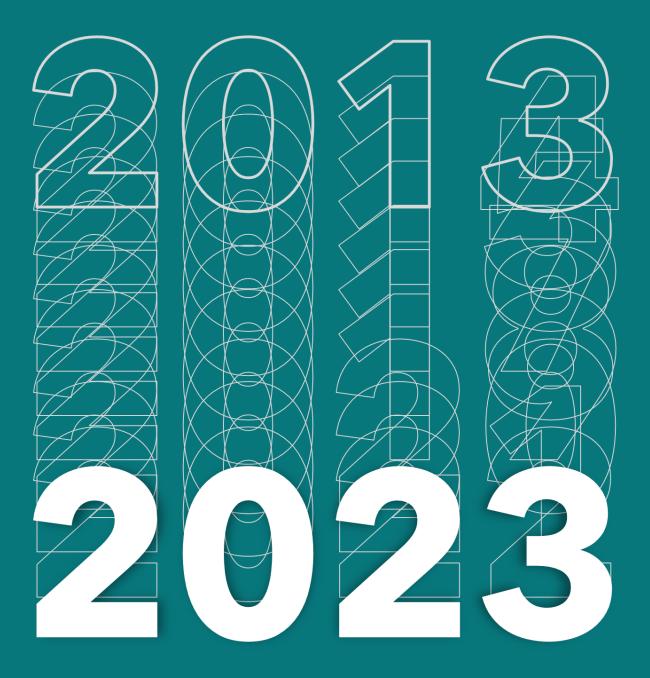


### **10-years of Public Health in Local Authority**

2022/23 Director of Public Health Annual Report



### Foreword

Across my nearly 30 year career, I have been fortunate to work in both the NHS and local government. I started my career working in public health in 1994 supporting a project to bring evidence into clinical practice and have subsequently worked within acute and community NHS trusts, in Health Authorities and PCTs, as well as district and unitary local authorities.

All this varied experience has shown me the amazing contributions to improving the health of populations that many different partners bring. It's pretty commonly understood that our health and wellbeing is influenced by more than good healthcare, such as things we are born with (like our genetic make up); the environment in which we grow up and live; our access to education, good food, work or safe housing.

Ten years ago, the responsibility for improving health and wellbeing of communities was shared across the NHS and local authorities in order to recognise the role of these wider determinants of health. The role of Director of Public Health became a statutory chief officer in local authorities, with a responsibility to improve and protect the health of the population and reduce inequalities.

It has been my privilege to fulfil this function for the city of Nottingham since 2021. Joining the council in the middle of a pandemic meant that I had to quickly learn what is important to the people who live, study and work here and understand the challenges they face. The latest Joint Health & Wellbeing Strategy focuses on these challenges and is a great example of how organisations across Nottingham work together to bring about meaningful change.





Since Nottingham City Council took on the responsibility for public health, there have been lots of fantastic interventions that have aimed to improve prevention and reduce harm and some of these are described in this report. It was a pleasure for me to meet with one of the first Directors of Public Health for Nottingham, Dr Chris Kenny, who generously shared his time to answer my questions about the challenges and opportunities he experienced when creating this new role in a local authority.

The conversation with Dr Kenny showed how our population continues to face real challenges in improving health. I am very proud of the work that we are leading to tackle some of the main causes of ill-health and deaths, such as on reducing smoking or obesity rates. With the high levels of disadvantage and inequality in our city, it is critical that we help people be able to make behaviour changes by creating an environment where it is easy to do so. We are working closely with communities to understand their challenges and barriers, as well as welcoming initiatives such as 'Smoke Free Generation' that will save lives.

### Foreword

We are also focused on supporting our population with the challenges they face, including financial wellbeing, mental health and substance use. For some people, they face severe multiple disadvantage and this can mean increased impact on their health and wellbeing. Public Health in Nottingham is a proud partner of Changing Futures, which exemplifies the commitment to joint working in the city.

A key thread running through all the work of the Public Health Team is the importance of engaging, involving and listening to our communities. The report describes the thriving and active Health and Wellbeing Community Champions programme, who are delivering meaningful change in their communities and challenging us to improve our services and interventions.

The role and profile of public health has changed since the COVID-19 pandemic, helping to reestablish strong joint working with the NHS and creating stronger links with communities. It has also left some challenging health legacies and the public health team are focused on improving uptake of childhood vaccinations, which have dropped to worryingly low levels since 2020. Vaccination is a great example of effective prevention, and working with NHS colleagues we are bringing in new and innovative approaches to help support our communities to feel confident to protect their children. The pandemic also showed us the importance of understanding our population need and communicating complex knowledge and research. We have been focussing on improving our public health intelligence and have been working jointly with the local NHS, University of Nottingham and Nottingham Trent University to think about how we make this more understandable and useful to our residents.

As I look forward to what the next 10 years might bring, I am excited by the opportunities for greater close working with key partners with a focus on preventing ill-health and reducing inequalities. The prominence of these principles within the Integrated Care Strategy demonstrates the strong and productive commitment from all partners and gives an invigorated platform for meaningful change.

Nottingham is a vibrant, diverse, lively, rebellious city. I am fortunate to have an amazing team drawn from the local area, who share my passion and commitment to improving the health and wellbeing of residents. I look forward to another 10 years of being challenged, supported and excited by opportunities of working in Nottingham

### **Celebrating a Decade of Public Health Achievements in Nottingham**



### Introduction

### National Developments over the Decade

In April 2013, the Health and Social Care Act 2012 came into force, resulting in extensive structural changes affecting the NHS, social care, and public health.(1) **Local authorities were given the duty to improve the health of people living in their areas**, and were required to employ a Director of Public Health (DPH). DsPH are responsible for determining the overall public health vision for their local area, and subsequently deciding and delivering public health objectives to achieve this vision. The work of the DPH is varied and involves being a public health leader, having a statutory responsibility to improve and protect the health of the local population and commissioning services to address local public health priorities.(2)

The Local Government Association has called the transfer of public health responsibilities from NHS to local authority "one of the most significant extensions of local government powers and duties in decades".(3) This transfer was implemented as it was felt that local authorities were best placed to embed health and wellbeing into all policies and influence the wider determinants of health across the functions and services for which they are responsible locally.(4) Additionally, the Health and Social Care Act aimed to:

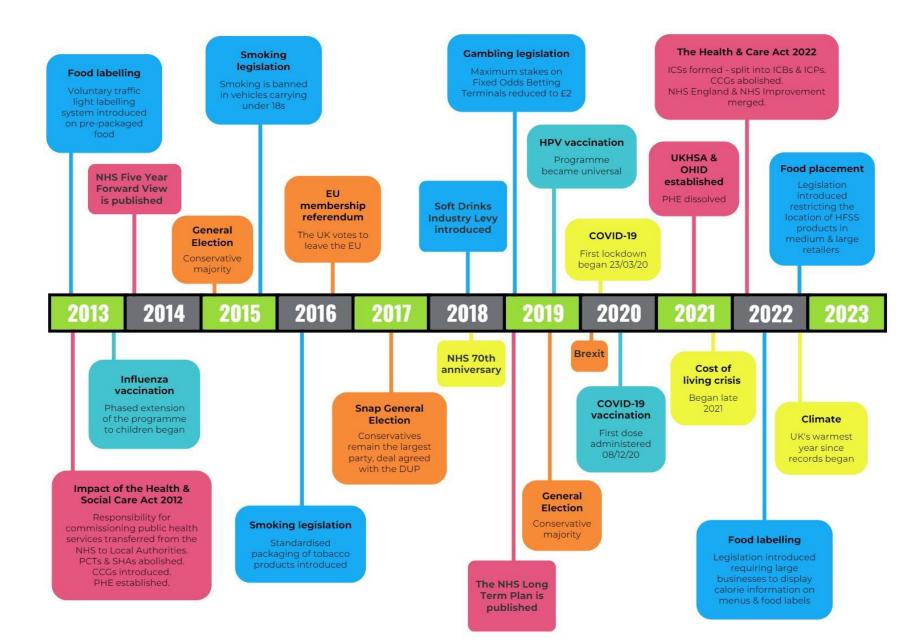
- Cut red tape believed to be limiting clinicians' ability to provide high-quality care,
- Increase competition between providers to improve quality and efficiency, and
- **Reduce political interference** in the day-to-day running of the NHS.(5)

Further changes were introduced in 2014, when the NHS published the Five Year Forward View. The policy document detailed an ambition to optimise patients' control over their health and care, increase integration of services, and prioritise prevention. In January 2019, the NHS Long Term Plan was launched, which built upon the Five Year Forward View, with a continued focus on improving integration of care and strengthening the NHS's contribution to prevention and population health.(6) The Health and Care Act 2022 aimed to change the laws that were preventing organisations from working in a joined-up way; supporting collaboration, and moving away from competition.(7) The Act also included sections relevant to health promotion, including a plan to implement a watershed on TV for advertising unhealthy foods, and the transfer of responsibility for fluoridation schemes from local authorities to central government.(8)

Overall, the past decade has presented many challenges for the public health profession. It has been a **challenging time economically**, incorporating the austerity period that followed the 2008 global financial crisis, as well as the current cost-of-living crisis. The country has also had to grapple with **global challenges**, including the COVID-19 pandemic, the ongoing threat from climate change and the environmental risk posed by increases in air pollution.

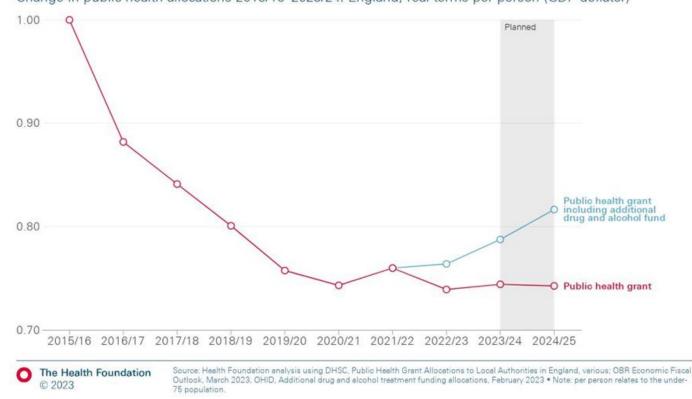
Figure 1 summarises the past 10 years including governmental changes, NHS reforms and public health legislation.

### National Picture: The last 10-years at a glance (Figure 1)

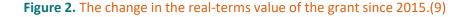


#### **The Public Health Grant**

All upper tier/unitary authorities in England are statutorily responsible for taking steps to improve the health and wellbeing of the local population, under Section 2B of the National Health Service Act 2006. Alongside this duty, a **ring-fenced public health grant** is provided, for expenditure where the 'main and primary purpose' is public health, as stated in the accompanying grant conditions which set out a range of prescribed and non-prescribed public health activity. The public health grant must be invested both eligibly, but also efficiently, to address identified health and wellbeing needs and ensure the greatest possible positive impact on the health and wellbeing of the local population. National research suggests that there has been a real-terms reduction of 21% in the ring-fenced public health grant allocated to local authorities since 2015, as shown in Figure 2. This has meant that local authorities have had to find a way to provide vital services for less.(9)



#### The public health grant has been cut by over a quarter since 2015/16 Change in public health allocations 2015/16–2023/24: England, real terms per person (GDP deflator)



### **Nottingham Demographics and Health**

#### Demographics

Nottingham's **population has increased** from 305,700 in 2011 to 323,600 in 2021; an increase of 5.9%.(10)

The city's population continues to experience a **high turnover** rate. In 2019-2020, 32,300 people from other areas of the UK moved into Nottingham, and 34,500 people moved away from the city.(11)

Nottingham has a **relatively young population**. Census data show that the proportion of residents aged 50-74 has increased, whilst the proportion of under 4s and those aged 20-49 has decreased between 2011 and 2021.(10) Nottingham's population is **increasingly diverse**. The 2021 Census shows 43% of the population as being from ethnic minority groups; an increase from 35% in 2011 and 19% in 2001.

