

Report to: **Audit, Best Value and Community Services Scrutiny Committee**
Date: **8 November 2016**
By: **Acting Director of Public Health**
Title of report: **Public Health One-Off Projects - Update Report**
Purpose of report: **To provide an update on Public Health Grant one-off funded cross departmental projects.**

RECOMMENDATIONS

The Committee is recommended to consider and note this report.

1. Introduction

1.1 Public Health resource has been allocated, through a cross-council group and a business case process, to one-off interventions which would create or support a step-change in addressing public health outcomes, ie. where East Sussex is performing significantly worse against the Public Health Outcomes Framework indicators than other areas.

1.2 There have been three tranches of projects, commencing in 2013/14 (Tranche 1), 2015/16 (Tranche 2) and 2016/17 (Tranche 3). Virtually all projects agreed were to receive one-off funding for a maximum of three years.

1.3 Members received an update on the one-off Public Health Grant funded cross-departmental projects at the Scrutiny Committee meeting in March.

1.4 This paper provides a further update and presents progress to date in relation to projects funded as part of Tranches 1 and 2. It also includes a summary and progress to date on those projects funded as part of Tranche 3.

2. Tranche 1: Projects Commencing in 2013/14

2.1 This comprises of four projects relating to:

- Suicide Prevention;
- Safer Streets;
- Tobacco Free East Sussex;
- Addressing Obesity.

2.2 Although these projects were due to complete by the end of 2015/16, for all the projects, a delay in starting, caused by a variety of reasons, has resulted in them over-running into 2016/17. All these projects, with the exception of Safer Streets, will complete in 2016/17. Safer Streets will complete in 2019/20.

2.3 Progress in relation to these projects is reported in Appendix 1.

3. Tranche 2: Projects Commencing in 2015/16

3.1 This comprises of thirteen projects relating to:

- Reduced Social Isolation Through Technology;
- Speed Limits;
- Speech, Language and Communications Training for Pre-School;

- School Readiness;
- Impact of Trauma on Brain Development;
- Reduced Incidents of Self Harm in Young People;
- Re-offending levels;
- Pupil Absence;
- HIV testing in Eastbourne;
- Chlamydia Screening;
- East Sussex Community Survey;
- Community Resilience Programme Support;
- Implementation of Community Resilience Programme.

3.2 All of these projects with the exception of the Community Resilience and HIV testing projects are due to complete by the end of 2016/17. The Community Resilience and HIV testing projects are due to complete in 2019/20.

3.3 Progress in relation to these projects is reported in Appendix 2.

4. Tranche 3: Projects Commencing 2016/17

4.1 This comprises nine projects relating to:

- Exploitation, Domestic and Sexual Abuse;
- Mental Health Wellbeing Priorities;
- Parenting;
- Schools Interventions;
- Early Years;
- Making Every Contact Count;
- Embedding Health Improvement in Schools;
- ESCC NHS Health Check Programme;
- Active Travel.

4.2 All of these projects are due to complete by the end of 2018/19.

4.3 Progress in relation to these projects is reported in Appendix 3.

Recommendation

5.1 The Committee is recommended to consider and note the report.

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Tranche 1 - 2013/14 Project Updates

<p>Suicide Prevention</p> <p>Infrastructure development at local 'hotspot': Suicide prevention has been promoted with taxi services in Eastbourne and Hastings. Samaritans signage at Beachy Head has been updated. Signage warning of cliff dangers will be renewed and fencing replaced or extended. An additional automatic number plate recognition camera is in place. Reducing vehicle access was not considered feasible and it was not possible in the life-time of the project to gain agreement to install an electronic surveillance system or an additional phone box. Support for voluntary agency: Work with Beachy Head chaplaincy to support the development of their communications strategy and to improve data collection and storage is underway. Training for community organisations and primary care staff: Training has been delivered to a range of frontline staff. Further suicide prevention training has been commissioned with a particular focus on reducing suicide in men.</p> <p>Support for those affected by suicide: A counselling service for those that have attempted/been bereaved by suicide was commissioned for two years. Counselling Partnership has seen over 200 clients in groups or on a one-to-one basis. The contract has been extended for 6 months and will be funded by mainstream mental health funding from 2017/18. Pilot non-statutory 'place of safety' to address aftercare issues and reduce Section 136s: 'Place of Calm' was commissioned as a one year pilot. Referrals are received from Sussex Partnership Foundation Trust's Department of Psychiatry, Street Triage and Approved Mental Health Practitioners. The University of East London evaluated the service very positively and the contract has been extended until April 2017. Suicide prevention work continues to be co-ordinated through the East Sussex Suicide Prevention Group and the Beachy Head Risk Management Group.</p>		G
Original Budget	Total project spend	
£988,500	£615,795	

