

# Public Health

## Monthly bulletin

family and community issues  
chemicals and poisons  
tackling health inequalities  
housing  
health service quality improvement  
employment  
emergency response  
improving health  
immunisation and vaccination  
clinical governance  
education  
screening  
reducing health inequalities  
lifestyles  
audit and evaluation  
clinical effectiveness  
environmental health hazards  
evidence-based medicine  
monitoring risk factors

The East Sussex public health bulletin is a regular update of local public health news. This includes the latest additions to the East Sussex Joint Strategic Needs and Assets Assessment website, local campaigns and initiatives. We also present some interesting and important, national and international, public health research and news.



### [Joint Strategic Needs and Asset Assessment \(JSNAA\) \(Page 2\)](#)

An update of the latest news and additions to the JSNAA website.

### [East Sussex Better Together \(Page 2\)](#)

Women have their say on East Sussex maternity services.

### [News for CCGs and GPs \(Page 3\)](#)

New resource launched to improve dementia care.

### [Health Improvement News \(Page 3\)](#)

East Sussex action on childhood obesity acknowledged.

### [Upcoming FREE Training \(Page 7\)](#)

An exciting range of FREE Public Health funded training available from December 2018.

For more information contact: [Miranda.Scambler@eastsussex.gov.uk](mailto:Miranda.Scambler@eastsussex.gov.uk) or

[Nick.Kendall@eastsussex.gov.uk](mailto:Nick.Kendall@eastsussex.gov.uk)

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### East Sussex Better Together

-Have your say about maternity services in East Sussex, Page 3.

### Action on childhood obesity

An ambitious programme in East Sussex to tackle childhood obesity through physical activity in education settings and the wider community has been recognised, Page 4.

*East Sussex Public Health wish all readers a happy and relaxing festive break*



## East Sussex Joint Strategic Needs & Assets Assessment

eastsussexjsna.org.uk

The Joint Strategic Needs & Assets Assessment (JSNAA) is a process that identifies both the health and wellbeing needs (problems) and assets (strengths) of the people, populations and communities in East Sussex. The JSNAA website provides a central resource of local and national information to inform decisions and plans to improve local people's health and wellbeing and reduce health inequalities in East Sussex [eastsussexjsna.org.uk/](http://eastsussexjsna.org.uk/). If you would like to receive a monthly email alerting you to new content please [subscribe](#).

National profiles updated in November:

- [Public Health Outcomes Framework Profiles](#)
- [Suicide Prevention Profiles](#)
- [Wider Determinants of Health Profiles](#)
- [Atlas of Variation for Palliative and End of Life Care](#)
- [Liver Disease Profiles](#)



## Director's Annual Report



In this bulletin, I'd like to issue a trailer for my Annual Report, which will be published shortly. As this will form the basis of my article in the next bulletin, I'm not going to give the game away by telling you much about it; however, what I'd like to focus on, and hopefully to whet your appetite for the report, is the

importance of a Director's Annual Report.



### PICTURE EAST SUSSEX

Annual report of the Director of Public Health 2018/19



From the very first Directors of Public Health (or Medical Officers for Health as they were then called), compiling,

publishing and disseminating a report on the health of their population has been an important part of the job. The current legal framework allows this report to give an independent view, and this independence must have been hugely valuable in the past when my forebears had no NHS or welfare state to pick up the pieces and make well for the most vulnerable in society.

Advocacy is an important part of the annual report. We already now routinely update our vast range of health data and intelligence via the Joint Strategic Needs and Assets Assessment ([www.eastsussexjsna.org.uk/](http://www.eastsussexjsna.org.uk/)) so the "so what?" aspect of our data – the recommendations, encouragement and directions to act are essential parts of the annual report. In previous-years, reports have varied from vast compendiums to single topic-focussed, and have been narrative or visual, and in some places have used comic or magazine formats to appeal to new or distinct audiences.

The message of the annual report is important as it is one of the key tools available to a Director of Public Health to shine the light on emerging issues or to highlight some of the contradictions and complexities in the health of the population. I hope that next month, you'll agree, that my first report as Director in East Sussex, gives an important message about the state of our health as a county, and what we need to do together to enhance this.