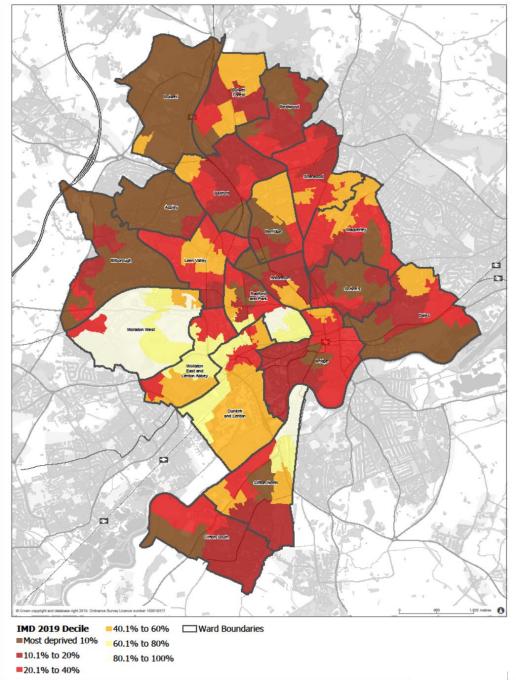
Among ethnic groups the greatest increase was in the number of individuals identifying as 'Black, Black British, Black Welsh, Caribbean or African' (10.0% in 2021 v. 7.3% in 2011). However, there was also an increase in the number of individuals identifying their ethnic group as 'Asian, Asian British or Asian Welsh' and 'Other ethnic groups'.(10)



Source: https://www.nottinghamforest.co.uk/news/2020/october/fa-launches-football-leadership-diversity-code/

#### Deprivation

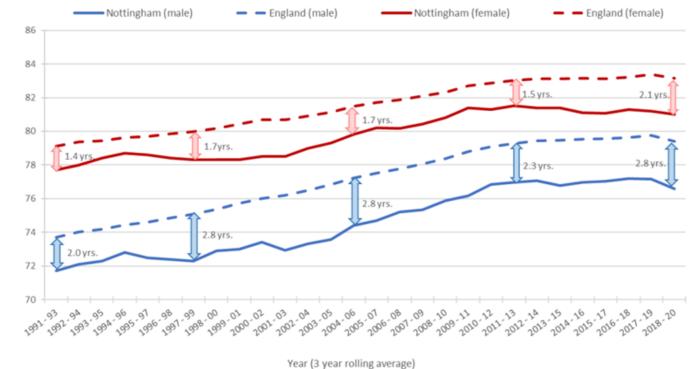
Nottingham is a city experiencing high levels of deprivation, which is linked to poorer health outcomes and increased inequalities (Figure 3). 55.2% of Nottingham's population live in an area that is classed as being amongst the **top 20% of most deprived areas** nationally.(12) Out of the 317 districts present in England, the city of Nottingham is the **11th most deprived** district (using the 2019 Indices of Deprivation score).(13)





#### Life Expectancy

Overall, the health of Nottingham residents is generally worse than the England average. As seen in Figure 4, life expectancy in Nottingham has been lower than the England average for over three decades. According to the latest data, men in Nottingham will on average live approximately 3 years less, and women 2 years less than the England average.(14) Between 2011-13 and 2018-20 in Nottingham, 3-year range **life expectancy decreased slightly**, from 81.51 years to 81.02 years for females, and 76.98 years to 76.58 years for males.(14) Inequalities exist within Nottingham, with life expectancy between the most and least affluent areas differing by approximately 8 years.(15)





#### Living in Good Health

**Healthy life expectancy** is the number of years a person can expect to live in good health. As seen in Figure 5, data indicate that although healthy life expectancy for both men and women in Nottingham has increased recently, it remains **significantly lower** than the England average, with men living 5.7 years less in good health and women 6.8 years less.(14) Nonetheless, the majority of Nottingham residents rate their health positively, with 34.2% describing their health as 'good' and 41.7% as 'very good' in 2021. Similar responses were received in 2011.(10)





The Public Health Team strives to improve these statistics, working closely with partner organisations and engaging with local residents with the overall aim of improving the health and wellbeing of the city's population and reducing health inequalities.

### Celebrating a decade of Public Health achievements in Nottingham City

The following timeline highlights some of the key public health work that has taken place in our city over the past decade. Each piece of work is rooted on the timeline either in the year when the work was published, or in the earliest year in which key events in that area occurred. Many sections will then describe the subsequent passage of time, detailing important actions and occurrences in the topic area up until the present day.

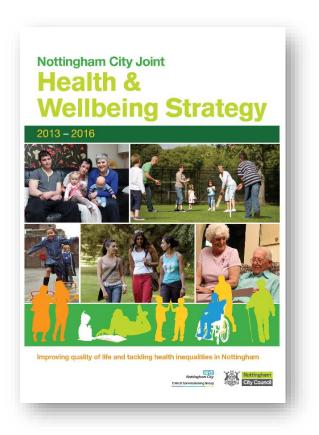


#### Nottingham City Joint Health and Wellbeing Strategy 2013-2016

This was the first Joint Health and Wellbeing Strategy, published after the Nottingham City Health and Wellbeing Board became a committee of Nottingham City Council (NCC) in April 2013 as a result of the Health and Social Care Act 2012. Four priorities for improving quality of life and tackling health inequalities in Nottingham were outlined in the Strategy after being developed through a process involving Board members and wider colleagues:

- Prevent alcohol misuse to reduce the number of citizens who develop alcohol-related diseases.
- 2. Provide more integrated health and social care services that will ensure a better experience of care is offered to older people and those with long-term conditions.
- 3. Intervene earlier to increase the number of citizens with good mental health.
- 4. Support priority families to get into work, improve their school attendance and reduce their levels of anti-social behaviour and youth offending. Priority families are defined as those receiving significant support from a wide range of services.(16)

The above priorities were selected as they reflected areas where the greatest additional impact could be made to improve health and wellbeing through joint working between local agencies. For each priority, the Strategy detailed multiple actions that would be taken to deliver on the intended outcomes. Although this was the first ever Joint Health and Wellbeing Strategy, the NCC Public Health Team did not start entirely afresh in 2013 as many priorities were transferred from the NHS Primary Care Trust Public Health Team, and similarly, the NCC Public Health Team began supporting work that had already been commenced by other local authority departments. This is illustrated in the next two sections, which describe work that commenced prior to the transfer of public health responsibilities, that was subsequently supported by the NCC Public Health Team from 2013.



### Teenage Pregnancy Services in Nottingham

Action to reduce unplanned teenage pregnancies and support pregnant teenagers and teenage parents has been a national and local priority since 1998. In the last ten years, **Nottingham's teenage pregnancy rates have reduced significantly**. In 2011, Nottingham's rate was 49.5 conceptions per 1000 girls aged 15-17, which was the fifth highest rate of the 149 English local authorities for whom data were reported. In 2021 the Nottingham rate had dropped to 19.2 conceptions per 1000 girls aged 15-17, which was the 27<sup>th</sup> highest of the 149 local authorities.(17) This reduction in teenage pregnancies has reduced some of the risks and poorer health outcomes associated with teenage parenthood:

- Mothers under 20 are twice as likely to **smoke** before and during pregnancy
- The **infant mortality** rate is 75% higher for babies born to women under 20
- Mothers under 20 are a third less likely to initiate breastfeeding and half as likely to still be breastfeeding at 6-8 weeks
- By age 30, women who were teenage mothers are 22% more likely to be living in poverty than mothers giving birth aged 24 and over. Young fathers are twice as likely to be unemployed than older fathers, even after taking account of deprivation.(18)

Nottingham's approach to reducing unplanned teenage pregnancy and supporting teenage parents has been to **enable teenagers to make genuine**, **informed decisions** about their lives in order to achieve a long-term reduction in the number of unplanned teenage pregnancies and improve outcomes for teenage parents and their children. Work has been delivered through a strong partnership commitment and governance structure with the targets underpinned by the Nottingham Plan to 2020, the Council Plan and the Children and Young People's Plan.

Nottingham's high level **Teenage Pregnancy Taskforce**, founded by Graham Allen MP and subsequently chaired by successive NCC portfolio holders with responsibility for health, ensured that reducing unplanned teenage pregnancy and supporting teenage parents **remained a high priority in the city between 2003 and 2020**. The Taskforce was complemented by a wider Teenage Pregnancy Network. During this time, there was dedicated officer support within NCC for managing the Teenage Pregnancy Taskforce and the Teenage Pregnancy Network as well as coordinating action and delivering on successive teenage pregnancy plans.

Nottingham's teenage pregnancy agenda is firmly rooted within universal services with targeted support provided for those most at risk.

#### **Primary prevention services**

- The Relationships and Sex Education Charter was rolled-out across Nottingham schools in 2016, providing a strong foundation of best practice prior to RSE provision becoming statutory in schools from 2020
- Since 2003, the C-Card scheme has provided free condoms and lube for young people aged 13-24 across 22 registration and pick-up points. During 2020, the C-Card service adapted and offered a postal service to ensure that condoms were easily accessible for all registered young people

- Nottingham City's Sexual Health Services for young people deliver accessible and integrated services in the community for those aged 13-25 and at risk of poor sexual health. In 2020, following the onset of the pandemic, bespoke sexual health pathways were created and distributed to those working with young people
- SH24 was launched in 2020, providing an enhanced online service during the pandemic. Currently it delivers chlamydia and gonorrhoea testing, asymptomatic chlamydia treatment as well as condoms and lubricant by post
- The school-aged Public Health Nursing Service provides 'Clinic in a Bag' which includes condoms, pregnancy testing, advice and guidance
- Pharmacies and General Practitioners provide a wide range of sexual health services including emergency contraception and pregnancy testing
- Family and Community Teams are based in Children's Centres and have staff trained to deliver sexual health and relationships advice.

#### Support services

 Commissioning responsibilities for the Family Nurse Partnership transferred from NHS England to local authorities on 1st October 2015. The programme is embedded within our Best Start service and provides support and guidance for pregnant girls, teenage mothers and their children each year through an intensive home visiting programme  The Teenage Pregnancy Midwifery Service offers flexible, one-to-one support for all pregnant under-18s

2013

- Homeless accommodation services providing temporary supported accommodation for teenage families were recommissioned in 2016 to provide both hostel accommodation for pregnant women, teenagers, teenage mothers and their children, as well as bespoke dispersed accommodation for teenage fathers too
- Termination of Pregnancy Services include counselling and support before, during and after a young person makes the decision to have a termination
- The Education Welfare team provides one-toone support for pregnant teenagers and teenage parents to maximise their engagement in education.



#### Age Friendly Nottingham

Age Friendly Nottingham (AFN) was established in 2012 and is a partnership of citizens, organisations, academics and service providers. AFN is determined to build an age-friendly future and reduce the stigma and discrimination people face as they age.

AFN believes all older citizens (those aged 50 and over) should have fulfilled lives - feeling valued by all sections of society, living as independently as possible and playing an active role in their local communities.