<p>Safer streets</p> <p>A Steering Group has been established and a project manager is now in post. We have met with the Behavioural Insights Team (BIT), the world's first government institution dedicated to the application of behavioural sciences. Our focus on behaviour change is unique and BIT are keen to test behavioural change methods in the field. BIT has endorsed our view that analysis of the data is crucial to the success of this initiative. Evidence suggests that some additional speed reduction measures are appropriate alongside education and behaviour change work. The project manager will work with local members and Parish Councils to identify local need and demand for speed reduction including 20 MPH zones at appropriately assessed sites. We are leading the work to address how we might tackle KSIs related to 'occupational driving'. Given the delays and the complexity of the programme, the implementation phase of the East Sussex Safer Roads programme will now be three years from September 2016 to September 2019.</p>		G
Original Budget	Total project spend	
£1,000,000	£1,000,000	

<p>Tobacco free East Sussex</p> <p>An Illegal tobacco programme was commissioned in April 2016. Programme planning and engagement work has started and an 'illegal tobacco partnership' set up. The partnership has agreed dates for intelligence sharing, coordinated enforcement activity on identified premises and a series of follow-up meetings once insight generation work is complete. Insight generation work will increase understanding of local attitudes and behaviours relating to illegal and illicit tobacco and levers and drivers to facilitate behaviour change. Multi-agency marketing activity of soft launch has also taken place. A second hand smoke contract was commissioned to reduce exposure to second hand smoke using social marketing techniques to change smoking behaviour e.g. to smoke outside their home especially if children are present or living in the home. Achievements so far include stakeholder engagement work, insight generation with over 600 face-to-face interviews, analysis to define our target audience and delivery of four focus groups and video diaries. Investment in Trading Standards helped to increase their capacity to deliver enforcement activities. Some key achievements included 179 inspections of premises known to sell illegal tobacco in East Sussex – resulting in 18 formal actions, five prosecutions, one formal caution and seven formal warnings. One shop was closed as a result of intervention with the landlord under the Proceeds of Crime Act. In addition 59,220 illegal cigarettes and 114.86kg of hand rolling tobacco were seized and removed from the market with a retail value of £62,737.</p>		G
<p>Original Budget</p> <p>£430,000</p>	<p>Total project spend</p> <p>£283,333</p>	

<p>Addressing obesity</p> <p>Healthy Active Little Ones (HALO) – Healthy Eating/Physical Activity co-ordinators were recruited and provide recommendations and evidence based advice (in the areas of physical activity, healthy eating and child development) and work with settings to develop an action plan to facilitate improvements as part of a whole setting approach. The final evaluation of the HALO – East Sussex programme is due be completed in October 2016. The learning gained from the final evaluation will be used to inform the future delivery of HALO - East Sussex as part of the Nursery Grants Programme. Children's Food Trust (CFT): Eat Better Start Better training for early years practitioners - CFT were commissioned to provide a range of workforce development activities in the area of early year's nutrition. Approximately 85 early years practitioners have participated in training to improve food provision in their setting and to run healthy cooking sessions with children and their families. Evaluation has demonstrated a significant positive impact. Settings have been supported to work towards the CFT's Outstanding Food Award, eight settings have achieved the award already. Healthy Weight Behaviours (Children and Families) - The National Social Marketing Centre undertook a scoping exercise to inform future commissioning of programmes likely to enable positive and sustainable changes in healthy eating and physical activity behaviours amongst families with children 2-11 years. The insight generated provided an in-depth understanding of the motivations behind families' healthy eating and physical activity behaviours, and the barriers to behaviour change.</p>		G
<p>Original Budget</p> <p>£285,000</p>	<p>Total project spend</p> <p>£109,943</p>	

Tranche 2 – 2015/16 Project Updates

<p>Reduced social isolation through technology: To reduce social isolation of carers through development of peer to peer befriending via Social Media and I.T. communication technology as well as telephone. Proposal includes ongoing coordination of agreed model(s).</p> <p>Update Whilst 'informal support' for carers was what carers told us they wanted the uptake has been far less than expected. The guidance and paperwork around this informal 'peer to peer' support appears to have deterred some carers from moving forward with the service. However, we are also beginning to understand that many carers don't want to be a "listening ear" for another carer to offload on a one to one basis. The pilot will continue as planned until September 2017 and the current challenges will be reviewed at the next contract review meeting in November 2016. Any further provision of this service beyond September 2017 will be subject to increased uptake and positive outcomes for carers.</p>						A	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	32,000	12,000	12,000				56,000
Position - Sep 16	-	10,000	6,000	-	-		16,000