With best wishes

**Darrell Gale,**

Director of Public Health

01273 336313 [darrell.gale@eastsussex.gov.uk](mailto:darrell.gale@eastsussex.gov.uk)

## East Sussex Better Together

### Have your say on maternity services

As part of a project to improve maternity services across the South East, the NHS want to hear from women who have given birth or used their maternity services in the last three years, as well as their partners and families.

We are asking women and their partners how they found the experience of using the maternity services, both during and after the pregnancy; how they were supported, how much input they had, whether they could make important decisions themselves, what was good and any areas where they think there could be improvements. The questionnaire is available at: [surveymonkey.co.uk/r/EastSussexMaternity](https://surveymonkey.co.uk/r/EastSussexMaternity). It is strictly

anonymous and should only take about 15 minutes. The survey closes in mid-December.

“The NHS knows that the best services are designed with the people that use them. Hearing from those who have actually used the services gives a real insight into what works and areas where there can be improvements to ensure that everyone has access to safe and personalised maternity care,”

- Allison Cannon, Chief Nurse and Director of Quality  
Sussex and East Surrey CCGs

If you are interested in running a focus group for your community, or would like to get in contact directly or request the survey in another format or language, please contact Cecily Hollingworth: 07788567675 or [cecily.hollingworth@nhs.net](mailto:cecily.hollingworth@nhs.net)



## News for CCGs, GPs and health professionals

### New dementia care resource launched

A new resource for healthcare providers and carers aims to improve dementia care. “[Managing Success in Dementia](#)” links quality assured websites and training videos all in one place.

The new resource was commissioned by Health Education England (HEE) **to support leaders and managers working across health and social care to implement the training outcomes of the Dementia Training Standards Framework** - in particular those responsible for implementing training at [Tier 2](#). Tier 2 training provides additional skills and knowledge for people who regularly work directly with people living with dementia.



## Health improvement news

### Change4Life

Change4Life will be launching a new campaign in January 2019 that focuses on alerting parents to the surprisingly high amount of sugar in everyday products, and motivating and supporting them to reduce their child’s sugar intake.

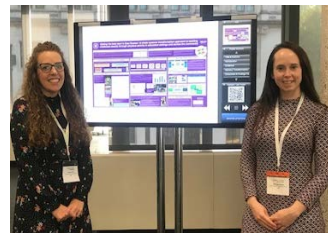
This will build on the work of previous campaigns linked to sugar consumption.

East Sussex Public Health will be supporting this campaign and we would like to encourage partners to get involved too. There will be a range of resources available to support your involvement, including website banners, screen savers and social media assets. To receive the most up to date information on the campaign, please ensure you are signed up to the [Campaign Resource Centre](#).

For more information and advice on how your organisation can support any of these campaigns please contact: [Public.Health@eastsussex.gov.uk](mailto:Public.Health@eastsussex.gov.uk).

## East Sussex action on childhood obesity acknowledged at international congress

An ambitious programme in East Sussex to tackle childhood obesity through physical activity in education settings and the wider community has been recognised at the world’s flagship physical activity and public health congress.



The focus of the 7th International Society for Physical Activity and Health Congress, held in October 2018, was to bridge the gap between research, policy and practice. The

East Sussex Public Health submission detailed the outcomes and learning of local multi-component initiatives: transformation programmes in nurseries, schools and colleges; and mass participation community physical activity intervention ‘Beat the Street’.

Over 320 nurseries, schools and further education settings have been supported to develop whole-setting health improvement plans, which include a focus on physical activity. These initiatives have reached over 58,000 children and their families.

The seven-week Beat the Street game involved over 40,000 people, engaging entire communities in physical activity and seeking to create a social norm around keeping active.

The main impact and outcomes for each initiative were highlighted in an eposter. Evaluation and learning will now help to inform the development of an updated 2019-2021 Healthy Weight Plan, alongside future whole systems approaches to obesity in East Sussex. For information contact: [nicola.blake@eastsussex.gov.uk](mailto:nicola.blake@eastsussex.gov.uk)

## Quit smoking with the right support for you

While smoking prevalence has reached a record low (14.9%) in England, smoking remains the single biggest preventable cause of death, causing 16% of all deaths in 2017. The prevalence of smoking among routine and manual workers remains stubbornly high at 26%.

In East Sussex, smoking related inequality is also stark, 14% of the overall adult population smoke compared to 25% who work in routine and manual occupations. East Sussex County Council is committed to reducing this gap.