AFN's achievements between 2012 and the present day include:

- 2012: Councillor Eunice Campbell-Clark became the chair of the AFN Steering Group and Older Citizen's Champion. Additionally, Nottingham signed the Dublin Declaration on Age Friendly Cities and Age Friendly Nottingham was established
- 2013: Development of the AFN Charter, demonstrating the values and standards that older citizens expect from NCC and partner organisations
- **2014:** AFN became a member of the World Health Organisation Age Friendly Network
- 2015-2020: The Take a Seat initiative was rolled out across the city in 2015 and saw over 300 premises sign up to offer an older or vulnerable person a seat to catch their breath whilst out and about, helping people to remain active in their community and promote independence. The initiative was showcased as exemplar by the Centre for Ageing Better



Age Friendly Nottingham

- 2015-2019: Ageing Well Days were held annually from 2015. The days were held at Old Market Square and offered activities to enable older citizens to lead fulfilled lives. Partner agencies included Nottingham Deaf Society, Audiology, Nottinghamshire Fire and Rescue, Department of Work & Pensions, Alzheimer's Society, Nottingham on Call, Age UK, Good Companions, Dementia UK and Nottingham City Library and the Leisure Service
- 2017: AFN hosted a Christmas party for 100 of the city's lonely older people, supported by volunteers and contributions from partner organisations and city businesses
- 2020: Factsheets were produced to support older citizens during the pandemic, including information and advice regarding physical activity, scams, and carers advice
- 2023: The AFN Charter pledges were refreshed, and Councillor Linda Woodings was appointed as chair and Older Citizen's Champion.

The **AFN International Day of Older Persons Celebrations** has been held every year since 2013 on the 1<sup>st</sup> of October. Previous events include the Older People's Festival which held a dawn chorus on the steps of the Council House (2013), 'World on a Plate' which celebrated the diversity of older citizens in the city (2016), and free arts and culture events encouraging older citizens to reconnect and try new activities (2022).

#### **Improving Mental Health**

Over the last decade, the visibility of mental health awareness and suicide prevention has grown, supported by national campaigns for Every Mind Matters and Suicide Prevention is Everybody's Business.

Coordinating and implementing work on suicide prevention became a statutory requirement and integral part of local authorities' new responsibilities in 2013 following the transition of public health into local authorities. PHE's national guidance on Local Suicide Prevention Planning provided an outline for mandatory local authority actions plans, cementing the shift in responsibility.

In 2014, the Health and Wellbeing Board in Nottingham adopted the parity of esteem approach to mental health and physical health.

Parity of esteem means that equal priority is given to both mental health and physical health.

As part of the Nottingham City and Nottinghamshire County suicide prevention strategic plan, **Real Time Suspected Suicide Surveillance (RTSSS)** was established in 2019. Since its inception, RTSSS has facilitated responsive postvention support to people bereaved by suicide, as well as providing insights to identify and target interventions for high-risk groups. In 2020, Nottingham and Nottinghamshire Suicide Prevention Strategy Group successfully secured **NHS England Wave 4 Suicide Prevention Funding**. As a result, suicide prevention training has been commissioned, a local brand and campaign developed, and prevention support implemented for high-risk groups.

In 2021, NCC along with system-wide partners committed to the Prevention Concordat for Better Mental Health for All. The Concordat focus is on evidence-based planning to reduce health inequalities and address the social determinants of health. Nottingham's **Collaborative for Better Mental Health** was subsequently established, with the aim to work in partnership to focus on what matters to people, and improve mental health services and people's lives.

Most recently, in 2023, a **workplace mental wellbeing intervention** for Nottingham city employers of all sizes and sectors was initiated to build on the success of the **Time to Change** social movement and campaign.



#### **Opportunity Nottingham & Changing Futures**

In 2014, the **Fulfilling Lives** programme was launched. This saw voluntary organisations in 12 areas across the country receive funding from the National Lottery. **Framework**, an organisation that provides housing support, put in a bid for this funding and was successful. Subsequently, Framework delivered the Fulfilling Lives programme in Nottingham City until June 2022.

The Fulfilling Lives programme in Nottingham was known as **Opportunity Nottingham**. Under Opportunity Nottingham, the definition of Severe Multiple Disadvantage (SMD) included four areas:

- Substance use
- Contact with the criminal justice system
- Mental ill health
- Homelessness

Opportunity Nottingham, and subsequently its successor, Changing Futures, work with people experiencing SMD through the work of a core team of **navigators**. Navigators are involved with finding people who may benefit from their support, and triaging referrals they may receive. If an individual is found to be experiencing SMD, and is severely disadvantaged by this, they are then assessed by 2 navigators. This process allows the individual and navigators to assess all the issues that the individual may be facing, and a joint decision is made regarding which priorities need to be tackled first. Navigators then proceed to liaise with appropriate services and create support plans, so that the individual gets all the support that they need, in a joined-up and coordinated way.

This cohesion is a key focus of the role of navigators because the individuals they work with tend to be experiencing multiple layers of deprivation, spanning different areas of their daily lives. Another key focus of the navigators is building trust with the individuals they work with. Individuals experiencing SMD have historically been under-served by organisations, with many individuals feeling like they have been 'passed around' between services. Navigators therefore aim to build trust with these individuals as well as coordinate support, so that this does not happen again. Navigators also work with providers so that more flexible support can be made available to these individuals.

The wrap-around MDT was also a feature of Opportunity Nottingham. This multi-disciplinary team worked with individuals with complex needs to develop action plans in order to provide support. This initiative was launched as a consequence of the COVID-19 pandemic, because Opportunity Nottingham found that many people were not getting the help they needed, and this was exacerbated by the pandemic.

#### **Transition to Changing Futures**

Opportunity Nottingham was followed by the **Changing Futures** programme in July 2022. Changing Futures is led by the Levelling Up department, who advertised the funding. Due to the knowledge gained from Opportunity Nottingham, the local place-based partnership put in a bid for this funding which was successful. As a result, Nottingham was awarded £3.8 million to establish Changing Futures in Nottingham. Changing Futures still uses a core team of navigators. However, this transition to Changing Futures has also brought some changes.



#### What Changing Futures Has Added to this Work

Since Nottingham has adopted the Changing Futures programme, **domestic violence and abuse** (DVA) has been added to the definition of SMD.

This addition of DVA to SMD criteria has made a significant difference, since many individuals affected by DVA are also affected by SMD (for example, an individual may become homeless because of leaving an abusive relationship).

When Opportunity Nottingham was in effect, just over 80% of beneficiaries were of White ethnicity, and just over 70% of beneficiaries were male. Changing Futures now has two specialist navigators who work with women, and two specialist navigators who have a focus on working with ethnic minority groups. This has significantly improved inclusion and access.

Along with navigators, Changing Futures also has a network of **embedded practitioners** based in various services. These include probation services, local mental health teams, adult social care services, primary care and housing services. This allows Changing Futures to extend its reach to various organisations. Embedded practitioners raise awareness of SMD and improve practice within their host agencies. For example, the GP alliance is currently looking to establish trauma-informed practice and psychologically informed environments at GP surgeries.

Embedded practitioners can also help support **interagency working** in order to support individuals affected by SMD. A successful example of this is work led by embedded practitioners based in probation services and mental health services. Their work ensures that individuals requiring mental health support whilst in prison will still receive support in the community when they are released. This ensures continuity of care.

#### **Changing Futures: The Next Steps**

Recurrent funding for Changing Futures is currently secured until 2025. The introduction of more embedded practitioners is being considered in areas such as the police, emergency departments and the Department for Work and Pensions. There is ongoing learning, reflection and evaluation of the service, with an interim evaluation due to be published in November 2023. The team are also working to ensure this valuable work continues beyond 2025.



#### Small Steps Big Changes (SSBC)

SSBC is funded through The National Lottery Community Fund's 'A Better Start' Programme. It is one of five sites nationally that received a 10-year investment (2015-2025) to improve the life chances of babies and very young children. SSBC is a partnership programme, which includes parents, health services, local authority, early years, early help, academics, and community and voluntary sector partners. Programme activity is predominantly focused across four wards in Nottingham: Aspley, Bulwell, Hyson Green and Arboretum, and St Ann's. The SSBC programme utilises a test-and-learn approach to support the improvement of social and emotional development, communication and language skills, and nutrition outcomes amongst 0—4-year-old children. For children, this is critical period of development that lays the foundation for their health and wellbeing across their lifespan.

Alongside SSBC's child development outcomes, the programme aims to bring about systems change, including a focus on prevention and early intervention, and becoming system leaders in father inclusive practice and working via co-production principles. Co-production working embodies the SSBC's core principle: "Children at the heart, parents leading the way, supported and guided by **experts**." The voices of parents are represented by SSBC Parent Champions, who are recruited from their local communities. Parent Champions are key members of the SSBC Partnership Board, with voting rights which account for 40% of the vote and who hold vice chair responsibilities. They sit alongside strategic leaders and commissioners, political portfolio holders, and the Public Heath Team and therefore influence decision making at both strategic and operational level. Parents bring

local knowledge of what works and what might work in their local areas to discussions and decision making.

Since the programme began in 2015, **SSBC has commissioned or piloted 46 projects**, across the three child development and systems change outcomes. These include:

- Home Talk: Early years speech language and communication specialists
- Healthy Little Minds: Parent and Infant Relationship Service
- Healthy Lifestyles Pathway: A behaviour change initiative supporting healthy growth
- **Pregnancy Mentors**: A Midwifery Support Worker project
- **Dolly Parton Imagination Library**: A monthly book gifting scheme
- Family Mentor Programme: An intensive home visiting programme for families living within SSBC wards.

Currently 84.1% of children in wards access one or more SSBC services.



The Dolly Parton Imagination Library (DPIL) has a growing evidence base as an effective intervention to support early development. Monthly book-gifting up to the age of five positively impacts on the home learning environment. Book ownership has a consistently strong relation to reading attitudes and abilities in school-age children. The evaluation of DPIL in Nottingham undertaken by Nottingham Trent University (NTU) has shown that the longer families participated in the DPIL programme, the more parents had interactions with their children whilst reading a book, the longer reading sessions they had, and the more they read to their children on a daily basis.(19) Since the programme started, SSBC has funded 7,800 individual children to receive books, and in total, 338,100 books have been delivered to babies and children registered with the scheme.

A key commissioned service of the SSBC programme has been the Family Mentor Service, a unique paid peer workforce, who deliver an intensive home visiting programme; Small Steps at Home (SSAH) with families. Their work is underpinned by the SSAH handbooks, which are evidence informed and reinforce key public health messages.

The SSAH programme has been evaluated by NTU with "100% of families interviewed saying they would recommend Family Mentor to families with young children". Parents reported improvements in wellbeing and confidence, children eating healthier food options, improvements in sleeping routines and behaviours. Parents welcome the support of their Family Mentor:

"I feel very supported as a parent. I feel like there's backup, there's someone there that I can, if I'm like, out of my depth, there's someone that I can always like turn to, to ask for guidance." (Female age 35, child aged 1 year) Increased participation in SSAH improves children's communication and gross motor scores at 12 months and improves fine motor scores at 24 months.(19) Participating in SSAH for 18 months or more resulted in the highest mean 24-month Ages & Stages Questionnaire (ASQ) scores (excluding the problem-solving domain). Since the SSAH programme started in 2015, 5,697 babies and children have accessed it and currently 1,407 babies and children and their families are receiving support from their Family Mentor.

SSBC has also developed and supported **Public Health Campaigns** delivered locally:

- Love Bump: a stop smoking in pregnancy campaign
- **Big Little Moments**: a child development campaign
- Healthy Start: a campaign to increase awareness and uptake of the scheme, and
- Feed Your Way: a breastfeeding public health campaign.



