

# Public Health Briefing 1: Overview

## The role of Public Health in CBC

Helping the residents of Central Bedfordshire to live healthier lives for longer is at the heart of our work in the Public Health Team at CBC. We know that the life experience and expectancy of our residents varies considerably by ward and that life can be further complicated by a range of social and environmental influences every day.

This is why the Public Health Team, led by our Director of Public Health, are prominent in the agenda to build a more resilient and healthy community for Central Bedfordshire. This will not only help them towards living healthier and longer lives, but will also reduce their reliance upon local support services. We have big aspirations to develop new ways of working across the health and social care system to align our collective efforts towards the wider goals of the Health and Well Being Board.

## What do we commission or provide?

Across Central Bedfordshire, we commission or provide the following services:

- Stop Smoking Services and Tobacco Control
- Prevention and Treatment of Drug and Alcohol Abuse
- Preventions and Treatment of Excess Weight, including the National Child Measurement Programme
- NHS Health Checks (which includes prevention and early detection of Cardiovascular disease and diabetes)
- Health Protection Assurance (including blood borne viruses, screenings and immunisation)
- Workplace Health
- Public Dental Health
- Public Mental Health.

## What are the public health local priorities?

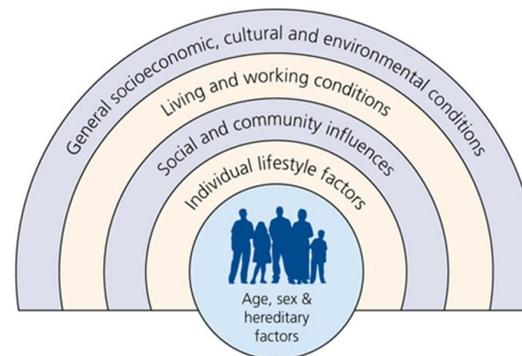
The Joint Strategic Needs Assessment (The JSNA) <http://www.centralbedfordshire.gov.uk/jsna> provides an overview of what our residents need and we have used this to identify the most important priorities for our Health and Wellbeing Strategy. Our priorities are:

1. Good mental health and wellbeing at every age
2. Making sure the children in Central Bedfordshire have the best start in life
3. Empowering our communities to stay healthier for longer
4. Improving the wellbeing for frail older people.

We also want to make sure that we focus on preventing health inequalities across Central Bedfordshire by earlier detection and supporting of the wider issues that impact on health such as lifestyle and environmental conditions.

## The social determinants of health

We also continue to focus on **reducing inequalities** by improving the social determinants of health:



## The CBC public health budget

The Central Bedfordshire budget for Public Health is £12 million for 2015/16.

This includes £2.9 million for drugs and alcohol, £3 million for children and young people, £1 million for stop smoking and health checks and £2.2 million for sexual health.

*'Investing in the right public health interventions provides an excellent return on investment for councils as well as improving the health and wellbeing of local communities.'*  
(Kings Fund December, 2013)

## Who to contact in Public Health

Muriel Scott (DPH) on 07702 203441  
[Muriel.scott@centralbedfordshire.gov.uk](mailto:Muriel.scott@centralbedfordshire.gov.uk)

Celia Shohet (AD Public Health, CBC) on 0300 300 4578  
[Celia.shohet@centralbedfordshire.gov.uk](mailto:Celia.shohet@centralbedfordshire.gov.uk)

Sanhita Chakrabarti (AD Public Health, Core Team)  
[Sanhita.chakrabarti@bedford.gov.uk](mailto:Sanhita.chakrabarti@bedford.gov.uk)

Bharathy Kumaravel (AD Public Health, Core Team) [Bharathy.Kumaravel@bedford.gov.uk](mailto:Bharathy.Kumaravel@bedford.gov.uk)

Barbara Rooney (Head of Public Health, Children and Young People) on 0300 300 5076  
[Barbara.rooney@centralbedfordshire.gov.uk](mailto:Barbara.rooney@centralbedfordshire.gov.uk)

## Public Health Briefing 2: Ensuring good mental health and wellbeing at every age

# Central Bedfordshire

### Why this is important?

Mental illness can affect anyone at any age. It is reported that as many as 10% of 15-16-year-olds experience mental health illness. Older people are also at risk of depression, which can be because of loneliness, social isolation, retirement, physical illness or disability.

On average, a man with mental health issues can die 16 years earlier (and a woman can die 12 years earlier) than their counterparts who do not have mental health conditions. Over 75% of this difference is related to physical conditions such as cardiovascular disease and cancer, which are primarily driven by high rates of smoking.

