

MUNICIPAL YEAR 2013/2014

MEETING TITLE AND DATE:

Health and Wellbeing Board
20 June 2013

Agenda – Part: 1

Item: 8.1

**Subject: Health Improvement
Partnership Update**

Wards: All

Cabinet Member consulted:

REPORT OF:

Director of Public Health

Contact officer and telephone number: Glenn Stewart 0208 379 5328

E mail: glenn.stewart@enfield.gov.uk

1. EXECUTIVE SUMMARY

1.1 This report provides an update on the work of Public Health, including:

- Patient equality monitoring report from Barnet and Chase Farm
- Regeneration
- Domestic Violence
- Child health
- Adult health

2. RECOMMENDATIONS

2.1 The Board is asked to note the contents of this report, in particular that:

- Barnet and Chase Farm NHS Hospital Trust presented a patient equality monitoring report
- Regeneration
- Domestic violence is a major concern in the borough, a factsheet for this is being developed and will feed into the Health and Well-being Strategy
- Work is being done to promote vaccination, particularly in relation to the measles outbreak in Wales
- Participation in the National Childhood Measurement Programme was the highest yet recorded in 2011-12
- A workshop on improving life-expectancy in Upper Edmonton has been run with a further workshop is being held on 16th July.
- Enfield achieved the healthchecks delivery target in 2012-13 but not the offer target.

3. Barnet and Chase Farm Patient equality monitoring report

3.1 The HIP received the annual equalities monitoring report from Barnet and Chase Farm.

3.2 The age profile of residents attending BCF indicates that until the age of 44 residents are less likely than the population as a whole to attend the Trust. However, people aged 65 – 74 are twice as likely to attend and those aged 75+ three times as likely to attend:

Activity	AGE_GROUP					
Type	0-14	15-44	45-64	65-74	75+	Grand Total
Accident and Emergency	22%	39%	18%	7%	14%	100%
Elective (IP and DC)	3%	26%	32%	18%	21%	100%
Inpatient-Non Elective	13%	28%	17%	11%	32%	100%
Outpatient	9%	25%	29%	16%	21%	100%
Overall	12%	29%	26%	14%	20%	100%
Barnet PCT pop (2011)	20%	45%	22%	7%	7%	100%
Enfield PCT pop (2011)	21%	44%	23%	7%	6%	100%

3.3 Activity within the Trust has remained stable for the past 5 years; approximately 70% of activity concerns those aged under 75. Similarly 60% of bed-days are accounted for by those aged 75+:

YEAR	ACTIVITY		BED DAYS	
	Under 75	Over 75	Under 75	Over 75
2008	71%	29%	40%	60%
2009	70%	30%	39%	61%
2010	71%	29%	39%	61%
2011	70%	30%	39%	61%
2012	68%	32%	38%	62%

3.4 The gender profile of the Trust is skewed towards females reflecting specialities within the Trust (e.g gynaecology).

Activity	BCF TRUST	
	Male	Female
Accident and Emergency	47%	53%
Elective (IP and DC)	44%	56%
Inpatient-Non Elective	42%	58%
Outpatient	44%	56%
Overall	44%	56%
Barnet PCT population	48%	52%
Enfield PCT population	48%	52%

Ethnicity monitoring indicates that uptake of BCF services is greater in White populations. This may reflect the inverse-care law, the catchment area of Chase Farm (Enfield's most diverse wards are in the south-east of the borough and may therefore access the North Middlesex hospital more or poor recording. It was noted that monitoring could not distinguish Turkish or Greek communities.

Monitoring by area of deprivation, particularly in A&E indicates that there may be some residents who are using A&E inappropriately. This will be followed up by the Trust and the CCG.

Religion, disability, and sexuality are either poorly recorded or not recorded.

4. REGENERATION

4.1 The HIP received a presentation on highlighting regeneration, priority areas being noted as the North East, South West and South East of the borough.

4.2 Key aspects of health were noted as:

- Obesity – both child and adult
- Life expectancy
- Infant mortality
- Physical health conditions
- Mental health
- Disability
- Pollution
- Employment

4.3 Input into regeneration was asked for from Environmental health, particularly in relation to food and catering.

5. DOMESTIC VIOLENCE

5.1 The HIP received a presentation on Domestic Violence from the LBE domestic violence co-ordinator.

The definition of domestic violence has been widened to include those aged 16-17 and includes 'honour' based violence, female genital mutilation (FGM) and forced marriage.