The upcoming national Health Harms campaign launches for the start of the New Year. Aimed at routine and manual workers, the campaign will highlight the immediate physical harm caused by smoking including the poisonous toxins entering the bloodstream.

Quitting is easier with the right support. Evidence shows that the most successful quit attempts are made with a combination of quit methods. For example, in 2017/18 51% of people who received expert help from local stop smoking services together with stop smoking aids managed to quit, and among those who used an e-cigarette in their quit attempt, the success rate was 63%.

A free online [Personal Quit Plan](#) is available to help smokers find the right support for them. People can create their plan at [www.smokefree.gov](http://www.smokefree.gov)



One You East Sussex offers free, evidence-based support. They also provide a range of support to GPs and pharmacies offering

stop smoking services. With the support of stop smoking services people are four times more likely to quit compared to going it alone.

For information about quitting, or working with OYES to support patients and service users to quit: For further information phone: 01323 404 600, email: [hello@oneyoueastsussex.org.uk](mailto:hello@oneyoueastsussex.org.uk), or visit: [oneyoueastsussex.org.uk/](http://oneyoueastsussex.org.uk/)



## Public Health News

### Mental health of children & young people survey

A new [2017 survey](#) from the National Centre for Social Research, ONS and Youth in Mind looks at mental health and wellbeing of over 9,000 children and young people aged 2 to 19 in England. The survey combines reports from children, parents and teachers. For the first time findings include the prevalence of mental disorder in 2 to 4 year olds, and spans the transition into adulthood by covering 17 to 19 year olds.

One in eight 5 to 19 year olds had a mental disorder in 2017, while one in twenty met the criteria for two or more individual mental disorders. Mental disorders were identified according to International Classification of Diseases (ICD-10) standardised diagnostic criteria. There has been a slight increase in overall prevalence rates of mental disorder in 5 to 15 year olds, rising from 10% in 1999 to 11% in 2017. Emotional disorder rates increased, while other disorder types were stable.

About one in six 17 to 19 year olds had a mental disorder. Young women have been identified as a high risk group in relation to mental health. **Nearly one in four 17 to 19 year old girls had a mental disorder with emotional problems [anxiety and depression] the most common.** Six per cent had body dysmorphic disorder while 2% were identified with an eating disorder. **Young people who identified as lesbian, gay, bisexual or with another sexual identity were more likely to have a mental disorder (35%) than those who identified as heterosexual (13%).**

### A fair, supportive society

[A report](#), commissioned by NHS England, highlights that some of the most vulnerable people in society – those with learning disabilities – will die 15-20 years sooner on average than the general population.

The report recommends that action should focus on the 'social determinants of health', particularly addressing poverty, poor housing, discrimination and bullying:

- Around 40% of people with learning disabilities are not identified in childhood.
- More than 1,200 children and adults with a learning disability die prematurely every year.
- Children with learning disabilities are at increased risk of mental health conditions, including depression; half of the increased risk of mental

health difficulties is attributable to poverty, poor housing, discrimination and bullying.

- Despite 3% of the whole population having learning disabilities, a quarter of young people in custody have learning disabilities.

The report makes recommendations on integrating the care of people with a learning disability and a greater focus on their health and wellbeing.

### Community-centred practice: applying All Our Health

Public Health England has published information for front-line staff to adopt [community-centred ways of working](#) that help improve the health and wellbeing of the most marginalised communities. This resource aims to help health professionals prevent ill health and promote wellbeing as part of their everyday practice. It includes guidance on: adopting community-centred approaches in professional practice; understanding local needs; and measuring impact.

### An average of seven critical factors in poor obstetric outcomes

The latest report from the Royal College of Obstetricians and Gynaecologists (RCOG) on the clinical initiative [Each Baby Counts](#) shows there was an increase in the number completed local investigations into stillbirths, neonatal deaths and severe brain injuries that occurred from incidents during term labour in 2016 across the UK, when compared to 2015.

Different care might have made a difference to the outcome in almost *three quarters* of cases of stillbirths, neonatal deaths, and severe brain injuries to babies resulting from labour at full term. Each Baby Counts is a UK quality improvement programme set up to meet the Government target of halving the number of babies who die or are left severely disabled as a result of events in labour by 2025.