Our plan is to continue to support our residents so that they can enjoy healthier lives despite their condition. Not only will this allow them to enjoy longer and happier lives, but it will also reduce their reliance on local support services into the future.

### What are our achievements so far?

We have delivered our first Mental Health First Aid Training (known as LITE training) in workplaces and we expect this to be rolled out across Central Bedfordshire and the Clinical Commissioning Group (CCG).

We have also established a new multi-disciplinary Wellbeing Forum where partners are working together to deliver our shared 'Five Ways to Wellbeing' strategy. You can find out more about our work on Twitter @LetsTalkCentral.

### What local challenges do we face?

Mental health is a significant health challenge across our area. In Central Bedfordshire, 1,695 children between the ages of 5-10 and 2,165 children aged 11-15 are estimated to be living with mental health illness.

The trend continues into adult life and is growing. 26,735 adults aged 18-64 have a mental health condition and many report poor physical health and difficult experiences because of the perceived stigma around mental health issues.

### Five Ways to Wellbeing



### What are we doing about them?

Our approach is to support mental health throughout our residents' lives. We start by providing excellent maternal mental health and we then build on this by making sure that professionals working with children across Central Bedfordshire are equipped with the specialist skills and knowledge to provide the best well-being support.

Our work with adults is focused on improving the physical health of those living with mental health illness. This means providing the best access to the healthy lifestyles support, stop smoking services and help for residents to become more physically active. We also work closely with local employers supporting wellbeing in the workplace.

### Case study

*Lucy's\* mother contacted our service to request support for her daughter who appeared to be suffering from anxiety and panic attacks. Our team provided an initial assessment within CHUMS Emotional Wellbeing Service where it was agreed to offer Lucy on-going psychological support based on Cognitive Behaviour Therapy. At the end of the intervention, Lucy was working weekends as a shop assistant and had started back to college full time.*

- Clinical Psychologist at CHUMS

\*Name has been changed to maintain confidentiality

## Public Health Briefing 3: Giving Every Child The Best Start In Life (Starting Well)

### Why this is important

Giving every child the best start in life, starting from conception and including the physical and mental health of the mother, is crucial to reducing health inequalities across our lifetime, what we call the 'life course'.

The early years lay down the foundations for future health and wellbeing, for example, breastfed babies have a reduced risk of developing high blood pressure and cholesterol in adulthood and may also have a reduced risk of Type 2 diabetes and obesity. Achieving the best start in life also benefits educational achievement and economic status later in life.

### What have we achieved so far?

Our 'Smokefree Baby and Me' programme was first introduced in 2013. So far, the number of pregnant women who have stopped smoking throughout their pregnancy has increased from 32% to 54%.

Breastfeeding initiation rates have continued to improve and remain above national rates.

We have expanded our Health Visiting workforce which increases the opportunities to identify maternal mental health needs and ensure that mothers receive the support they require.

### What local challenges do we face?

The increasing numbers of mothers who are smokers 'at the time of delivery' is an on-going challenge, particularly for mothers in South Central Bedfordshire.

Although breastfeeding initiation is good, we need to make more progress to sustain rates for the longer term. In addition, identifying prevalence and continuing to tackle maternal mental health is a key priority.

### What are we doing about them?

We are working in partnership with hospitals, community midwives, health visitors, children's centres and early years settings to create more consistent messages and support for parents across a range of initiatives.

We have also expanded our Health Visiting workforce to increase the opportunity to identify maternal mental health needs and to support and offer advice about breastfeeding.

### Service user feedback

*"My advisor has been an excellent help and would not have been able to do this alone."*

*"I feel 100% better in myself; feel I can do so much more."*

*"My skin, hair and nails are healthier, not breathless when walking and baby moves better."*

Here is a video clip from a mother who gave up smoking during pregnancy:

<https://www.youtube.com/watch?v=7MigNK0uV4g>



# Public Health Briefing 4: Giving Every Child The Best Start In Life (Starting Well Priorities)

## Breastfeeding

### Why this is important

It is widely recognised that breastfeeding secures the best start in life. Not only are there a number of health benefits to breastfeeding, but from a health service perspective, we know that when breastfed babies become infants, they are less likely to suffer from conditions like gastroenteritis and respiratory disease and are therefore less likely to need to go to hospital.