<p>Speed limits: To identify approximately 5 locations with a history of injury crashes where a lower speed limit may help to make the road safer and introduce the lower speed limit where appropriate.</p> <p>Update Funding was allocated for safety measures at seven locations. Of these, one is complete, three are due to complete October 2016, two are due to complete in November 2016 and the remaining scheme is due to be completed by December 2016.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	125,000	-	-				125,000
Position - Sep 16	5,600	119,400	-	-	-		125,000

<p>Speech, language and comms training for preschools: To provide funded specialist training for schools and preschools on speech, language and communication training to accelerate improvement in children's speech and language development. 2014 Early Years Foundation Stage (EYFS) outcomes improved significantly compared to 2013, but there is a need to sustain this progress in order to ensure East Sussex maintains a stronger position in securing good outcomes for all children. Closing the Gap for the most vulnerable learners remains a challenge to be overcome.</p> <p>Update The percentage of children reaching Good Level of Development (GLD) at the end of academic year 2015/16 is 69% up 2.4% on last year and shows a three year increasing trend. GLD in 2015/16 was 59.8% for disadvantaged compared to 78.2% for non-disadvantaged a gap of 18.4%. The previous gap 2014/15 was 18% so it has increased slightly by 0.4%. 86.3% made GLD in Communication and Language; this is 4.3% above national at 82% but slightly down on last year by -0.4% (national showed a 2% increase). 77.2% made GLD for Literacy; this is 5.2% above national at 72% and a slight increase on last year by +0.6% (the national increase was 2%). ESCC continues to provide training for EYFS practitioners in both schools and pre-schools. The developing network of Early Years Hubs for Excellence have continued to focus on literacy.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	55,000	55,000	55,000				165,000
Position - Sep 16	55,000	55,000	55,000	-	-		165,000

<p>School readiness: To maintain a team of eight Early Communication Support Workers and two Senior Teachers who support the development of young children's early speech, language and communication in line with the East Sussex Early Years Speech, Language and Communication Pathway. Offer early intervention to children's language development to decrease the need for referral to formal therapy services.</p> <p>Update We continue to embed and review the speech, language and communication pathway which is being used by Early Years providers across East Sussex. The Health Visiting and Children's Centre Service support children and families where communication has been identified as impoverished. The support includes Toddler Talk sessions – 1:1 support for parents and children together to give guidance on activities to support communication by the Children's Centre Early Communication Support Workers (ECSWs). The ECSWs also deliver Early Words (a session to discuss activities to support early communication) and Language through Play courses (a more in depth targeted intervention – modelling activities to support children's speech, language and communication development). The ECSWs monitor children's progress and follow up any conversations they have with families on a three monthly basis.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	237,700	238,900	242,500				719,100
Position - Sep 16	237,700	238,900	242,500	-	-		719,100

<p>Impact of trauma and brain development: A pilot programme of training and action learning for staff in schools around the implications for children's behaviour of experiencing trauma in their early lives, plus some work with children and parents.</p> <p>Update Project completed 2015/16 - Work focused on nurture provision in schools, which has good alignment with brain development and addressing concerns around childhood trauma and mental health. As an element of the joint work through the Education Support Behaviour and Attendance Service and the Educational Psychology Service, nine nurture groups were set up in primary schools. These groups focus on providing both a space for children with Social, Emotional and Mental Health challenges and a toolkit for staff in understanding how developmental delays can impact on behaviour. A Nurture Network was set up to provide CPD for staff and monitor the implementation and effectiveness of Nurture. The impact of this work contributed to a 37% reduction in the number of fixed term exclusions in targeted schools over the course of a year. This work is now mainstreamed with school provision and the element of the work covered by this funding is complete.</p>						Complete	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	50,000	-	-				50,000
Position - Sep 16	50,000	-	-	-	-		50,000