Throughout the programme, SSBC has built upon its learning, recognising the value of employing coproduction principles in public health campaign design and the value of underpinning campaigns with behaviour change principles. The most recent, Feed Your Way, was informed by over 1800 Nottingham residents responding to a survey, which helped develop the approach to the campaign. This has ensured a meaningful campaign, which addresses the priorities of families, is valued by partners, and highlights the importance of talking about infant feeding without risk-based messaging. The work is reflected in the data: between 2015/16 and 2021/22 (other than in 2019/20 where there are no Nottingham data) Nottingham has had a significantly higher **prevalence** of infants who are partially or totally breastfed at 6-8 weeks than the England average, and the prevalence has been increasing over time.(20) A comprehensive evaluation of Feed Your Way will inform future plans, including how the workforce can use the campaign to approach breastfeeding conversations with families differently.

Another strand of work has been the co-design of **resources to support child development**. These include:

 The Pregnancy and Parenting in Ramadan Booklet: a co-designed booklet for Muslim women providing information about Ramadan in relation to pregnancy, breastfeeding and early parenthood. The booklet also acts as a resource to support the workforce to understand the impact of the month of Ramadan, when Muslims abstain from eating and drinking from sunrise until sunset

- The **Child Development Resource**: an accessible tool to support the workforce in working with families to promote ageappropriate child development, and
- An Information Pack for New Fathers: a resource for new and expectant fathers that recognises and values dads as a key part of a baby and child's life. Over 13,000 printed copies of this pack have been distributed via midwifery services, children's public health nursing service and other partners. In recognition of the diversity of languages spoken in Nottingham, the pack has been translated into 6 different languages, with 1500 printed copies distributed, and translated resources available online to download. The NTU evaluation of the pack, which sought fathers' and professionals' views, said it had the potential to speak to 'hard to reach' fathers. Fathers considered the pack a valuable source of information and a useful reference tool which they felt comfortable and confident in sharing with others.(19)

As the SSBC programme moves towards the end of its funding period, the programme activities will include looking for opportunities to sustain services or ways of working and share the evidence and learning from the programme.

For further information on programme activity and learning see the <u>SSBC website</u>.



#### **Nottingham City Tobacco Declaration**

The **2015-2020 Nottingham City Tobacco Control Strategy** saw the launch of the Nottinghamshire and Nottingham City Declaration on Tobacco Control. Local organisations can sign the declaration to demonstrate their commitment to protecting the community from smoking-related harms. By signing, local organisations are committed to protecting the community from smoking-related harms and developing plans with the local community.(21) Organisations that sign the declaration are provided with a toolkit for support.

The declaration was updated in 2022 as part of the <u>Health and Wellbeing Strategy</u> focus on smoking and tobacco. This renewed focus led to the creation of a <u>shared vision and delivery plan</u> owned by a new Nottingham and Nottinghamshire Smoking and Tobacco Control Alliance.

On World No Tobacco Day 2022 the Alliance committed - to see smoking amongst adults reduced to 5% or lower by 2035 across Nottinghamshire and Nottingham City. Further to this, we want to make the harms of smoking a thing of the past for our next generation such that all of those born in 2022 are still non-smokers by their 18th birthday in 2040. The delivery themes developed to achieve this are the product of a review of our strengths and weaknesses. The key themes are:

- Theme 1: Helping vulnerable groups to quit smoking
- Theme 2: Effective regulation of tobacco products
- Theme 3: Creating smoke free spaces and reducing exposure to second-hand smoke
- Theme 4: Prevention and engagement with children and young people

Some of the Alliance's early achievements include but are not limited to:

- Smoking becoming a priority within the Integrated Care System Strategy
- Funding being committed to creating an expanded illegal tobacco enforcement taskforce across Trading Standards and the Police;
- Behavioral insight research being conducted to listen to residents and inform our approach;
- Commissioning and delivery of the INTENT Smoking and vaping prevention programme in secondary schools.

In Stoptober 2023 the alliance partners came together to encourage smokers to quit and prevent young people from starting to smoke in the first instance.

Nottingham & Nottinghamshire Smoking & Tobacco Alliance

#### Happier Healthier Lives: Nottingham City Joint Health and Wellbeing Strategy 2016-2020

In the second Strategy, the Health and Wellbeing Board aimed to increase healthy life expectancy in Nottingham and reduce health inequalities that exist both within the city and between the city and other similar cities. The Strategy was developed using evidence on the health and wellbeing needs in the city, as well as based upon significant engagement with citizens and stakeholders.

The Vision of the Strategy was: "Nottingham will be a place where we all enjoy better health and wellbeing, with a focus on improving the lives of those with the poorest outcomes the most."

This vision was underpinned by a commitment to achieve four outcomes:

- 1. Children and adults in Nottingham will adopt and maintain Healthy Lifestyles
- 2. Children and adults in Nottingham will have positive **Mental Wellbeing** and those with longterm mental health problems will have good physical health
- 3. There will be a **Healthy Culture** in Nottingham in which children and adults are supported and empowered to live healthy lives and manage ill health well
- 4. Nottingham's **Environment** will be sustainable; supporting and enabling its citizens to have good health and wellbeing.

The Strategy outlined priorities and action plans for each of the four outcomes. These action plans were underpinned by the following cross-cutting principles: tackling inequalities, early intervention, sustainability, engagement of the voluntary and community sector, and integrated working.(22)





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#### Zero-Tolerance to FGM

Female Genital Mutilation (FGM) represents a risk to the physical and mental health and quality of life of young women. In 2016, the NCC Public Health Team chaired the FGM Steering group which led to the declaration of Nottingham as the first '**City of Zero-tolerance to FGM**' at a Full Council meeting. At the time, there were about 200 new cases of FGM reported each year in Nottingham alone.(23) Partners including the police, healthcare organisations, education, social care and the voluntary and community sector produced an action plan together for ending FGM in a generation in Nottingham.

To celebrate the declaration, as part of Nottingham in Parliament Day in October 2016 at Westminster, an audience from across the country heard how Nottingham was leading the way on work to end FGM. The event saw medal-winning Paralympians, leading business figures, Alex Norris MP, Sheriff of Nottingham Jackie Morris, Valentine Nyoko from Mojatu Foundation, and the University of Nottingham join for debate and showcases.

#### Online Sexually Transmitted Infection (STI) Testing

NCC was amongst the first to embrace online STI testing which involved postal STI kits linked to clinics and pharmacies to follow up any treatment requirements. Furthermore, in 2020, in response to the COVID-19 restrictions and the redeployment of clinical staff, the digital offer was enhanced to include online testing, treatment and contraception.





#### Health Needs Assessment of Nottingham's Black and Minority Ethnic Populations

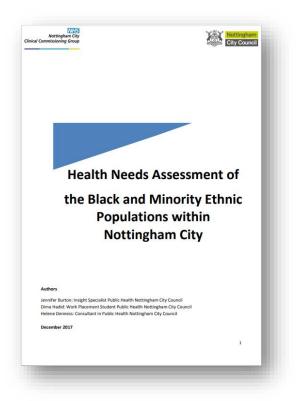
National and international evidence has shown inequalities in the health and healthcare experiences of Black and Minority Ethnic (BME) groups. NCC and local partner agencies are committed to tackling health inequalities and providing services that meet the needs of their expanding and diverse population. At the request of NCC and the CCG, a Health Needs Assessment (HNA) of Black and Minority Ethnic groups in Nottingham City was undertaken in 2017 to help inform strategy development and commissioning decisions.

#### So, what did we do?

- Completed a **comprehensive literature review** of BME health needs and service use
- Convened a multi-agency steering group to provide advice and support including commenting on survey design and developing a robust community engagement plan
- Worked closely with partners from across the community and voluntary sector to facilitate engagement with local communities and delivery of the engagement plan
- Engaged extensively with Nottingham's BME communities to explore the experience and perceptions of health and healthcare services
- Analysed data on local health needs and service usage where ethnicity data allowed
- Identified local services and assets including generic services and those specifically focused towards BME communities.

#### Engagement

The extensive engagement with BME communities has been a key success of the HNA and highlighted key approaches and techniques to successfully engage local communities, and to better understand how people from BME communities perceive health and experience healthcare and other services. Approximately 1000 local people from diverse communities were canvased for their views. This involved officers and local volunteers attending various events across the city and completing surveys with people from diverse communities, in addition to the delivery of focus groups targeted at various demographics. A total of 741 surveys were completed, 16 different community events were attended across the city, and 174 citizens participated in focus groups supported by volunteer interpreters. Feedback from the engagement has been key in shaping how services are planned and commissioned going forwards.



#### **Key Themes**

The themes arising from the community engagement echo those in the published literature and locally commissioned research. This resonance between the fieldwork and the literature validates the findings. An example of the key themes that emerged from the responses include:

- Many participants felt that mental health problems were common in their communities with problems exacerbated by cultural bias, experience of discrimination and stigma and challenges in accessing appropriate services
- The built environment was a strong theme in the survey responses and focus groups, including planning of fast-food outlets, obesity, accessing open spaces, housing and homelessness, fuel poverty, and a sense of belonging and affordability
- Lifestyle risk factors were highlighted by the majority of participants including diet, smoking, exercise and the role of personal responsibility. Interestingly, participants were divided on whether traditional or western diets were more likely to contribute to obesity and whether smoking could be seen as a 'cultural' behaviour
- Cultural and social norms were hotly debated, including whether services should be tailored to meet the needs of BME communities, be BME-specific and/or whether all services should develop cultural competence
- Challenges regarding access to services were described by many participants, including long waits for services, GP appointment times, GPs not understanding cultural needs, and reception staff acting as a barrier to access.

- Some participants requested culturally tailored services with some wanting to see a professional of the same ethnicity and others not due to fear of stigma from their own community. In addition, participants whose first language was not English commented on issues in accessing interpreters
- Stigma and/or racism and discrimination: some participants felt that many statutory services discriminated against them including employment, mental health services, and 'general' health and wellbeing services.

#### Key Outcomes of the BME HNA

The HNA provided insight into citizens' opinions on health and wellbeing and their experiences of, and potential barriers to, accessing services in Nottingham, many of which mirrored those found in previous studies conducted in the UK and internationally.

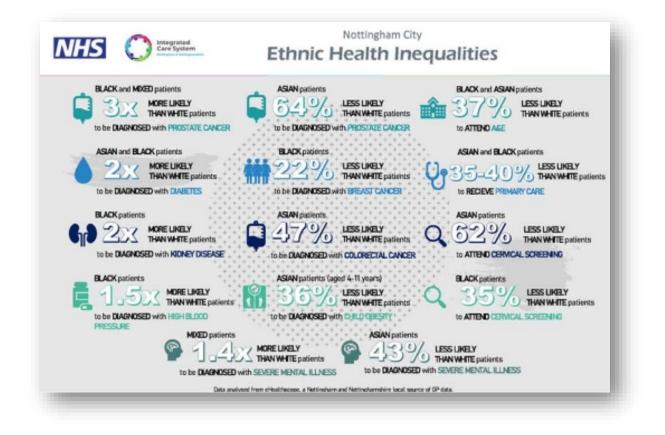
Based on the findings of the HNA and existing literature, **recommendations on how to tackle key issues and themes that emerged** from the report have been developed. Recommendations include addressing issues around access to services, mental health, stigma, racism and discrimination, communication and resources, community engagement, data, lifestyle risk factors and the built environment.



The development of the HNA was a catalyst for the establishment of the Nottingham City BME Community of Practice (CoP) group, which aimed to bring together key stakeholders with an interest in BME health and wellbeing and explore how best to take forward the recommendations from the BME HNA. The BME CoP was a well-established and vibrant group, attended by service providers, commissioners, and community members. It was dissolved in 2020 and members were invited to join a new programme of work being delivered by the Nottingham City Place-based Partnership that aimed to address inequalities in health outcomes experienced by BME communities. This programme of work is still taking place and is now known as the Race Health Inequalities programme. A Race Health Inequalities Summit was held in May 2023 where there was a focus on mental health as well as maternity care (more details here).