Of nearly 700,000 babies born at term in the UK in 2016, 1,123 fulfilled the Each Baby Counts criteria for inclusion in the analysis, including 124 stillbirths, 134 babies who died early, and 854 who sustained severe brain injuries during labour. Of the 955 babies in whose cases the local review provided enough information to draw conclusions about the quality of care, the report concluded that in 674 (71%) different care might have resulted in a different outcome.

The reasons for poor outcomes are complex and multifactorial. The average number of critical contributory factors in each case of stillbirth, early neonatal death, or brain injury was seven.

A related report [Mind the Gap](#) from the charity Baby Lifeline highlights the current and ongoing training issues for frontline professionals.



## Public Health Research

### Association of BMI with overall and cause-specific mortality

A population-based cohort study, published in the [Lancet Diabetes and Endocrinology](#), used UK primary care data and national mortality registration data to look at the relationship with body mass index [BMI] and cause specific mortality. BMI is known to be strongly associated with all-cause mortality, but few studies have been large enough to examine associations reliably between BMI and a comprehensive range of *cause-specific mortality* outcomes.

Associations between BMI and mortality were stronger at younger ages than at older ages, and the BMI associated with lowest mortality risk was higher in older individuals than in younger individuals [evidence of effect modification by age] Further work is needed to explore the drivers of this effect and understand whether healthy weight recommendations might need to take age into consideration.

People at the top and bottom ends of the BMI score risked having shorter lives. Being overweight or underweight could reduce life expectancy by four years.

### Risk factors for heart attacks are more potent in women

High blood pressure, smoking, and diabetes increase the risk of myocardial infarction in both sexes but have more of an impact in women than they do in men, shows a [study in The BMJ](#). The findings emphasise that women should have the same access to treatments for these risk factors as men do.

Overall, men are at greater risk of myocardial infarction than women but several studies have indicated that certain risk factors have more of an effect on the risk in women than in men. To examine the association, the researchers looked at data on almost half a million

British adults. The people, aged 40 to 69 years, had no history of cardiovascular disease. Just over half (56%) were women.

The risk of myocardial infarction associated with hypertension was 83% higher in women than in men. Smoking had a 55% bigger effect in women. This was similar to the difference in effect associated with type 2 diabetes. The risk associated with type 1 diabetes was nearly three times as high in women as in men.

Although the overall effect on risk of myocardial infarction decreased in both sexes with age, the difference between the sexes in the risk associated with these factors persisted.

The researchers concluded that, as the population ages, the incidence of myocardial infarction in women is likely to approach that in men.

### Can visiting museums help to prevent dementia?

Activities that are *mentally engaging, enjoyable* and *socially interactive* could be protective against the development of dementia. Using data from the English Longitudinal Study of Ageing, a [study in the British Journal of Psychiatry](#) shows that for adults aged 50 and older visiting museums every few months or more was associated with a lower incidence rate of dementia over a 10-year follow-up period compared with less-frequent visiting.

This association was independent of demographics, socioeconomic status, health-related variables including sensory impairment, depression, vascular conditions and other forms of community engagement. Visiting museums may be a promising psychosocial activity to support the prevention of dementia. It also links to the wider social prescribing agenda. However, as this is an observational study it is not possible to conclude that attending museums results in fewer cases of dementia.

### Improving access and continuity in general practice

A [report](#) from the Nuffield Trust summarises key findings of research on the impact of improved access upon continuity of care, and provides a series of recommendations for commissioners and policy-makers.

The research found there is a large body of evidence to demonstrate that continuity of care delivers significant benefits to patients and staff. There is, as yet, little evidence to help understand the impact that improved access has had on continuity of care, or the precise inter-relationship between continuity and access.

There are a considerable number of strategies that can be adopted to promote continuity of care, while improving access. The methods are described in more detail, along with an in-depth discussion of the findings and a full set of references, in the accompanying [evidence review](#).

### Child health in 2030 in England

In a [report](#) from the Royal College of Paediatrics and Child Health (RCPCH), long term historical data on key health outcomes for children and young people were utilised to model projections of outcomes in 2030 in England compared with other European and western countries.

The research looked at mortality, mental health, obesity, accident and emergency attendances, and outpatient attendance. England has poorer health outcomes than the average across the EU15+ (the 15 EU countries in 2004 plus Canada, Australia and Norway) in most areas studied, and the rate of improvement in England for many outcomes is lower than across the EU15+. This means that unless current trends improve, England is likely to fall further behind other wealthy countries over the next decade.