<p>Reduced Incidents of Self Harm in Young People: Reduce the presentations to hospitals of under 18's caused by unintentional and deliberate injuries.</p> <p>Update Project completed 2015/16 Emotional Well Being (EWB) staff promote alternative stress relief behaviours that avoid the potential for harm and ensure that clients involved in self harm undertake the activity in a way that minimise the chances of serious or long term harm. This focus on harm minimisation reduces incidents of this type ending up in casualty. All Secondary School have a Targeted Youth Service (TYS) link caseworker who is trained in identifying and supporting individuals at risk of or undertaking self harm. Joint Self Harm Protocols are in place and joint working with school nurses has been established. Awareness was raised with schools to include Self Harm within their individual Schools Health Strategy produced 2016. Fast track referrals to TYS EWB Team - Part time youth workers trained in identification and clear referral pathways to TYS caseworker support. Clear SMART Action Plans put in place with all one to one young people; focusing on managing self harm, behaviour change and building resilience. Small group work sessions are in place to support young people with EWB needs. Sessions work on behaviour change and building young people's resilience and developing individual strategies to cope with emotional needs.</p>						Complete	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	120,000	-	-				120,000
Position - Sep 16	120,000	-	-	-	-		120,000

<p>Re-offending levels: (i) Continue delivery of Functional Family Therapy, targeted at young people at risk of custody, and embed this within the Youth Offending Team (YOT). Continue to evaluate the effectiveness and potential cost savings of this work. (ii) Deliver training to the YOT Staff team in screening for issues with speech and communication given the link between young people who offend and reoffend and difficulties they have with communication (iii) Identify and deliver effective interventions to address domestic abuse in young people.</p> <p>Update Functional Family Therapy (FFT) continues to be delivered to both YOT young people and those at the edge of care. We are aware of the over-representation of LAC young people in the reoffending rates and so preventing young people entering care will also help with the reoffending. There have been 19 families referred to FFT between April 2015 and August 2016. Of these families, 74% completed the intervention. 17 young people were living at home at the point of closure. They all successfully remained at home. Two were not living at home at the start of the intervention. They were successfully returned home. None of the young people were charged with new offences. Speech and Language Therapy screening is now carried out on all YOT cases and further assessments are completed where needed. The assessments are used to inform interventions and court reports. The YOT has developed a domestic abuse referral pathway which clearly outlines how cases of domestic abuse are addressed and intervened with in the YOT.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	117,000	117,000	117,000				351,000
Position - Sep 16	117,000	117,000	117,000	-	-		351,000

<p>Pupil absence: Funding for Practitioner posts to target children from vulnerable groups with protracted poor attendance. We aim to close the gap between vulnerable groups and their peers for educational, and social and emotional outcomes. Non-attendance is linked to academic underachievement, anxiety, challenging behaviour and further non-attendance. Truancy and non-attendance can also place children and young people at greater risk of Child Sexual Exploitation.</p> <p>Update In the Pupil Absence target group (56 referrals) 100% of closed cases had improved attendance and 89% of all open and closed cases that had at least one review had an improvement in attendance. An average improvement of 19% attendance of the closed target group either during or at the end of the intervention. There are 14 cases that have been referred but are due their first review at the end of September 2016 (have been included in the data collection). Average % at referral = 74% Average % at current = 83% (please note a number of cases have only had 1 review). 84% of referrals in this period have improved attendance (excludes closed cases). 0% of pupils (0/16) had more than 15 days off from the point of intervention. 0% had 15 consecutive days since the beginning of the intervention.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	86,994	86,994	86,994				260,982
Position - Sep 16	86,994	86,994	86,994	-	-		260,982

<p>HIV testing in Eastbourne: HIV testing introduced to Eastbourne to test the feasibility of expanded testing in Lewes and Hastings. Pilot the feasibility of introducing expanded HIV testing for all new GP practice registrations aged 16 years old and over and register in Eastbourne practices. Pilot the feasibility of expanded testing for all Eastbourne residents over 15 years who are admitted as a general medical admission to ESHT.</p> <p>Update This has proved to be much more complex to implement but significant progress has now been made. HIV testing of all new patients in Eastbourne District General Medical Assessment Unit commenced September 2016. HIV testing in new GP registrants in Eastbourne Borough will commence at the end of the year following successful procurement of diagnostics provider. Funding will now cover the project until 2019/20.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	160,889	160,889	160,889				482,667
Position - Sep 16	£0	£53,000	£161,000	£161,000	108,000		483,000