Domestic violence / violence against women or children is a priority for the Safer, Stronger Community Board and a indicator on the Public Health Outcome Framework.

Enfield statistics indicate the scale of the problem in the borough:

- Over a third of violence reported to the police in Enfield is domestic violence (DV) or intimate partner violence (IPV)
- IPV affecting predominantly women (86%)
- In Enfield there were 9,047 calls for service to the police regarding domestic abuse in 2012
- The first data gathered by the Single Point of entry showed 80% of referrals related to DV
- 76% of Child Protection Plan cases involve DV
- Almost a third of personal crimes in Enfield are flagged as domestic violence (30%), this rises to over four in ten (41%) for crimes of physical violence and sexual offences.
- Domestic Violence figures are currently up 3.9% in Enfield as opposed to a 4.6% fall across London (to 29/1/12)
- The estimated socio-economic cost of domestic violence in Enfield is £31.5million (Trust for London and the Henry Smith Charity, 2011).
- This does not include the human and emotional costs to victims/survivors, which will largely be dealt with by public health services, estimated to be £54.2million in Enfield. Therefore the combined cost of domestic abuse and VAWG in Enfield is estimated at £85.7million per annum (Professor Sylvia Walby 2009).

Enfield is starting training in 25 GP surgeries, developing protocols for routine enquiry for Health Visitors and has implemented a Single Point of Entry system. Enfield was the first borough in London to receive 'White ribbon' status for its work done with young people.

A factsheet on DV is being produced for the JSNA which will itself feed into the Health and Well-being Strategy.

6. CHILD HEALTH

6.1 Childhood obesity

Paperwork for the childhood healthy weight coordinator is still being processed.

Enfield participation in the NCMP in 2011/12 was the highest participation rate yet achieved Enfield.

Whilst the prevalence of obesity remains significantly higher than England and London averages; prevalence in both reception and year 6 aged Enfield children fell from the preceding year.

Breastfeeding

Trained breastfeeding helpers are working within Children's centres in Enfield; a further 24 women are being trained this year. Local advertising has taken place to raise awareness of the importance of breastfeeding and to "normalise" the practice.

"Breastfeeding welcome" is being promoted throughout premises in the borough so that women can easily see (through the display of a sticker) where they will be welcome to breastfeed; to date over 60 businesses have signed up to the scheme.

A new specialist health visitor has recently been appointed who will lead on breastfeeding within the service; 30 members of community health staff recently received specialist breast feeding trained by Middlesex University.

Immunisation

Information has been sent to GPs, schools and children's centres to request further promotion of MMR following the increased number of measles cases throughout the country.

There has been a range of promotional activities undertaken Recently; this includes the development of a new poster, advertising in the local newspaper, on and in buses, 20 local schools displaying banners on their perimeter fences to promote immunisation to their families. Working with schools and children's services has resulted in a leaflet going to parents when their child obtains a place at a local primary school. This has been well received, with requests from schools for further copies. Following the encouraging feedback from parents and professionals of a magnet displaying the immunisation schedule, further magnets have been distributed.

7. ADULT HEALTH

7. Adult Health

No new data has been released since January 2012, a further release is expected in 'the summer' of 2013 but a more exact date has not been released.

A workshop to develop work on improving life-expectancy, and particularly female life-expectancy was held on 24th May. A further workshop will be held on 16th July.

Enfield achieved the healthchecks delivery target this year, delivering 5503 healthchecks against a target of 5500. However, it missed the offer target; 12,746 were offered against a target of 15,900.

Smoking data is not due until 17th June. As of 28th May Enfield needed another 118 quitters to meet the target of 1568.

11.0 REASONS FOR RECOMMENDATIONS

The above recommendations reflect current work within the Directorate of Public Health

12 COMMENTS OF THE DIRECTOR OF FINANCE, RESOURCES AND CUSTOMER SERVICES AND OTHER DEPARTMENTS

12.1 Financial Implications

No financial implications

12.2 Legal Implications

No legal implications