



Hampshire Wellbeing Board

Living Well Update

December
2020

Living Well Priorities

- 1. Reduce the proportion of women smoking at the time of delivery**

- 2. Reduce the gap in smoking between people in routine and manual occupations & the general population**

- 3. Implement whole systems approach to childhood obesity in one area of Hampshire**

- 4. Implement the Hampshire Physical Activity Strategy with a specific focus on enabling the workforce to be competent to promote physical activity for life**

- 5. Take a community approach to resilience, supporting the 5 ways to wellbeing initiative**

- 6. Work in partnership with local stakeholders to understand and take action on the wider determinants of health as a major influence on mental wellbeing**

- 7. Signpost to and encourage the systematic use of effective tools/initiatives (including digital) that will enable people to improve their self-management and provide peer support for long-term conditions**

Reduce the proportion of women smoking at the time of delivery

- **Increased from 8.7% in 18/19 to 9.3% in 19/20.** (England: 10.8% in 18/19 and 10.4% in 19/20). Improved identification of smokers in early pregnancy may have contributed to this rise.
- **HCC Public health have worked with all trusts to undertake Public Health England's Deep Dive Assessment of Pathways and audit levels of CO Screening at booking.** All four hospital trusts are actively working to increase the number of women who stop smoking during pregnancy
- **Smokefree Hampshire have reviewed their smoking in pregnancy service and implemented a number of improvements for maintaining the engagement of women and improving their chance of quitting;** 52% of pregnant women quit at 4 weeks. A digital marketing campaign aimed at pregnant women and their partners is planned for launch in December.
- **It is anticipated that Covid-19 will have a direct and negative impact on rates for the remainder of 19/20 and into 20/21 as CO monitoring at booking is temporarily on hold.** This has seen an reduced level of women coming forward as smokers (i.e. reduced smoking at time of booking rates) and therefore a reduction in the number of women referred for support.

Reduce the gap in smoking between people in routine and manual occupations & the general population



- **In Hampshire, the proportion of people who smoke in routine and manual occupations was 19.3% in 2019, compared to 10% of adults overall** (England: 23.2% in R&M compared to 13.9% in adults overall)
- **Smokefree Hampshire are actively engaging with key groups** such as people living in the most deprived areas of Hampshire and certain ethnic communities including targeted marketing, mobile outreach clinics, telephone support, the provision of 'Quit with Bella' app support and home visiting for the most vulnerable members in our community (pre Covid-19)
- **45% of people who used Smokefree Hampshire and quit successfully at 4 weeks are from routine and manual occupations (2019/20).** Of those people in routine and manual occupations that set a quit date, 65% have successfully quit at 4 weeks
- **Initial results from the Quit for Covid campaign have demonstrated the value of working in partnership with 1,084 self referrals in October and November compared to 251 in September.** We are working with Smokefree Hampshire to determine the proportion of those quitting that are from our priority groups

Example of targeted campaign during the Pandemic

- Quit for Covid



- Smoking damages your lungs and weakens your immune system, increasing your risk of developing life-threatening complications from COVID-19.
- The Public Health team in Hampshire and IoW, working with the CCGs and supported by the LMC developed a programme, with the aim of reducing the number of smokers locally.
- Practices were asked to send a predefined text message to all their smokers with some simple advice which also directed them to the local smoke stop service who were primed to receive an increase in people seeking help.
- This messaging was linked with two features on BBC South.