### What are we doing about it?

CBC is working to achieve full Baby Friendly Initiative Accreditation for both Bedford Hospital and Luton and Dunstable Hospitals. This will mean strengthening the contracts with maternity services providers to incentivise support for breastfeeding and staff training to ensure that professionals have the right skills to support new mothers to start and continue to breastfeed their babies.

## Smoking at time of delivery

### Why this is important

Smoking in pregnancy increases the risk of miscarriage and perinatal death. It also increases the risk of pre-term birth. This is a major cause of infant mortality and can affect physical and mental health development during childhood.

### What are we doing about it?

CBC and partners are working together to create a 'Smoking in Pregnancy Multi-Agency Pathway' so that we can provide additional support for mums-to-be who would like to stop smoking. Through this, we expect to see an increase in the number of pregnant women who stop smoking through our 'Smokefree Baby and Me' programme. We will also be looking a how to implement national legislation to reducing smoking around children as part of the smoke free homes and cars initiatives.

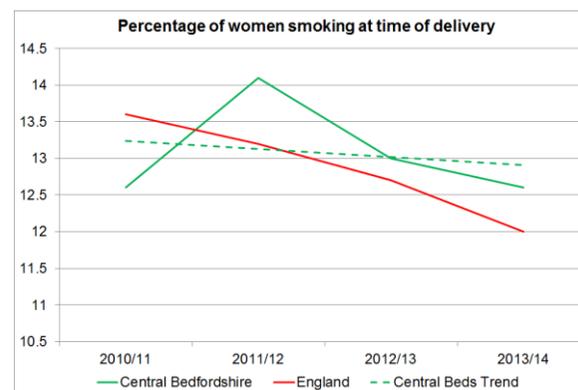
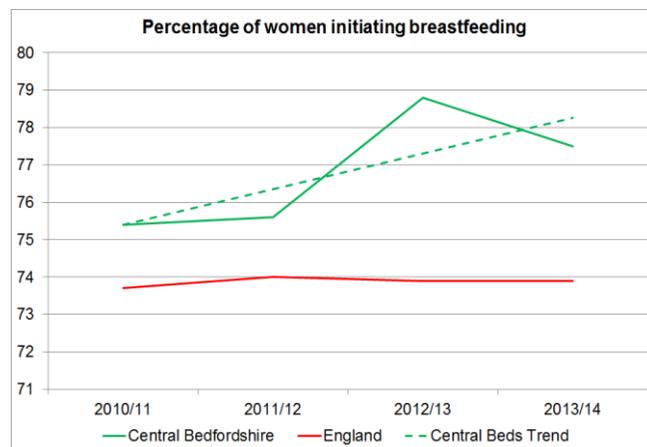
## Maternal Mental Health

### Why this is important

Nationally, more than 1 in 10 women develop a mental illness during pregnancy or within the 1<sup>st</sup> year of having a baby. Maternal mental health problems impact on the woman, the baby and also the rest of the family, with increased chances of young people developing depression themselves.

### What we're doing about it

We will work in partnership with local providers to unify and integrate pathways of services delivery. From 2015/16, new commissioning arrangements will provide more opportunities for Health Visitors to assess maternal mental health. This will improve identification of problems and enable early support and intervention for those who need it.



Condition	Estimated prevalence	Estimate prevalence Central Bedfordshire
Baby blues	80%	2640
Postnatal depression	10-15%	330 - 495
Puerperal psychosis	0.1-0.2%	3 - 6
Puerperal psychosis	50% of reoccurrence	1.5 - 3 (based on same numbers)

## Public Health Briefing 5: Giving Every Child The Best Start In Life (Developing Well)

# Central Bedfordshire

### Why this is important

We know that what happens in our childhood and adolescence will have a profound impact upon how we live out our adult lives, so it is vital that we provide our children and young people with a sound foundation for long term health and wellbeing, allowing them to achieve their potential. Excess weight in children has been increasing nationally over the past 20 years.

Children born to teenage parents are more likely to experience a range of negative health and social outcomes later in life.

Building resilience is important in helping to protect children. It builds cognitive development and helps learning and can be the difference between engaging in risky behaviours and creating sustainable, healthy lifestyles.

### What have we achieved so far?

Within the Development Strategy for Central Bedfordshire we have managed to secure a 400 metre restricted opening time zone for hot food take-aways near our upper schools and colleges.

There has been a 25% reduction in teenage pregnancies in Central Bedfordshire since 2010. Local rates are now below the regional and national averages.

A Schools & Partners Network has been launched to promote and support positive health and wellbeing in all Central Bedfordshire schools.

