream intervention can avoid the need for downstream service delivery.

### 6.2 Staff Governance

No issues in this paper.

### 6.3 Clinical Governance

No issues in this paper.

### 7. PROFESSIONAL ADVISORY

No issues in this paper. The Associate Director of Public Health works closely with the other professional advisors, in particular the Associate Director for Allied Health Professions

### 8. EQUALITY & DIVERSITY IMPLICATIONS

No issues in this paper. Equality and diversity are key principles of Public Health work and interventions and strategies are designed to ensure those most in need will benefit the most. This is with the intention of reducing the gap between the most well off and the worst off in our communities.

### 9. GENERAL DATA PROTECTION PRINCIPLES COMPLIANCE

No issues in this paper.

### **10. RISK ASSESSMENT**

No immediate risks in this paper although there are risks to the sustainability of health and social care service from rising demand.

### 11. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

Community engagement is a core principle of Public Health and interventions and programmes always include engagement to ensure effectiveness and suitability. The Living Well strategy was developed following comprehensive community and stakeholder engagement.

### 12. CONCLUSIONS

The paper provides an update on ongoing wellbeing and prevention activity overseen and delivered by the Public Health Team in Argyll and Bute. There is a compelling need to prevent health and social care problems before they arise.

The HSCP is well placed to both continue and expand upon the recent successes outlined in the detail of this report.

# **DIRECTIONS**

	Directions to:	tick
Directions	No Directions required	
required to Council, NHS	Argyll & Bute Council	
Board or both.	NHS Highland Health Board	
	Argyll & Bute Council and NHS Highland Health Board	

# REPORT AUTHOR AND CONTACT

Author Name Alison McGrory, Interim Associate Director of Public Health

Email <u>alison.mcgrory@nhs.scot</u>