<p>Chlamydia screening: Chlamydia screening focused on areas (Rother and Wealden) and groups (men) where achievement is poorest. Interventions to increase Chlamydia screening in order to meet positivity targets include: home testing kits to reach sexually active young people not accessing sexual health services, engagement post to work with GP practices and pharmacies in Wealden, social marketing work to raise awareness of the importance of chlamydia testing</p> <p>Update This has proved to be much more complex to implement but significant progress has now been made. Web based testing has started and will be widely advertised through Facebook and the sexual health website. The primary care and pharmacy engagement worker has worked with providers in rural Rother and Wealden to increase demand and sign up to provide the chlamydia screening service. The chlamydia social marketing provider is now in place and working on a study to show how we might increase screening amongst men aged 15-24 in rural Rother and Wealden. Funding will now cover the project until 2017/18.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	163,520	73,520	-				237,040
Position - Sep 16	44,000	128,520	73,250		-		245,770

<p>East Sussex Community Survey: To commission a postal survey of adults resident in East Sussex. The survey will establish a baseline and monitor change over time and support evaluation of the community resilience programme. The survey will be repeated during 2017/18 and again in 2019/20.</p> <p>Update The 2015/16 survey has been completed and analysis undertaken. Analysis has been included in 2016/17 Annual Report of the Director of Public Health. The next survey will begin December 2017.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	100,000	-	100,000				200,000
Position - Sep 16	72,000	-	79,400	-	86,500		237,900

<p>Community Resilience Programme Support: To support the development and delivery of the ESBT community resilience programme.</p> <p>Update A programme manager and project manager to co-ordinate work have been appointed. Two phases of programme delivery were identified and Phase 1 which consisted of a comprehensive engagement process to identify priorities for the programme has been completed. The engagement process was undertaken by a partnership of the 3 CVS (voluntary sector) organisations in East Sussex with expert input from an agency (Asset Based Consulting) with national expertise in asset based (another term for community resilience) approaches. Over 2000 pieces of information were collected and a range of engagement events and activities were undertaken. Funding will now cover the project until 2018/19.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	200,000	200,000	200,000				600,000
Position - Sep 16	34,005	135,000	215,000	215,995	-		600,000

<p>Implementation of Community Resilience Programme</p> <p>Update Phase 1 of the programme focusing on developing the model has been completed. Insight generated through the comprehensive engagement process has been used to identify programme priorities and 3 cross system Deliver Groups and work streams have been established.- communicating and collaborating, involved communities (volunteering), and resourcing. These work streams have agreed challenging plans to transform how we work across the system to increase the number of people undertaking formal and informal volunteering and ensure that asset based approaches which value the contribution that individuals and their communities make to improving health outcomes are embedded across the system. As part of this people are moved from passive users or services to actively involved in improving their own outcomes and those of other people in their communities, and the system wide barriers to this approach are removed. To enable this, eight Locality Link Workers and 2 co-ordinators have been appointed to identify the assets in local communities, support Integrated Locality Teams and communities of practice by developing better ways to enable front line workers to link people with community support and to increase the support available in local communities. A review of volunteering support has been undertaken by the Volunteer Centre East Sussex and plans are being developed to transform how we support people who want to be involved in their communities to find opportunities to do this to increase volunteering/community involvement. A PID has been developed to take forward work to increase the amount of external funding secured by voluntary and community organisations in East Sussex. Work has commenced on processes to identify the priority for external funding bids and in light of these conversations a joint bid for external funding for elements of the programme is in development. An approach to cross system workforce development has been identified and training in asset based approaches has commenced for key groups including Locality Link Workers and Deliver Group members in advance of a comprehensive cross system training plan being rolled out. Two pilot programmes to develop grass roots support have been extended – Chances4Change which is now working in 33 communities and Building Stronger Bridges (Good Neighbour Schemes) through which 27 good neighbour schemes have been developed. Funding will now cover the project until 2018/19.</p>						G	
	2015/16	2016/17	2017/18	2018/19	2019/20		Total
Original - Mar 15	1,000,000	1,000,000	1,000,000				3,000,000
Position - Sep 16	250,000	480,388	1,332,000	937,612	-		3,000,000