The work of the BME CoP group led to the coproduction of the Nottingham City BME Mental Health Action Plan in 2018. A key aim of the action plan was to deliver on the mental health recommendations within the BME HNA, and to improve the mental health and wellbeing among Nottingham's BME communities through better understanding the issues and challenges that BME communities experience when accessing mental health services. The action plan was aligned to the NCC Mental Health and Wellbeing Strategy 2019-2023 and actions from the plan have been incorporated into the Nottingham City Mental Health Prevention Concordat.

The BME HNA has proven to be a key document used to improve the health and wellbeing of Nottingham's BME communities. It has been highlighted as an example of good practice and is often referred to by commissioners and partners from across the system.



### Integrated Children's Service & Nottingham Family Hubs

Between 2011 and 2015, the UK coalition government emphasised the need to achieve maximum efficiency and effectiveness as a commissioning priority. As a result, a national review of commissioned services took place encompassing services for both 0-5 year olds and 5-19 year olds (and up to age 25 for young people with SEND). This review mandated that local areas should commission one integrated service for all children and young people to allow providers to develop an innovative and flexible approach to delivering the existing functions that were free from historic service divisions. The aim was to ensure a more efficient and streamlined service that was responsive to the needs of children and their families. As part of this transformation, some commissioning responsibilities changed including, in October 2015, the move of health visiting and family nurses from primary care to local authority public health teams.

Nottingham's integrated offer 'Giving Nottingham children the best start in life' commenced in 2018 and has delivered a streamlined, partnership offer between Nottingham CityCare Partnership and the NCC Early Help team. The offer includes health visiting, public health nursing, the Family Nurse Partnership, breastfeeding support and children's public health nutrition. Over the years, in response to changing local need, the service has developed specialist support such as pathways for transient families and for pregnant women with a previous child death.

Our integrated service in Nottingham has, throughout, worked with, and supported our **Small Steps Big Changes** programme of activities which are designed to give every child the best start in life. Our integrated service has been instrumental to the planning, development and implementation of the 'Family Hubs and Start for Life' programme in Nottingham in 2023. This new programme provides a coordinated network of services for individuals from conception up to age 19 (or up to age 25 for individuals with SEND).





Family Hubs provide a wide range of support including antenatal services, infant feeding support, Children and Adolescent Mental Health Services, and parenting support. There is dedicated support available for young parents and individuals with Special Educational Needs. Additionally, there is healthy relationships support available, along with support to develop the home learning environment. As part of the city's continued effort to support individuals facing SMD, Family Hubs also provide domestic abuse support, substance use support, and housing, benefit and welfare advice.

There are now four Family Hubs locations across the city, along with services being delivered in community venues and virtually.

The work of Family Hubs is expanding:

• The Start for Life scheme is available for all parents and carers in the city to benefit from

- The Healthy Little Minds team has expanded, and is now working across the whole city
- There has been an increase in Peep sessions. These sessions show parents activities that they can do with their children at home to promote language and communication skills.

In October 2023, the <u>Early Help Partnership</u> <u>website</u> was launched. This is a centralised source of information about Family Hubs, partnership support, and advice. This coincided with the publication of the <u>Nottingham City Early</u> <u>Help Partnership Strategy 2023-2025</u>. The strategy outlines five priority areas which will form a focus for all partners working together to achieve good outcomes for families over the next two years.







#### Improving Nottingham's Oral Health

In 2018, we began a challenging journey towards rebuilding a package of interventions that could better improve the oral health of Nottingham residents.

Nottingham City children experience poor oral health with the latest data showing a higher proportion of 5-year-olds have visual signs of tooth decay (34.2%) and, on average, a higher number of teeth affected by dental decay (1.3) than in England (23.7% and 0.8 respectively).

While there is significant work to be done to improve outcomes, the position we currently find ourselves in, and our ability to support residents, offers the platform to bring about a positive change in children's oral health in Nottingham. Below we summarise key aspects of the oral health journey since 2018.

#### Fluoridation

All water contains the mineral fluoride naturally in varying amounts; it is also present in some food. Water fluoridation involves adjusting the fluoride level in drinking water supplies to an amount that is optimal for dental health. Fluoridated water is currently supplied to 10% of the population in England.

The UK Chief Medical Officer has stated that "On balance, there is strong scientific evidence that water fluoridation is an effective public health intervention for reducing the prevalence of tooth decay and improving dental health equality across the UK".

In 2018, the Public Health Team facilitated discussions between elected members representing public health, children & young people, and education and a local Member of Parliament, on the evidence around community water fluoridation. In 2019, the Council's majority group took the unprecedented decision to include a pledge related to water fluoridation in their election manifesto. In turn it became part of the Nottingham City Council Strategic Council Plan 2019-2023. Nottingham City Council pledged to "Improve the dental health of Nottingham's children by campaigning to introduce fluoride into Nottingham's water supply".

Over the next year, the Public Health Team worked with experts to explore and understand more about how a community water fluoridation scheme could be conducted and its implications. We found Nottingham has a low level of natural fluoride in its water and that water sources supplying the city also supply parts of Nottinghamshire, Leicestershire and Warwickshire.

Unfortunately, further work was put on hold as the Public Health Team focused on protecting communities during the COVID-19 pandemic. During this time, the Health and Care Act 2022 also introduced new provisions that transferred powers related to establishing new water fluoridation schemes in England from local authorities to the Secretary of State.

This year at full council, Nottingham City Council's elected members unanimously voted in favour of a commitment to improving dental health including advocating for a local water fluoridation scheme for Nottingham City; including writing to the Secretary of State. This has been mirrored in the County Council and followed by support from the Health and Wellbeing Board and Integrated Care Partnership. There remains a significant journey ahead but this represents a significant milestone for Nottingham.

#### **Oral Health Promotion Service**

In 2018, financial pressures had left us without a city-wide school toothbrushing programme. Working with Small Steps Big Changes (SSBC) and health visitors we were able to ensure that toothbrushes were distributed to children under one; particularly those in area with high levels of deprivation.

This work has continued and in recent years has been supplemented by ringfenced NHSE funding. In 2022 Nottinghamshire County Council and Nottingham City Council secured £40,000 of ringfenced NHSE funding to distribute age appropriate toothbrushing packs to foodbanks and other community organisations, supporting families and vulnerable people. In 2023, the two councils secured a further £100,000 of ring-fenced NHSE funding to allow the continuation of this service.

In early 2024 we will also see a new evidence-based Oral Health Promotion Service begin its work in Nottingham City. This service support school toothbrushing programmes but also work in other settings to support children, young people, vulnerable adults and older people. The aim of the service is to help these individuals to maintain and improve their oral health.

#### **Mobile Dentistry Unit**

Nottingham City Council has continued to focus on data and intelligence to guide and support both our and local NHSE plans related to oral health. Through our Oral Health Needs Assessments and the city's work on SMD and homelessness, it was recognised that there was emerging evidence that one of the most common physical health problems faced by this cohort of individuals, was poor oral health.

In Spring 2022, 45 people experiencing SMD in Nottinghamshire participated in research about their oral health and access to dentistry. The research found that there was a need for an alternative offer to mainstream services for people experiencing homelessness and/or SMD. After considering different models, the ICB and partners decided that a mobile dentistry unit should be provided for a 12-month pilot and adopted as a partnership approach to offer acute care to individuals. The unit is currently operating on a rotation basis across both Nottingham City and Nottinghamshire with one visit per month in each area. The mobile dentistry unit has the capacity to see approximately 15 people a day at the designated sites.





### Air Quality, Climate Change and Health

Air pollution is the biggest environmental risk to public health in the UK, contributing to multiple chronic conditions including heart and lung disease, and reducing life expectancy. An estimated 630 deaths a year in Nottingham City and Nottinghamshire County can be attributed to air pollutants.(24) Furthermore, air pollution damages ecosystems and wildlife. Modelling shows that reducing levels of exposure to the main air pollutants in Nottingham City and County would in time generate significant reductions in related morbidity and mortality, thus improving quality of life and wellbeing, whilst also reducing health and care system costs.(24) Polluting emissions often contain greenhouse gases, so reducing air pollution will also contribute to limiting global warming.

In 2019, Nottingham City and Nottinghamshire County Councils reviewed their joint strategy, and the resultant <u>Air Quality Strategy for Nottingham</u> <u>and Nottinghamshire 2020-2030</u> was approved by each Council's Health and Wellbeing Boards in 2020. The Strategy's vision is **"for all of Nottinghamshire residents and visitors to have clean air that allows them to lead healthy and fulfilling lives**." To do this, it aims to reduce the average concentrations of two key pollutants known to affect human health: nitrogen dioxide and fine particulate matter.

It will deliver the vision and aims through action under four strategic objectives:

- Place making and development for good air quality
- Enable the shift to zero and low emission transport to reduce emissions
- Reduce, minimise and prevent emissions from industrial, commercial, agricultural and domestic sources and activity
- Engagement and communication for behaviour change.(24)

Cross-cutting principles will be followed, including working with partners to take an evidence-based, health in all policies approach that aims to reduce health inequalities.

In 2019, NCC developed the **Carbon Neutral Charter**, setting out a vision to be the first carbon neutral city in the UK by 2028.(25) Following on from this, in 2020, NCC declared a Climate and Ecological Emergency at Full Council, and the <u>Carbon Neutral Nottingham 2020-2028 Action</u> <u>Plan</u> was published which builds upon the Charter.(26) The plan focuses on:

- Reducing CO<sub>2</sub> production as far as possible across key sectors
- Capturing carbon and offsetting residual emissions through measures such as tree planting
- Adaptation measures to ensure the city is resilient to the effects of climate change
- **Protecting and enhancing nature**, biodiversity, and the city's green spaces
- Changing behaviour so everyone in Nottingham is reducing their carbon footprint as much as possible, and
- Ensuring Nottingham becomes a better place to live, with increased opportunities for citizens to lead healthier lives with improved economic, social and cultural benefits.

There are significant opportunities for action on climate change to also improve the health of the population and reduce health inequalities, resulting in a greener, healthier and fairer future. The Public Health Team are currently undertaking work to identify and develop areas that mitigate carbon emissions whilst maximising health cobenefits, as well as working alongside the CN28 team to ensure that health co-benefits are embedded in the wider council's CN28 goals.

#### Whole System Approach to Obesity

The rise in obesity, has been a consistent priority policy for governments in England since the early 1990s, and yet the obesity rate keeps rising. At 65.8%, the majority of adults in Nottingham in 2021/22 were overweight or obese. This is not significantly different from the England average of 63.8%, and is a slight improvement on the previous two years where Nottingham had a significantly higher number of overweight adults than England overall.(14) Nottingham's rates of childhood obesity are increasing at a faster pace than the national average, and 2021/22 data indicate that 25.5% of Nottingham's reception age children and 44.8% of Nottingham's year 6 children were overweight.(14) These figures are significantly worse than the England average. While education, empowerment and access to weight loss services are an important piece of the puzzle, we know that in reality, obesity and being overweight is caused by a mixture of societal, environmental and individual factors.