### What local challenges do we face?

Overall levels of excess weight in children across Central Bedfordshire are slightly below the national average but 20% of our 4-5 year-olds and 29.8% of our 10-11 year-olds are overweight or very overweight.

Teenage pregnancy rates have fallen overall. We need to continue to reduce conceptions in specific communities where rates are higher than both the local and national averages.

A recent health behaviour perception survey of over 3000 Central Bedfordshire pupils highlighted a downward trend in self-esteem. It is therefore understandable that the number of hospital admissions due to self-harm in local girls has also increased in recent years.

### What are we doing about them?

Planning, Leisure Services and other teams at the Council are working together to reduce the number of children with excess weight by creating the Central Bedfordshire Excess Weight and Physical Activity Strategy.

The local Teenage Pregnancy Strategy combines a universal approach to reducing teenage pregnancy, with additional targeted services working within high rate areas and with more vulnerable groups.

We are also working with schools, partner organisations and providers to promote resilience and emotional wellbeing in children and young people in all settings.

### Public feedback

*'The approach to a sustainable and a more happy and healthy lifestyle is one that I think underpins all that we have learnt whilst on the programme.'*

- A parent who attended a locally commissioned family weight management programme

*"The group has been a very informative and fun approach to nutrition and exercise. Keep up the good work, team!"*

Parent



# Public Health Briefing 6: Giving Every Child The Best Start In Life (Developing Well Priorities)

## Childhood Excess Weight

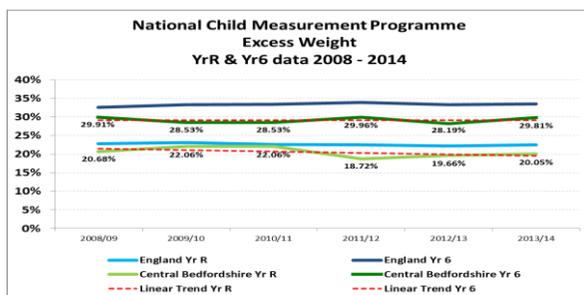
### Why this is important

Whilst the latest National Child Measurement Programme (NCMP) data for children aged 4-5 years shows a downward trend in both 'overweight' and 'very overweight' rates, for children aged 10-11 years there is an upward trend in 'very overweight' rates.

### What are we doing about it?

Our newly commissioned weight management service for adults and children will have a strengthened focus on prevention and early intervention services, including collaborative work on physical activity with other parts of the Council.

We will also work with Health Visitors and Schools Nurses to ensure a consistent approach to supporting healthy weight, nutrition and increased physical activity for children and families.



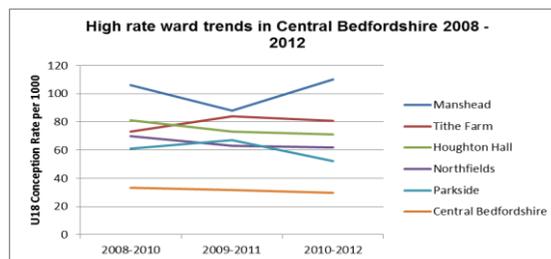
## Teenage Pregnancy

### Why this is important

Teenage conception rates have stabilised or fallen in 4 out of 5 of the higher rate wards in Central Bedfordshire, but we will continue to work in areas where conception rates are disproportionately high, for example, in the Manshead ward.

### What are we doing about it?

We are working to increase access to contraceptive and sexual health services (CASH) for young people where they are most needed. We expect to extend our local work with young people to raise self-esteem and aspirations for young people who are at increased risk of teenage pregnancy. We are also working to ensure that all schools in areas where teenage pregnancy rates are high are supported to provide high quality Sex & Relationships Education and take up the full School Nursing Service offer.



## Building Resilience and Reducing Risk

### Why this is important

Resilience is the capacity to 'bounce back' from adversity; however those who face the most adversity are least likely to have the resources necessary to build resilience. This is illustrated by levels of self-harm, which are most common in areas of higher deprivation.

### What are we doing about it?

We will continue to develop and promote the School Nursing Service that provides immediate support for pupils and their families. We will also work with schools to encourage a whole school and community based approach to promoting emotional wellbeing and resilience. We want to understand more about emotional health and wellbeing and we will also commission a survey to better understand the detail and trends around issues affecting young people locally.

This will help us as we continue to work with children and adolescent mental health services to develop and promote clear pathways for those who need support and treatment.