Tranche 3 – 2016/17 Project Updates

<p>Exploitation, Domestic and Sexual Abuse - (i) Provision of specialist domestic and sexual abuse services, (ii) Designated service response to exploited vulnerable young adults and (iii) Child Sexual Exploitation (CSE) awareness raising and resilience. These projects will provide positive outcomes for young people and adults at risk of sexual and/or domestic abuse and exploitation. Demand for domestic abuse and sexual abuse services are likely to continue to increase, with the UK Government recently published 'Ending Violence against Women and Girls Strategy 2016 – 2020' anticipating continued increases in reporting as an overall outcome of the focus on these forms of violence and abuse.</p> <p>Update</p> <p>i. A service specification for provision of a specialist domestic and sexual abuse service has been agreed, additional staffing requirements identified and recruitment for specialist staff is well underway. ii. The designated service response to exploited vulnerable young adults has commenced with a review of current cases with an exploitation profile. Recruitment for additional posts is underway. iii. A service level agreement has been agreed with the YMCA. A specification has been agreed regarding the provision of CSE/Sex and Relationships in local schools. By giving the community eyes and ears we will increase victim focus and identification of those at risk. To this end Lewes District and Eastbourne Borough Council Licensing Leads have identified 972 personnel for safeguarding and CSE training. Funding will now cover the project until 2018/19.</p>				G	
	2016/17	2017/18	2018/19		Total
Original – Apr 16	£489,521	£489,522	£0		£979,043
Position - Sep 16	£243,075	£489,522	£246,447		£979,043

<p>Mental Health Wellbeing Priorities - This funding will be used to support Wellbeing Centres in Bexhill & Hastings, Newhaven & Lewes, Eastbourne & Hailsham and Uckfield & Crowborough, and to provide peer and employment support services across the county. The funding will also be used for Community Links and Seaview in Hastings and St Leonards. These services will help to reduce health inequalities for people with mental health issues through facilitating early interventions around health risk behaviours, supporting people to adopt healthier lifestyles, developing skills to better manage their mental health conditions and any co-morbid long-term conditions. The funding will also promote community resilience and ensure skilled support groups for individuals with mental health diagnoses around suicide prevention, access to peer support networks, access to self-management advice and improved social capital. The resource will be used to ensure that Making Every Contact Count (MECC) is embedded as part of the training offer provided by ESCC ASC training department.</p> <p>Update</p> <p>Seaview (which delivers services for vulnerable people with complex needs considered to be 'hard to engage') operates a peer support model. The numbers of people accessing services related to community resilience are within the recommended range. Data collection to monitor how well we are reducing inequalities for people with mental health problems and improving health and wellbeing is underway. The community link service, offering tailored support for people with mental health needs is largely on track, some clarification is underway regarding data collection. The individual placement and support service is performing as expected. Wellbeing centres are locality hubs for mental health and wellbeing support. Almost 800 people have attended wellbeing centres over the last six months. Activities to improve health and wellbeing through exercise and healthier eating are working well.</p>				G	
	2016/17	2017/18	2018/19		Total
Original – Apr 16	£250,000	£250,000	£0		£500,000
Position - Sep 16	£250,000	£250,000	£0		£500,000

<p>Parenting - This parenting proposal will provide co-ordinated approach to the delivery of parenting support for families in East Sussex. It will build on existing provision to reach more families; use evidence based approaches and support Public Health Outcomes; and through capacity training, it will support sustainability. It will provide a blended mix of interventions for whole populations as well as targeted support to the most vulnerable groups. It will include one to one and group interventions together with an improved self-help offer.</p> <p>Update Appointed 0.5 project manager and 1.0 Co-ordinator and advert out for other staff. Training audit complete. Development of a County offer is in the process of being mapped out. A programme timetable is in development. The first courses starting in October 2016. Health, Exercise and Nutrition for the Really Young (HENRY) training started in August, a Co-ordinator identified and venues established. Programmes start September and the first feedback December 2016. Video Interaction Guidance: Two workers identified and completing training. Delivery to start in December. Outcomes monitored as part of Video Interaction Guidance programme. Self-care: Consistent messages being developed for on line and physical resources using libraries. Autistic Spectrum Disorder/Special Educational Needs - Planned work started in September and training planned for November (to run quarterly). Autistic Spectrum Disorder monitoring support group to provide referrals. Two Staff trained in early minds</p>				G	
	2016/17	2017/18	2018/19		Total
Original – Apr 16	£250,000	£250,000	£0		£500,000
Position - Sep 16	£250,000	£250,000	£0		£500,000