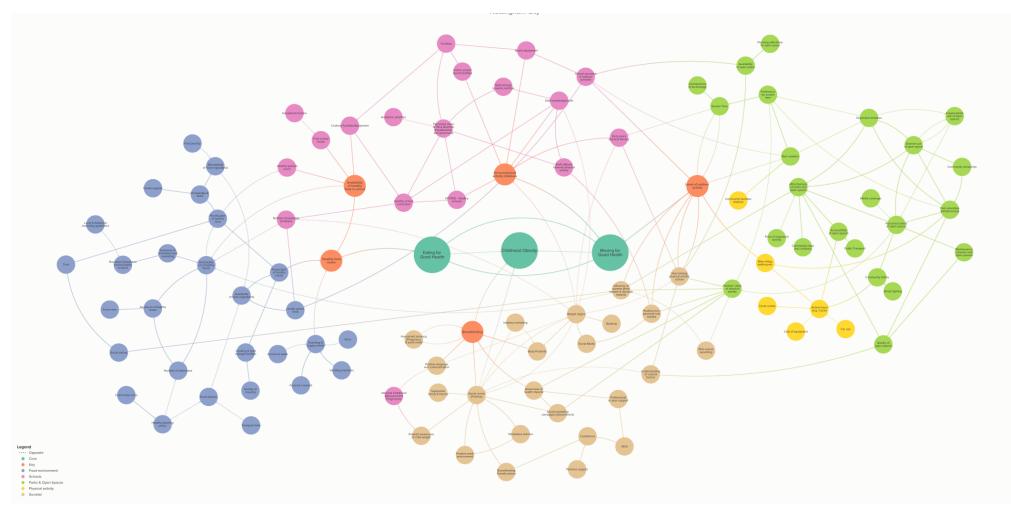
In 2019, PHE published their guidance document for a whole systems approach to obesity.(27) Locally, this way of working underpins our 2023 Eating and Moving for Good Health (EMGH) Strategy, with the vision "to transform Nottingham's systems, services and infrastructure so that they support eating and moving for good health as a part of everyday life, for everyone in the City".(28) This is not only a strategy to tackle excess weight, but to improve the opportunity for everyone to benefit from the health outcomes of better nutrition and moving more. Following the advice of PHE to map and manage the whole systems approach at a local level, the starting point of the EMGH Strategy was getting together with partners to create the map seen in Figure 6, which shows local factors that influence children and young people's ability to eat and move well.

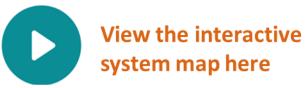
The very detailed map gives some sense of the sheer scale of different influential factors on healthy lifestyles at a local level. The colours represent the following areas: Key areas, Core areas, Food Environment, Schools, Physical Activity and Societal factors. This work helped to group the five different themes of the Strategy:

- Ensuring all Early Years Settings, Schools and Academies are enabling eating and moving for good health
- Supporting healthy nutrition throughout the life course to support all people to achieve and maintain a healthy weight
- Promoting physically active lives and building active and green environments
- 4) Creating a local environment that promotes healthy food choices
- 5) Promoting a **sustainable food system** that tackles food insecurity.(28)

All of these themes consider different systems and services that need to be in place to provide an infrastructure that supports healthier choices, and the actions for each area are laid out in the Eating and Moving for Good Health Delivery Plan .(29) It is vital that leading system partners such as the NHS, the Community and Voluntary Service, our Active Partnership, and our Local Planning team, come together at a strategic level to direct and influence across and between their areas of expertise. In Nottingham, we have formed a Strategic Alliance for Eating and Moving for Good Health to enable us to do this. This alliance recognises that the answer to us all living healthier lifestyles requires a united and integrated effort across systems to positively impact the daily habits of our population.

#### Figure 6. System map of Eating and Moving for Good Health in Nottingham





#### COVID-19

It would be easy to fill a whole report with the incredible amount of public health work done in Nottingham to protect and positively impact the health of Nottingham residents in response to COVID-19. This section does not attempt to do so but provides several key pieces of work. More details on the impacts of COVID-19 in Nottingham City can be found in a recent Joint Strategic Needs Assessment report.

From December 2019, the world was watching events unfold in China following an outbreak of a virus called 'SARS-CoV-2' – more commonly referred to as COVID-19. At the end of January 2020, the first cases of COVID-19 in England were confirmed.(30) In Nottingham, it wasn't until the 28<sup>th</sup> of February 2020 when the first case of COVID-19 was recorded and this marked the starting point of the most intense period for Nottingham's Public Health Team. During the following week, more cases were confirmed and within a few weeks, COVID-19 outbreaks were occurring more frequently all over the United Kingdom. By the end of March 2022, 106,701 cases had been recorded with 985 COVID-19 deaths in Nottingham City.

The pandemic demonstrated how public heath can work at speed and in collaboration both as part of the local authority and with partners like the NHS, Police, schools and the community & voluntary sector, including sharing expertise in data, community intelligence, partnerships and operational delivery. Public health teams have been involved in offering a wide range of support to local communities, specifically to schools, care homes and workplaces but also to different local groups.

The pandemic exposed stark health inequalities. Health inequalities which were all too apparent prior to the pandemic have been widened and deepened. As a public health team, our response to the pandemic was guided by local public health intelligence and listening to the experience of our communities.

The COVID-19 public health emergency catapulted DsPH and their teams into the epicentre of the response to it. The pandemic has helped build a greater understanding of the skills and expertise of public health teams. The contribution of the public health team during the pandemic has enabled us to develop stronger relationships across the local health and care system and new partnerships with communities.

### Reducing Inequalities in COVID-19 Vaccination Uptake

As the largest vaccination programme in the history of the NHS, delivered at pace in an unprecedented context, the COVID-19 vaccination programme built upon learning from previous work on the 'flu vaccination to ensure addressing inequalities was at the heart of planning and delivery in Nottingham and Nottinghamshire.

Across Nottingham and Nottinghamshire, inequalities in COVID-19 vaccination uptake were evident by geography, deprivation, race, age and more. The programme sought to overcome barriers to vaccination around the 'three Cs' – complacency, confidence and convenience. Actions that were taken programme-wide included:

- Pop-up clinics were established in areas with lower vaccination uptake
- A specialist car scheme was put in place to support those with access barriers
- A vaccination bus was mobilised

- Vaccination was offered in trusted community venues
- Letters and services were translated where required
- Vaccine messages were promoted at Friday prayers, on social media sites and via community radio stations rather than solely through 'mainstream channels'
- Local volunteers were sourced for all sites to provide support to vulnerable patients and help build trust
- Bespoke engagement using community influencers and leaders at local level was prioritised for target groups
- EasyRead invitation letters and resource packs were used where required
- Residents known to have not taken up their vaccination offer were proactively telephoned by both GP practices and the local authority.

It was identified early in the programme that often top-down messages are not the most appropriate method and can be counter-productive. The work increased engagement with the community, enabling improved connections with people for whom there may be barriers to vaccination. Overall, the work undertaken and the learning from it will enhance the Public Health Team's connections with communities going forwards.



Source: https://notts.icb.nhs.uk/2022/12/08/top-up-yourimmunity-ahead-of-christmas-health-boss-urges-public-to-getcovid-19-autumn-booster-on-two-year-anniversary-of-vaccinationprogramme/

#### COVID-19: Everyone In

The 'Everyone In' initiative has been discussed in more detail in the <u>2021 Director of Public Health</u> <u>report</u> related to COVID-19 but with a specific focus on tackling Severe Multiple Disadvantage in Nottingham.

The COVID-19 pandemic changed many things, and one of these was providing impetus to the understanding and desire to address severe multiple disadvantage (SMD) in Nottingham. A major part of this was the "Everyone In" initiative which occurred in the early stages of the pandemic.

Everyone In was the name given to the significant effort that was made by the local authority along with partners in the public, voluntary and private sectors to accommodate rough sleepers in hotels. Altogether 115 rough sleepers (guests) were accommodated.

Public health leadership was vital for the success of this project. It helped ensure a focus on need with a large proportion of those accommodated recognised as having at least three of the needs associated with severe and multiple disadvantage (SMD). Public health drove **a collaboration connecting services** commissioned by the Local Authority and local NHS partners along with the voluntary sector. Individuals received a variety of support while in accommodation and the initiative improved engagement and visibility with health and care services including General Practice.

At the point that Everyone In was ending, partners recognised that the progress that had been made was something that needed to be sustained and further developed. The success of the partnership working demonstrated here has had an influence beyond SMD into the way the Nottingham City Place Based Partnership tackles key issues together.

#### Health and Wellbeing Community Champions

In late December 2021, the Community Vaccine Champions programme was launched, which is now the Health and Wellbeing Community Champions programme. It received £485,000 worth of funding from the Department for Levelling Up, Housing and Communities in 2021. The programme is delivered by the Public Health Healthy Communities team in partnership with NHS Nottingham & Nottinghamshire and Nottingham Community and Voluntary Service (NCVS). The programme looks to recruit volunteers who are **trusted voices**, have **networks and contacts**, and want to volunteer to support the **improvement of their local communities' health and wellbeing**. The early focus was on COVID-19 vaccination uptake.

The recruitment of volunteers actively started in June 2022 by engaging residents and community organisations who were already embedded and active within their communities. These include members of neighbourhood groups, faith communities, and communities of people with disabilities. At the outset, the Public Health Team gained a better understanding of communities' perspectives regarding the COVID-19 vaccine as a lot of the proactive work was carried out in areas with lower COVID-19 vaccine uptake. This included 'GRAB A CAB', a free taxi service for residents to and from the local COVID-19 vaccination centre and 'Vaccination Conversations Training' which was rolled out as part of the Community Champions' induction training.

Additionally, the work has included small grants funding for community groups and organisations to deliver initiatives which proactively address health inequalities and engage with members of the community. This engagement aims to increase the wellbeing of others and share health messages, with a specific focus on increasing COVID-19 vaccine uptake at the outset. This work has opened a dialogue, where residents can discuss their perceptions and concerns regarding health and wellbeing issues with the Public Health Team via their Community Champion, including thoughts surrounding the COVID-19 vaccine. This dialogue has also meant that the Public Health Team can share information directly with people who are trusted within their communities, as well as provide training for these individuals.





As a result, from April 2022 to March 2023:

- 71 volunteer Champions were recruited
- £200k grant funding was allocated to community groups and organisations to deliver over 150 health initiatives
- 5480 hours of volunteering were completed by Champions
- 725 individuals were impacted in a meaningful way by the Champions scheme
- 290 individuals who identify as having a disability were supported by Champions
- 500-600 individuals from ethnic minority and mixed ethnicity backgrounds were supported by Champions.(31)

Community Champions are encouraged to develop and implement **innovative** projects and initiatives that address specific community needs, ranging from education and health to environmental sustainability and social inclusion. They actively **engage** with the community through various channels to provide support and gather feedback. These channels include surveys, informal chats, WhatsApp groups, community events, radio, short films, social media platforms, local community centres, as well as participating in network and community events.



Feedback regarding the scheme has been positive...

#### **Community Champion quotes:**

"I'm proud to say I'm a champion. It is very good for my professional development - learnt lot of vaccination and mental health – I've briefly introduced what I've learnt to my people – they're talking about mental health more."

"When I made known to my friend that I was a community champion...then they realised people like me can actually go the council where they can air their views - they vented to me about their problem and asked me if I could pass on and do anything about it."

#### **Resident quote:**

"This project enables people from all different walks of lives - whether they're working/not working, whether they've got a disability/Muslim/Christian/not religious/suffered domestic abuse - to have conversations with other people that they would never ever spoken to."

#### Statutory stakeholder quotes:

"[The Community Champions programme] creates a genuine, two-way nature of relationship with public health through more organic buy-in and participation."

"[Without the Community Champions programme, people are] more likely to have waited until crisis points, and sometimes [their conditions become] too late or too acute by then."