The marked inequalities observed in most key outcomes are likely to widen over the next decade, as problems in areas such as infant mortality and obesity are worsening amongst the most deprived section of the population.

The main recommendation of the report is for NHS England to develop a Children and Young People's Health Strategy for England.





## Free public health funded training



### NHS HEALTH CHECK MENTOR E-LEARNING COURSE

This course is recommended for all staff providing NHS Health Checks. It is made up of four online modules and covers all you need to know about NHS Health Checks: what they are; cardiovascular conditions; how to conduct one; calculating and communicating risk.

Please visit <https://tinyurl.com/y9gqbdcb> select Health Check Mentor course and enter the unique regional enrolment key: esFive21\$\_bn7X

### MECC (MAKE EVERY CONTACT COUNT) TRAINING

This training is an approach to healthcare that ensures you will have the skills, knowledge and confidence to 'make every contact count' when opportunities arise with patients. You will be well equipped to have brief conversations about their health and wellbeing and on how they might make positive improvements. Combined with practical face to face skills training you will receive on this course you will be well equipped to engage patients in difficult conversations. This is a bespoke course that we offer to any organisation with frontline staff. Duration is usually 1.5 - 3 hours.

To book a place on a course or for other enquiries please visit: <https://oneyoueastsussex.org.uk/training/>

### MECC (MAKE EVERY CONTACT COUNT) TRAINING

The course covers MECC levels 1&2 and including practicing goal setting, identifying support assets, motivational interviewing, active listening and TA and signposting with confidence. You will also develop a greater understanding of how lifestyle impacts on health, the health needs of communities within East Sussex and be given a healthy lifestyles services resource pack and helpful factsheets to support your work. This course is FREE to anyone working or volunteering in East Sussex or those with an interest and experience in Health Improvement. MECC is recommended as Essential Training by Supporting People and mandatory training for NHS staff. To request a booking form email [healthylifestyles@sussexcommunity.org.uk](mailto:healthylifestyles@sussexcommunity.org.uk) or call 01273 519149.

Mon 3 <sup>rd</sup> Dec	9.30- 16.00	Eastbourne Town Hall, Grove Rd, Eastbourne, BN21 4UG
Tues 11th Dec	9.30- 16.00	Denton Island Community Centre, Denton Island, Newhaven, BN9 9BA
Wed 30 <sup>th</sup> Jan	9.30- 16.00	Eastbourne Town Hall, Grove Rd, Eastbourne, BN21 4UG

### MENTAL HEALTH FIRST AID

Mental Health First Aid is a two day course that teaches how to identify, understand and help a person who may be developing a mental health problem. You will learn how to recognise those crucial warning signs of mental ill health. Certified course.

To book a place or for enquiries please visit <https://oneyoueastsussex.org.uk/training/>

### SUBSTANCE MISUSE TRAINING FOR PRIMARY CARE

Change Grow Live [CGL] is offering training to providers who are delivering substance misuse support with drug and alcohol detox under East Sussex Public Health Local Service Agreements.

This is a bespoke course available at any time. Please contact Caroline Evans: [Caroline.Evans@eastsussex.gov.uk](mailto:Caroline.Evans@eastsussex.gov.uk)

### IPC CHAMPIONS LEVEL 2

Training for registered nurses or senior carers to facilitate learning aimed at development of Hydration and Oral Health Champions in East Sussex residential care homes.

For details contact [Helen.Cheney@eastsussex.gov.uk](mailto:Helen.Cheney@eastsussex.gov.uk), or to register contact [Tina@infectionpreventionsolutions.co.uk](mailto:Tina@infectionpreventionsolutions.co.uk)

### HYDRATION AND ORAL HEALTH CHAMPIONS

This training is aimed at Registered Nurses, Senior Carers and also be relevant to Personal Assistants and Supported Living providers For booking's contact Tina Burke Infection Prevention Solutions: +44(0) 20 8865 2858/07398 770536/+44(0) 20 8906 2777

23rd Jan 2019	09.00-16.00	Cooden Beach Hotel, Bexhill
17th Feb 2019	09.00-16.00	The Boship Lions Farm Hotel, Hailsham
13 <sup>th</sup> Mar 2019	09.00-16.00	Civic Centre, Uckfield