<p>Schools Interventions - a) a targeted service to children and families in receipt of Family Keywork interventions to improve attendance rate, b) a targeted service to children who have protracted poor attendance in primary schools with an aim of improving attendance both in primary and through transition into secondary schools, c) supporting a comprehensive response to address key concerns around poor outcomes for children presenting with mental health and substance-misuse related concerns in schools through a whole school and targeted 1:1 approach and d) A targeted multi-service response to schools focusing on improvements in identification and support for children and young people with Social, Emotional and Mental Health concerns.</p> <p>Update We are on track with the recruitment phase for all sections of this bid. Interviews have taken place or are imminent as follows: 1 - Appointment of 2.0fte Behaviour and Attendance Practitioners to work Countywide to provide intensive work to families identified through the Family Key Worker (FKW) service and provide additional work with schools to deliver a robust attendance improvement programme. 2 - Appointment of 3.0fte Behaviour and Attendance Practitioners, one in each area base, to provide intensive work to target children who are identified during their primary phase education to be at risk of non-attendance in secondary phase. 3 - Appointment of additional professional services from senior staff in the U19s Team, to develop and promote staff training for lead professionals and schools through creations of a protocol, toolkit and associated training and professional supervision. 3a Appointment of 3.0fte Behaviour and Attendance Practitioners to support individual children and families, 3b Creation and promotion of resources, and any additional training for schools. 4 - Appointment of additional specialist advisory teacher services and educational psychology services from: Educational Support, Behaviour and Attendance Service (ESBAS), Educational Psychology Service (EPS) and Communication, Learning and Autism Support Service (CLASS). Development of the ragging tool to identify a multi-service response for additional specialist advisory teacher services and educational psychology services is on track.</p>				G	
	2016/17	2017/18	2018/19		Total
Original – Apr 16	£266,666	£450,000	£183,334		£900,000
Position - Sep 16	£266,666	£450,000	£183,334		£900,000

<p>Early Years - This resource will provide additional support to early years providers and health visitors across East Sussex to extend the successful implementation of the integrated health check and early years review of children aged 27 months. This will be developed as part of our integrated locality offer.</p> <p>Update Mop-up training sessions have been delivered to Early Years settings and Health Visitors on implementation. Brief guidance for Early Years settings and Health visitors written. Translations of leaflets /info underway. All existing settings have access to NHS secure email. Gap in data reporting for Q1 and Q2 due to change in timing of review from 24 months to 27 months. School readiness project group established. Implementation Action Plan agreed with project lead.</p>				G	
	2016/17	2017/18	2018/19		Total
Original – Apr 16	£70,000	£70,000	£0		£140,000
Position - Sep 16	£55,000	£85,000	£0	£140,000	

<p>Making Every Contact Count (MECC) - This provides frontline staff with the skills and confidence to raise lifestyle issues that impact on health with clients, provide brief advice, and refer into services or support. A programme to implement MECC in the major healthcare providers in East Sussex has already commenced, and this programme extends the approach to frontline social care staff. For many people changing lifestyle behaviour will prevent them from developing diseases, slow the progression of their condition or support better management. Evidence suggests that frontline staff do not routinely advise clients of the things that they can do to improve their health, and this programme will enable MECC to be incorporated as a key element of the role of frontline staff.</p> <p>Update ASC and PH have agreed the training model and agreed to develop skill and capacity within internal training teams to develop and deliver MECC for ESCC. This will ensure sustainability once the funding for development and 'at pace' roll out has been completed (e.g. for new staff after project completion). This will also enable a low cost option to be available to other organisations across the health and social care system in future. Now that ASC training team reconfiguration has been completed a training co-ordinator will be appointed to develop the in-house offer. Initial expectation is that this will included a blended learning approach with e-learning and face to face training options using a train the trainer / cascade training approach. Discussion on workforce development needs for East Sussex Better Together (ESBT) have resulted in MECC being incorporated into the ESBT workforce development plan. MECC training approaches are being reviewed to incorporate asset based approaches to enable health and social workforce prevention training to be delivered more efficiently through a single training offer.</p>				G	
	2016/17	2017/18	2018/19		Total
Original – Apr 16	£25,000	£50,000	£25,000		£100,000
Position - Sep 16	£27,500	£57,500	£25,000	£110,000	

Embedding Health Improvements in schools - To create a step change in the way that schools support improve health outcomes for children and young people, with a particular focus on childhood obesity, a programme of grants to schools commenced in 15/16. This funding allocation will enable the School Health Service to provide an enhanced package of support to schools to develop a whole school health plan and spend their grant on evidenced based intervention and embed new approaches in the future. In addition a step down programme of grants will enable priority schools to further enhance their offer for children and young people most at risk of health inequalities.