#### **Going Forward**

Nottingham has recognised that it would be valuable to continue this work with a broader perspective. Consequently, the programme has been extended until March 2025, and is now linked to the Health and Wellbeing Strategy, currently covering a broad range of health issues. The aim of the Health and Wellbeing Community Champions programme is to continue tackling health inequalities by **keeping communities connected and informed** through Community Champions. The Champions receive training, resources, and support to enhance their leadership capabilities and enable them to effectively engage with stakeholders.

The programme recognises that there are already so many individuals doing a vast array of health and wellbeing activities. And so, this project gives them an opportunity to become part of a formal network of like-minded individuals where they can expand their own networks, support one another and keep up to date with the latest health and wellbeing messages. Champions also gain personal development through free training and experience through a variety of flexible opportunities that help to improve Nottingham's health and wellbeing. The work of the Champions ensures the community voice is heard across all aspects of public health decision making, including intelligence, strategy, partnerships, and commissioning. By creating more inclusive health initiatives, and empowering individuals with the tools to access the support they need, the programme can improve the lives of residents, strengthen community bonds, foster a sense of belonging, and build a more resilient future for all.

#### Domestic and Sexual Violence and Abuse (DSVA) Services

Since the transition to local authority, the Public Health Team in Nottingham has forged a remarkable collaboration with DSVA colleagues in the Community Safety Partnership. Examples of good practice include developing an ED DSVA Nurse, 0-19s DSVA Nurse, Specialist DSVA Midwife, & IRIS GP DSVA Project. IRIS is a collaboration between primary care and third sector organisations that specialises in DSVA training, support and referrals for General Practices.

The NCC Public Health Team is also a partner in commissioning **DSVA services** across Nottingham and chaired the **DSVA Strategic Partnership Group** reporting to the Community Safety Partnership Board. In this context, the Public Health Team played a key role in developing the NCC response to the Domestic Abuse Act 2021 to meet the Local Authority Statutory Duty. The Public Health Team have also chaired the DSVA, FGM and Honour-Based Violence (HBV) Safeguarding Group which developed best practice arising from Domestic Homicide Review recommendations.

#### Joint Health and Wellbeing Strategy for Nottingham April 2022- March 2025

This **latest Joint Health and Wellbeing Strategy** identifies the four priority areas where action can be taken between April 2022 and March 2025 to make the biggest difference to health and wellbeing in Nottingham.(32) The Strategy was developed by considering the strategic priorities of local partner organisations, national strategies, and local data and intelligence including the views of local residents. The Strategy focuses on fewer priorities so that combined efforts have a greater chance of making a difference.

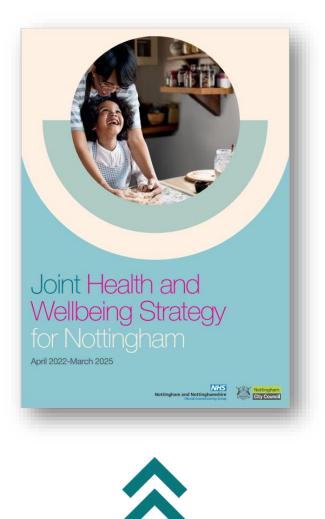
The Strategy aims to improve the health and wellbeing of everyone in Nottingham, but also has a proportionately greater focus where change is most needed, aiming to reduce the inequality gap. Delivery Plans therefore include interventions with universal reach as well as interventions targeted towards people in particular groups or areas of Nottingham where the health need is greatest.

The Vision is "to improve the health and wellbeing and reduce health inequalities of the population of Nottingham through addressing the wider determinants of health and enabling people to make healthy decisions."

When considering the main causes of death and illhealth and the inequal distribution of health, four priority areas were identified that have an important impact on the health and wellbeing in Nottingham:

- 1. Smoking and Tobacco Control
- 2. Eating and Moving for Good Health
- 3. Severe Multiple Disadvantage (SMD)
- 4. Financial Wellbeing.

The Strategy outlines the scope of each of these priorities, along with an outline of how the Board will know if a difference has been made in each area. The Place-Based Partnership is responsible for driving forward the delivery of the Strategy using its programme approach. There are four programmes, one for each of the priorities, and Delivery Plans will be iteratively developed for each of the programmes throughout the life of the Strategy.



**Click to read** 

the full report

#### NCC Strategic Council Plan 2023-2027

The Strategic Council Plan outlines the overall vision for Nottingham and the Council over the next four years.(33) The Plan's vision statement is "Nottingham is Healthy, Safe, Clean, Green, Proud and Ambitious." The increased attention on both human and planetary health can be seen by comparing this statement to its counterpart from the 2021-2023 Strategic Council Plan, as 'healthy' and 'green' are new additions to the vision.

The Strategic Plan focuses on core areas where NCC feels it needs to make the biggest difference: **improving health, increasing opportunities, and protecting vulnerable residents.** The focus is built across three key themes under which there are ten high-level outcomes based on the essential principles of tackling inequalities, listening to residents, providing help where it is most needed, and working in partnership so all people have dignity, respect, and the opportunity to prosper and be ambitious. The key themes and high-level outcomes are:

#### 1. People:

- Child-Friendly Nottingham
- Living Well in Our Communities

#### 2. Neighbourhoods:

- Green, Clean and Connected
  Communities
- Better Housing
- Safer Nottingham
- 3. City:
  - Carbon Neutral by 2028
  - Keeping Nottingham Working
  - Keeping Nottingham Moving
  - Improve the City Centre
  - Serving People Well.

The Plan outlines priority activities and interventions to help deliver each of the above outcomes within its four-year timespan.



#### **Financial Wellbeing**

Financial wellbeing means being able to meet current needs comfortably and having the financial resilience to maintain this in the future. It builds on the ideas of **financial inclusion** (access to financial products and services) and **financial capability** (skills, knowledge, confidence, attitudes and behaviours).

In April 2022, Nottingham included financial wellbeing as a programme in the Joint Health and Wellbeing Strategy, recognising the impacts of poverty and money difficulties on physical and mental health.

The NCC Public Health Team are working with the **Nottingham Financial Resilience Partnership** as the delivery partner for the programme. A key priority is increasing awareness and skills among health and community staff and volunteers to enable discussions about financial wellbeing with patients and service users, linking into money help and information. We are engaging with partners in the Nottingham City Place-Based Partnership on topics including the real living wage, skills development, and the role of anchor institutions.

#### Public Health and our Health and Care Partners

We know that health is mainly influenced by many social, economic and environmental factors, we also understand that the health and care system plays an important part in helping us stay healthy or recover from ill health.

The partnership between public health and NHS colleagues remains a core part of our role. Public health continues to have the ambition to work in partnership linking the Integrated Care System (ICS) with communities. This includes working with partners to ensure prevention is built into disease pathways and service offers. This has included work between Nottingham City Council Public Health and Nottingham University Hospitals related to identifying and responding to health inequalities.

Public health also plays a role in ensuring organisations within the Integrated Care System recognise their position as anchor organisations supporting the social and economic life of the city and this has been demonstrated by the **Universities for Nottingham Civic Agreement**.(34) This means we can work together to support employment opportunities as well as focusing on health systems. Public health has an important influence within the ICS and has been a key part of the development of the <u>first Integrated Care Strategy</u> for Nottingham and Nottinghamshire.(35) With three key aims of **equity, prevention and integration**, this strategy will support shared understanding and ambitions across our local area. We know that many of the health conditions which affect people at younger ages in Nottingham City are preventable, and that some groups have poorer access, experience and outcomes in our health system.

These aims support the ambitions in the Joint Health and Wellbeing Strategy. Working with the ICS, we have been pleased to support the Health Inequalities and Innovation Fund that will allocate funding to innovative projects that focus on reducing health inequalities, for example increasing childhood immunisation rates and extending family mentoring, as well as Changing Futures.



#### **Community Fibroscan Clinic**

Early detection of liver disease allows people to access timely treatment and reduce the risk of death. Fibroscans are quick and painless health checks that can **detect liver disease before any physical symptoms develop**.

In order to increase the number of people accessing this intervention, Nottingham University Hospitals obtained funding for a community scanning project which targeted populations at risk of liver disease due to their level of alcohol consumption. The service was originally mobile and attended events, but in 2023 the clinics became more established, with a weekly Community Fibroscan clinic being implemented to encourage early detection and intervention for people accessing substance use recovery and treatment services and other associated provision. The clinic targets those drinking at harmful levels for a long time but who were previously reluctant or scared to seek help. The clinics are based across a range of community settings and are supported by specialist substance use practitioners which encourages a seamless referral and transition into treatment and recovery services, where required.

So far, 163 people have been scanned in clinics across the city and 37 people had further consultant input due to the outcome of the scan. The clinics have been used as a mechanism to **engage people and create a pathway into treatment and recovery** services for those not already engaged; this includes 9 people who have Severe and Multiple Disadvantage. It is anticipated that the continuation of the community fibroscanning clinics will encourage further engagement with services and an overall awareness of liver health, ultimately resulting in improved health outcomes for this population.

#### **JSNA Dashboards**

### The Joint Strategic Needs Assessment (JSNA) is nublished by the Nottingham and

published by the Nottingham and Nottinghamshire ICB and Nottingham City Council. The JSNA details the present and future needs of Nottingham's population regarding health and social care.

The JSNA has historically consisted of very lengthy documents. Nottingham is now moving towards representing the data in the JSNA in a visual way. This is being done in the form of online dashboards, where each chapter of the JSNA has its own dashboard, and information is presented in a more interactive and engaging way. This will make this valuable data **more accessible** to both the public and professionals.

Work on these dashboards has commenced, and Chapter 1 was completed and published in 2023. There will be six chapters in total, with completion expected by the end of 2024. This work brings Nottingham city in line with current **best practice** and national developments.

It is also important that we continue to understand our population's health challenges in detail, so the Public Health Team will continue to develop comprehensive needs assessments to support strategic plans for improving health outcomes.

Nottingham & Nottingham & Nottingham *bashboard* 

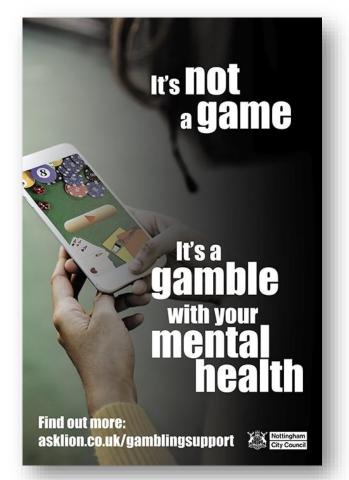
Chapter 1 - Health and Wellbeing

#### **Reducing Gambling-Related Harm**

Gambling-related harm is common, and damages physical and mental health, relationships, employment, education and financial wellbeing. In recent years, gambling-related harm has been recognised as an important public health problem. Some of the reasons for this are because people who already have poor health or are more socially excluded are more likely to experience gamblingrelated harm, and people often do not recognise the problem, or hide it until a late stage, when serious harm occurs.

In early 2023, the Public Health Team completed a gambling-related harm Health Needs Assessment in Nottingham. This showed around 5500 people in Nottingham have, or are at risk of, a gambling problem, including around 1000 young people aged 11 to 16, with some identified groups of people in Nottingham at higher risk of harm. For each person with a gambling problem, on average 6 to 10 others – such as family members, friends or colleagues experience harm. Stigma and shame are barriers to accessing help, and many people who need help are not sure where to go.

In response, a multi-agency group in Nottingham, including citizens with lived experience of gamblingrelated harm, developed the <u>Nottingham Gambling</u> <u>Harm Prevention Strategy 2023-2028</u>, which was endorsed by the Health and Wellbeing Board in July 2023. A co-production group has since developed a local awareness campaign, aimed at everyone in Nottingham. The campaign will be visible around the city and online, and aims to raise awareness of what gambling-related harms look like, and how to find information, advice and support – including for people who are affected by another person's gambling. This will be a first important step in delivering the Strategy and its aim to **make Nottingham a city where people are protected from gambling harm**, and can access and receive support.