### OUTBREAKS STUDY DAY

This training is aimed at Registered Nurses or Senior Carers Session we include: Micro-organisms responsible for outbreaks, Immunisation, Outbreak recognition and management and Business continuity. For booking's contact Tina Burke Infection Prevention Solutions: +44(0) 20 8865 2858/07398 770536/+44(0) 20 8906 2777

Wed 16th Jan	09.00-12.30 and 13.00 -16.30	Cooden Beach Hotel, Bexhill
Wed 13th Feb	09.00-12.30 and 13.00 -16.30	The Boship Lions Farm Hotel, Hailsham
Wed 20 <sup>th</sup> Mar	09.00-12.30 and 13.00 -16.30	Civic Centre, Uckfield

### ONLINE SEPSIS TRAINING

Think Sepsis is a Health Education England programme aimed at improving the diagnosis and management of those with sepsis.

Available any time online <https://www.e-lfh.org.uk/programmes/sepsis/>

### FUEL POVERTY AND HEALTH: IDENTIFICATION AND SUPPORT SERVICES

The East Sussex Fuel Poverty Coordinator provides training or short information sessions to frontline staff and health & social care teams likely to be in contact with those at risk of fuel poverty or living in a cold home. The session will cover the impact of fuel poverty on health and wellbeing, identifying someone at risk, and referral to available local services including the East Sussex Warm Home Check service.

This is a bespoke session available by arrangement. Contact Louise Trenchard, tel: 07885 233478 email: [ltrenchard@hastings.gov.uk](mailto:ltrenchard@hastings.gov.uk)

### C-CARD CONDOM DISTRIBUTION TRAINING

Training for those wishing to offer, or offering, condom distribution to young people in East Sussex. This will cover the C-Card Scheme; the importance of confidentiality; Fraser guidelines, child protection procedures and law; and different types of condom. The training is usually an hour but the registration element of C-Card scheme training may be added.

This bespoke course is available at any time. The training is usually an hour but the registration element of C-Card scheme training may be added. Please contact [ccardpublichealth@eastsussex.gov.uk](mailto:ccardpublichealth@eastsussex.gov.uk)

### PHARMACY HEALTH CHAMPION TRAINING - RSPH AWARD IN UNDERSTANDING HEALTH IMPROVEMENT LEVEL 2

Funded by East Sussex Public Health in association with Buttercups Training, this one day workshop is open to all frontline staff working in Healthy Living pharmacies wishing to become a HLP Health Champion. The course leads to a nationally recognised Level 2 RSPH award in Understanding Health Improvement, which is accredited by the Royal Society for Public Health (RSPH).

To book your place, please go to our Eventbrite page.

For further information, please contact Stewart Marquis on 01273 335863 or by email at [stewart.marquis@eastsussex.gov.uk](mailto:stewart.marquis@eastsussex.gov.uk)

Wed 16th Jan	9.30-16.30	All Saints Church, 21, Grange Road, Eastbourne, BN21 4HE
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### STOP SMOKING ADVISOR TRAINING

A two-day certified training course for any frontline staff wanting to provide evidence based stop smoking programmes to their clients. Attendance across both days is compulsory. Bookings can be made via [Eventbrite](#), or via One You East Sussex (OYES): 01323 404600

15th & 16th Jan	9.30 15.00	OYES, Faraday House, 1 Faraday Close, Eastbourne, BN22 9BH
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### HEALTHY LIVING PHARMACY (LEVEL 2) – SHARED LEARNING EVENT FOR HEALTH CHAMPIONS

This is your opportunity to find out more about Public Health and the services we provide, feedback to us on issues concerning the Healthy Living Pharmacy programme, and meet with other champions and primary care providers to share your knowledge, experience and expertise. Attendance is mandatory for all HLP2 Health Champions under the HLP level 2 service specifications. A backfill payment will be available to pharmacies. Lunch is provided. Places will be available for booking via the Public Health Eventbrite page from the beginning of December 2018. For further information, contact Stewart Marquis on 01273 335863 or by email at [stewart.marquis@eastsussex.gov.uk](mailto:stewart.marquis@eastsussex.gov.uk)

Wed 22nd Jan	9.30– 16.30	The View Hotel, Grand Parade, Eastbourne, BN21 4DN
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