Update

The health improvement grant has been taken up by 183 of 197 schools and colleges entitled to apply. Supplementary guidance was provided to schools in early June 2016 and includes detailed information on developing a school health profile, action plan and grant expenditure proposal. The guidance explains the primary prevention and whole-school approach to improving health and wellbeing of children and young people in school settings. Support for schools is provided by the East Sussex School Health Service (SHS), through a variation to the existing contract between ESCC Children's Services and Kent Community Health NHS Foundation Trust. Work to develop and agree the support service has taken place and a full set of performance indicators agreed. New staff members have been recruited and the service will also host a Youth Ambassador Apprentice to support development of the project. SHS staff started delivering information workshops and other support from June 2016; so far 141 schools have attended a workshop. Schools must complete a school health profile and action plan before submitting a grant expenditure proposal. As at 14/10/2016 a total of 20 expenditure proposals had been reviewed and approved by the ESCC/SHS grant panel. In September 2017 the SHS will produce a summary evaluation of the activity and outcomes of 2016/17 school action plans and expenditure.

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	2016/17	2017/18	2018/19	Total
Original – Apr 16	£583,000	£200,000	£67,000	£850,000
Position - Sep 16	£583,000	£200,000	£67,000	£850,000

ESCC Staff NHS Health Check Programme - The cost of staff sickness places a huge additional pressure on organisations' budgets. Vascular diseases are significant causes of mortality and morbidity and are largely preventable. The NHS Health check provides a personalised assessment of future risk of vascular disease and advice and information on how to reduce risk. In a workplace setting the health check can also include a routine assessment of key employment related risks such as muscular skeletal (MSK) conditions and stress – two of the largest causes of staff absence. This project extends an existing accelerated programme of enhanced NHS Health Checks being rolled out to eligible frontline health care staff in East Sussex to include ESCC staff. The programme will be developed and delivered through the councils Human Resources department as part of a comprehensive staff wellbeing offer to improve staff health and wellbeing and reduce costs associated with staff absence.

Update

The project is making good progress and a working group and outline project plan with milestones has been established. The provision of NHS Health Checks for ESCC staff will be procured separately from the council's occupational health service contract and will be subject to a competitive procurement process. At least three providers have shown an interest in providing NHS Health Checks within the desired timelines. The specification will build on the core NHS Health Check specification and include additional elements relevant to workplace health and wellbeing around mental health and MSK conditions. A coordinated and streamlined approach to ESCC health and wellbeing communications and campaigns to support staff health and wellbeing in line with the new One You adult health and wellbeing campaign will be developed. Due to changes within the HR department the Project Manager post has not been recruited yet and so the projected spend has been re-profiled.

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	2016/17	2017/18	2018/19	Total
Original – Apr 16	£50,000	£100,000	£50,000	£200,000
Position - Sep 16	£25,000	£100,000	£75,000	£200,000

Active Travel - Supporting and Enabling Active Travel is a key deliverable of the East Sussex Healthy Weight Plan. This allocation of additional resource will support the development of materials and support to businesses to embed active travel into organisational policy, culture and climate; the development of a sustainable legacy, for example re-producible resources, materials to support safer active travel routes; point of decision prompts for workplaces and community settings; evidence based community based behaviour change incentive/competition schemes. Learning from this initiative will then be used to inform future bids for funding, including the forthcoming Department for Transport (DfT) Access Fund. This approach also enables a whole systems response across the local authority and its partners to addressing key County Council priorities around driving economic growth, improving health outcomes and contributing other priorities such as reducing the number of people killed and seriously injured on roads.

Update

The DfT Access Fund guidance was published in July 2016, which was much earlier than was originally proposed, and local authorities were given six weeks to develop and submit a bid to the DfT, on 9th September 2016. The Access Fund is aimed at delivering cycling and walking initiatives that support the local economy and actively promote increased levels of physical activity. As part of the development of the bid, which was led by CET, Public Health worked in partnership with CET to develop a work stream focussed on tackling physical activity and enhancing existing health related community development programmes. The following proposed measures are specific to the Public Health funding (£50k) and will be integrated into ESCC Access fund programme, and provide greater value – i. Active Travel Menu of Support, ii. Living Well programme, iii. Safer School Travel Routes, iv. Point of decision prompts for workplaces and community settings and Behaviour Change Incentive Scheme. It is requested that the forecast spend is rolled forward to 2017/18 and 2018/19. The outcome of the bid will be known in December 2016, when a further update will be provided. Funding will now cover the project until 2018/19.

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	2016/17	2017/18	2018/19	Total
Original – Apr 16	£25,000	£25,000	£0	£50,000
Position - Sep 16	£0	£25,000	£25,000	£50,000