Healthy Hearts - Programme vision and Principles

To develop an operating model for cardiovascular disease prevention and to support the practical implementation of opportunities identified by CVD Prevent programme in an equitable way that addresses unwarranted variation across our geography

Principles:

- ❖ Take a holistic approach to CVD prevention
- ❖ Maximise encounters
- ❖ Promote remote technology for diagnosis and monitoring
- ❖ Use extended primary care teams
- ❖ Optimise NHS health checks

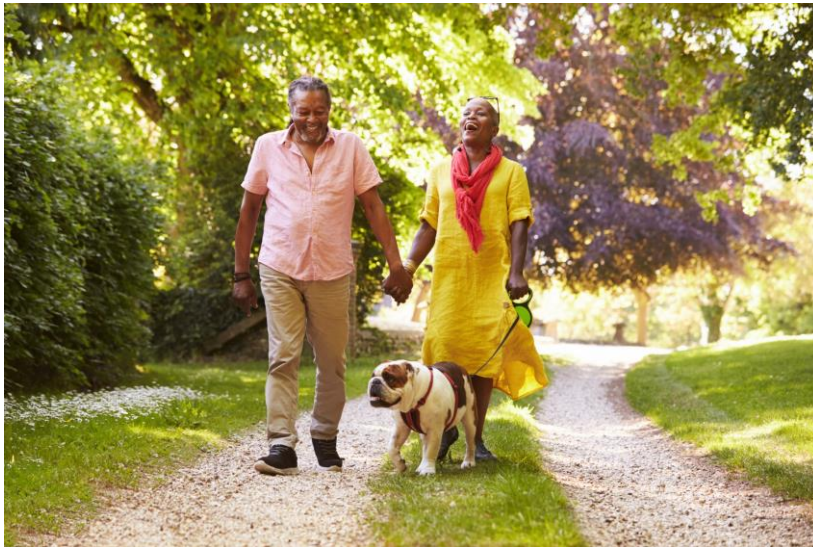
Programme Outcomes:

- Support behaviour change and promote cardiovascular health by making every contact count
- Optimise medication;
- Extend the work on cholesterol across HIOW and adapt the model to review all CVD risk factors at the Identify stage for this cohort;
- Initiate the work on blood pressure initially based on a similar model;
- Increase the use of technology to support diagnosis and monitoring;
- Adapt the programme when PCN CVD DES is published, emphasising a need to assist 'struggling' practices.

Implement whole systems approach to childhood obesity in one area of Hampshire

- Pilot started in Rushmoor: A whole systems working group has been established in Rushmoor with Hampshire Public Health, Rushmoor Borough Council, North East Hampshire and Farnham CCG and Energise Me. This group connects to wider stakeholders and local partners via the Local Obesity Action Group
- The team have engaged with key partners, such as MIND, food retailers and housing associations to explain the approach and why it's important
- Five Rushmoor early years settings have piloted the healthy early years award, including the 'Healthy Weight, Healthy Eating' topic. This has now gone live to all early years settings in Hampshire
- Work paused in March 2020 due to the Covid-19 pandemic. We envisage the following will be priority actions when the work is restarted:
 - Marketing of opportunities: Digital marketing and promotion of the key healthy weight offers, including WW and Better Health and free physical activity opportunities and working with primary care to increase signposting to their patients
 - Influencing the food environment through targeted actions to improve access to and promotion of healthier eating
 - Promoting Health in Educational Settings resources (including healthy weight resources) to schools and early years settings
 - Increasing access to play/physical activity opportunities through funding opportunities
 - Increasing local stakeholder participation in the Whole System Approach
 - Promoting Innovation Fund to grassroots/community organisations
- Our plan is to roll-out the approach to another District/Borough in late 2021 focussing on an area with the highest rates of child and adult excess weight

Hampshire Physical Activity Strategy –developing the workforce to promote physical activity for life



- Workforce training for the health sector, social prescribing and volunteer workforces
- National Academy for Social Prescribing Thriving Communities Programme
- We Can Be Active Big Online Conversation

Signpost to and encourage the systematic use of effective tools/initiatives (including digital) that will enable people to improve their self-management and provide peer support for long-term conditions

- A library of free, accredited, readily available **digital resources** that HIOW Primary Care Clinicians can access at any time.
- Ranges from educational websites, video libraries and apps.
- Includes a range of diagnosed long term conditions, as well as self-help resources such as lifestyle, weight and mood management tools.
- **Library has had 546 Downloads**