### Looking Forward: 2024 and Beyond

The report showcases just a small proportion of the work the Nottingham City Council Public Health Team has been a part of over the past 10 years. Numerous staff past and present have contributed to a busy decade of impactful work across the breadth of public health.

Our work as a team is already informed by the lessons of the last 10 years. We continue to work towards the priorities of the Joint Health and Wellbeing Strategy. The examples below show how we plan on doing this through our work across the council and by involving communities in the creation of newly commissioned services.

#### Health In All We Do

The Public Health Team already work closely with colleagues across Nottingham City Council to achieve our shared outcomes. We will not be able to achieve our vision for a Healthy Nottingham without also addressing what are commonly referred to as the **wider determinants of health**, such as the jobs we have, the homes we live in and the physical and natural environment around us. Implementing a **Health In All We Do (HIAD) approach** across the Council will enable us to ensure that we are systematically and consistently maximising every possible lever and opportunity to protect and promote health and wellbeing. At its simplest HIAD will mean that the promotion of good health and/or the prevention of ill health is a core consideration in everything the Council does from setting policy and strategy, to allocating budget, and from planning to delivery of its services.

It will require a Council wide commitment to valuing the impact of health as a primary consideration, alongside other relevant factors, when making decisions of all kinds.



Nottingham City Director of Public Health Annual Report 2022/23

### Looking Forward: 2024 and Beyond

#### **Integrated Wellbeing Service**

Nottingham City Council is looking to deliver its wellbeing and behaviour change services differently. From April 2024, instead of separate lifestyle and wellbeing contracts that risk being disjointed, Nottingham City will welcome a new Integrated Wellbeing Service.

The multitude of providers and entry points into behaviour change support that currently exist will be replaced with a single and simple point of entry. This approach will enable a service to better understand the unique and complex lives of residents. The service will be better equipped to support people with multiple 'risky' behaviours or for whom sustainable behaviour change is only possible with support for other social issues (e.g. Welfare or Housing advice).

The new service will focus on four key services:

- 1. Stop Smoking Service
- 2. Tailored/population specific physical activity programmes
- 3. Eating and Moving for Good Health programme (Tier 1)
- 4. Healthy lifestyle programmes for child and adult weight management (Tier 2)

The core services will be supported by additional functions including identification and brief advice for alcohol and gambling related harms as well as emotional and mental wellbeing support. The service will be embedded within communities working in partnership to deliver the support residents require. It will also support us in opening up conversations on health by ensuring those with influence within our communities have the skills they need to have healthy conversations. This contract signals the future for Nottingham City Council Public Health Team with a contract term of up to 10 years and a strong focus on working with communities to ensure continuous improvement and innovation.

#### Recommissioning Sexual Health Services

Ensuring good access to high quality sexual and reproductive health is critical to helping people to live healthy and fulfilled lives. Working with Nottinghamshire County Council, we have commissioned a new integrated sexual health service to commence in April 2024 with the vision "that everyone in Nottingham and Nottinghamshire will be able to make informed, positive choices about their reproductive and sexual health at every stage of their lives. They will have the opportunity to live a pleasurable and healthy sexual and reproductive life, free from coercion, discrimination and violence".

In developing the new service we engaged with residents to shape and influence the services they rely on. The new service will focus on improving sexual health outcomes, improving prevention and addressing health inequalities, through working in collaboration with service users and communities.

The new Nottingham and Nottinghamshire Integrated Sexual Health Service will provide a full range of sexual and reproductive health services including contraception, testing and treatment of STIs, and provision of pre-exposure prophylaxis (PrEP) for HIV. Individuals will be able to access the service through a variety of routes, including increased use of online services alongside face-to-face services at accessible times and locations.

# Building a Workforce for the Future

#### An award-winning approach to workforce retention

Since 2021, the public health team has grown significantly. Our ambition is to develop and sustain a highly respected and professional public health workforce to support our communities to live longer, healthier lives.

In 2023, Nottingham City Council was awarded the LGC Workforce Award for staff retention. Our workforce structure provides a pathway for those looking for a career in public health from Apprentice all the way up to Director of Public Health. To achieve this, we have a Continued Professional Development programme and ensure all staff complete fully funded academic public health modules. Our recruitment approach has also changed and focuses on potential not just skills and experience.



#### **Career Conversation: Uzmah & Aislinn**

Aislinn, a Public Health Manager in the Inclusion Health team who first took on a public health role in 2022 talks to Uzmah, a Senior Public Health Manager in the Health Improvement team who has worked in public health for over a decade.



Watch the conversation between Aislinn and Uzmah here

### **Building a Workforce for the Future**

#### Public health Speciality Training

The main route to becoming a Consultant in Public health involves completing Speciality Training which usually takes five years. Unlike other medical specialities, application is open to individuals with or without a medical degree. During the initial phase of training, most trainees, or public health registrars, will complete a Master of Public Health degree. Additionally, they will complete public health service work with local authorities, such as NCC, and the regional UKHSA Health Protection Team. In the second phase of training, registrars have the opportunity to develop further by selecting placements in a wide variety of settings that meet identified educational needs as well as career aspirations.

The NCC Public Health Team offers a range of training placements throughout the year, including placements for public health registrars at every stage of training. The team is committed to investing in its staff and the future workforce and has created an environment that fosters a culture of learning and development. Public health registrars at NCC are treated as equal members of the team and given the opportunity to work on a wide range of projects across all five portfolios, as well as attend team learning events. During their placement, registrars are closely supported by consultants and other senior staff members who identify key opportunities for registrars to develop knowledge and skills, whilst providing support and feedback to enhance progress and learning. Supporting registrars enhances the learning and skills of the whole team and brings innovative thinking and challenge to our work.



#### Nottingham City Council Public Health Team

### **Building a Workforce for the Future**

### Staff Profile: Hannah Booth (Public Health Registrar)

After finishing medical school and Foundation Training, I completed three years of Paediatric training; it was during this time that I developed an interest in public health. Working with children and their families, I became very aware of the role of inequalities and how these impacted health status and outcomes. I also saw multiple examples of how wider determinants of health were impacting the families that I saw, and it became clear how circumstances in childhood went on to determine health and wellbeing in adulthood.

Prior to starting Paediatric training, I had completed a Diploma in Advanced Paediatrics (UCL), where I had particularly enjoyed modules in global child health and health system strengthening and so I decided to pursue an Out Of Programme Experience to develop my interest and increase my understanding of public and global child health. I therefore chose to spend three months in East Africa, completing a Diploma in Tropical Medicine and Hygiene (LSHTM). This starkly highlighted the role of wider determinants and inequalities in determining health. I learnt the vital need for prevention and health promotion.

I went on to volunteer in a refugee settlement in Uganda where I used a UNHCR scorecard assessment to work with local health leaders to understand and facilitate action where health facilities across the settlement might improve. These experiences confirmed my interest in public health and prompted me to apply for the training programme which I started in 2019.



I have really enjoyed public health so far and am certain that it was the right career move for me. I have enjoyed developing a broad range of skills and working on a variety of different public health issues where evidence, experience and creativity are all needed and make every day different. I have also found it immensely satisfying working in teams that hold fairness and equality at the heart of what they do.

Public health training has provided fantastic opportunities to experience different areas of public health and explore specific interests. I remain very interested in child health and have more recently had the opportunity to develop my knowledge and skills in climate change, environmental sustainability and public health. Within training, I have secured projects with the Faculty of Public Health's Climate and Health Committee, and a Sustainability Fellowship with the ICS working on this agenda.

Whilst working at Nottingham City Council, I have thoroughly enjoyed getting to know the team and learning about their perspectives and interests in incorporating climate change into public health roles and am looking forward to working with the team to develop this agenda further.

### Conclusions

#### **1** Take the time to reflect and recognise our successes

This report shines a light on just some of the work Nottingham City Council Public Health team has done over the last 10-years in local authority. There are many persistent health challenges in Nottingham City but there have been notable successes (e.g. teenage pregnancy or breastfeeding). Taking stock allows us to identify the priorities for the future but also take learning from our successes and failures into new and emerging issues such as gambling-related harm.

#### 2 Ensure listening and building quality community partnerships is at the heart of all we do

A common theme emerging from many of the projects in this report is the importance of listening and involving communities and service users in the design and delivery of preventative services. The report includes examples of where high-quality Health Needs Assessments can set the foundations on which partnerships can grow and act for many years. Recently we have focused on building a strong network of Health and Wellbeing Community Champions and will continue to strive to include residents' voices in all we do.

#### **3** Recognise that public health is a team-effort that goes beyond the job-title

Public Health rarely acts alone and our skills as collaborators are key both for the wider health and care system and, most importantly, to better the health of our residents. In this report, the Public Health Team is seen to bring partners together and play a pivotal role in multi-agency working be it in relation to severe multiple disadvantage, smoking and tobacco, eating and moving for good health, sexual health, gambling related harm and many more. Public health's position in local authority puts us in an important position bridging the partnership necessary for the success of the Integrated Care System.

#### **4** Innovate well

The future of public health requires us to think in new and innovative ways. For instance, keeping up with advancing technologies enables us to better share public health intelligence with partners and makes our services more accessible to residents. However, our public health skills are also valuable in ensuring innovation benefits outcomes and contributes to reducing health inequalities not widening them (e.g. digital poverty).

### **Reflections from the Authors**

#### Reflections on Developing the Annual Report: Ana and Zara (Public Health Registrars)

We were tasked with developing a Director of Public Health Annual Report for publication on behalf of Lucy Hubber, and asked to focus the report on 10 years of public health in the local authority. The Annual Report is the DPH's independent statement for professionals and the public about the health of the local community as well as a vehicle to identify issues, report progress and outline priorities.

We both commenced our speciality training in August 2023, and Nottingham City Council is our first placement on the training scheme. Developing the DPH Annual Report was therefore our first major project as registrars. Consequently, this project seemed daunting initially, as neither of us had ever worked within local authority public health. Additionally, we had limited knowledge about the work undertaken by the NCC Public Health Team over the past decade. We therefore realised early on that colleagues within the NCC Public Health Team would be essential assets as they have all been involved in projects over the years, and some have worked in public health through the transition from NHS to local authority as well as subsequent health system restructurings. To develop the Annual Report, we therefore held multiple meetings with colleagues from across the portfolios, and completed an activity at an away day to map staff members' career histories over the past decade, as well as key work they have been involved in. Not only was this beneficial for information gathering for the Annual Report, but as new colleagues, we found that it was a great way to get to know our new team members and become embedded within the team. Working on the project has also given us great insight into the excellent, varied work undertaken by the NCC Public Health Team, as well as increased our knowledge of the wider health and care system in England, and helped us to develop unexpected skills for example in video editing!

In order to make progress moving forward, it is important to understand lessons learnt from the past, and creating this report has provided us with this valuable opportunity to reflect. By reflecting on the expanse of work undertaken over the past decade and its impact upon the health of Nottingham's population, we have been able to consider our next ten years in public health and the exciting opportunities we will have to take part in similar wide-ranging work that will improve health and wellbeing and reduce health inequalities.

### Acknowledgements

As with the majority of public health work, the development of this report has been a team effort, with instrumental contributions from colleagues from within NCC as well as externally. We would like to extend our thanks to everyone who has been involved in developing the report, whether this was through formal contributions such as writing a section, or simply imparting knowledge and insight through informal discussions.

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