A Service Finder is also available on **the HIOW Personalised Care Website**. This features educational materials as well as details regarding local peer support groups



NHS
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Sustainability and Transformation Partnership

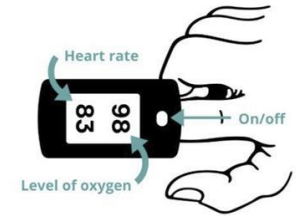
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Resources

What Matters to You Resources	Patient Activation Measure (PAM)	One page profile template & how to guide
Guides	Self Care and Self Management	YouTube clips



Example of initiative during the Pandemic COVID Oximetry@home

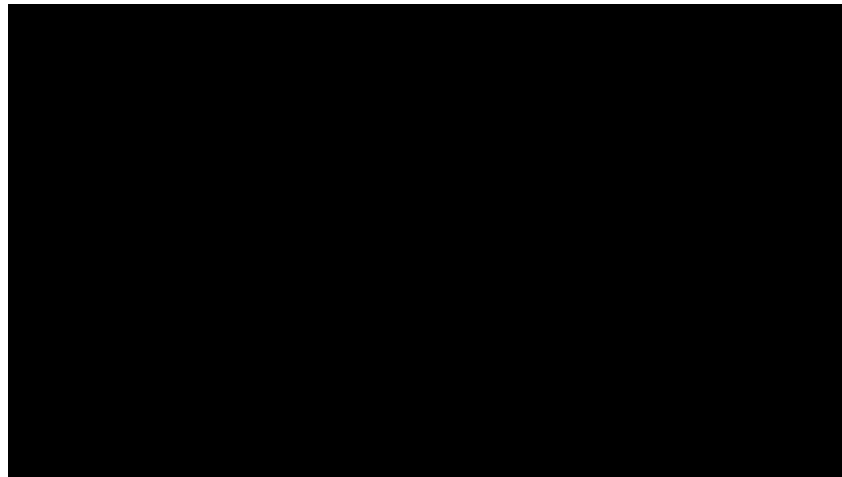


- The COVID Oximetry at Home pathway should be available to people who have suspected or diagnosed COVID 19 **AND** are symptomatic **AND** are aged 65 years or older **OR** are under 65 years where there is clinical concern.
- Patients provided with a pulse oximeter and supporting information or suitable app / regular recall mechanism), contact details to report oximetry reading / symptoms.
- Patients will be encouraged to record oximetry readings daily, usually three times a day.
- Patients whose data indicating deterioration will have a clear instruction on the course of action

Social Prescribing

This video outlines the value and role of social prescribers as members of the multidisciplinary team at the Sovereign Network of GP practices in South East Hampshire.

Jane Majidzadeh and Andrew Partridge - Social prescribers, Ria Shingdia - Clinical Practice Pharmacist and Dr Jennifer Rattray - GP



<https://www.youtube.com/watch?v=ESRgDVeMoXw&feature=youtu.be>

Recommendations to the Board



1. Reduce the proportion of women smoking at the time of delivery

The Board are asked to note the progress in this area and highlight the value of working in partnership on this and other key priorities to reduce health inequalities in Hampshire.

2. Reduce the gap in smoking between people in routine and manual occupations & the general population

The Board is asked to note the work achieved by our acute providers in this area and support a renewed effort through Public Health, NHS Commissioning, NHS provision and the voluntary sector to reduce the proportion of women smoking at the time of delivery.

3. Implement whole systems approach to childhood obesity in one area of Hampshire

The Board is asked to support and promote the Healthy Weight agenda within their organisations including working collaboratively through a whole system approach

4. Implement the Hampshire Physical Activity Strategy with a specific focus on enabling the workforce to be competent to promote physical activity for life

The Board is asked to ensure their organisations are sighted on and contribute to the Strategy Consultation

5. Signpost to and encourage the systematic use of effective tools/initiatives (including digital) that will enable people to improve their self-management and provide peer support for long-term conditions

The Board is asked to note the various tools open to clinician and the public to support them in their conditions

Discussion

