

## **Annual Report of the Lead Member for Public Health, Equalities and Diversity**

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Local Member(s) and Division: South Petherton and Islemoor

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### **1. Introduction**

1.1 This report is from the period of May 2022 to August 2023 and focuses on the four domains of public health:

- Improving health
- Protecting health
- Wider determinants of health
- NHS population health

1.2 This details the work of the team, which protects and improves the health of the Somerset population.

### **2. Improving Health**

#### **2.1 Health Visiting and School Nursing (Public Health Nursing)**

The service provides universal access to evidence-based health improvement and health protection interventions for all children and young people, and their families as part of the National Healthy Child Programme. The priority for Public Health Nursing is to provide every child with 'the best start in life' and reduce health inequalities. In June 23 the Office of Health Improvement and Disparities (OHID) produced a toolkit as an update to the Healthy Child Programme to support the commissioning and delivery of health visiting and school nursing services Healthy child programme schedule of interventions - GOV.UK ([www.gov.uk](http://www.gov.uk)). The toolkit brings all evidence sources together related to commissioning and providing services for pregnancy, babies, early years, and school age children.

## **Inspection**

The service received a rating of “good” following its first Care Quality Commission (CQC) inspection in June 2022 since transferring to the council.

## **RIO**

In September 2022, the new RIO electronic patient record system went live with data safely transferred from the NHS to Somerset Council. The system continues to be developed to support clinical care and is already providing significant benefits for performance management, patient safety and data quality which will support service improvement and wider commissioning objectives. Somerset Council is the first local authority in the UK to launch RIO and have featured in IT journal interviews during 22 and 23. The service is also engaged with NHS England to test a prototype electronic link to CP-IS the national safeguarding data set.

## **School Nursing**

During 2023 a school nursing review was completed to develop a clear and consistent offer for school nursing which can be effectively delivered and evaluated and maximise the resource and capacity of the service.

## **Non-Accidental Injury and Safeguarding**

During 2022 and 2023 Somerset has sadly seen further non-accidental injuries (NAIs) in infants under one, some sustaining significant, life-changing injuries and one infant death. The public health nursing safeguarding team have contributed to local and national multi-agency reviews in all these cases, highlighting some areas of good practice and embedding learning where possible.

Public Health Nursing are key participants in all safeguarding multi-agency forums, representing public health nursing in the majority of strategy discussions, all Integrated Care System (ICS), health safeguarding forums and the Somerset Safeguarding Children Partnership (SSCP).

## **Quality Assurance**

A quality assurance framework has been developed for the service, based on a model used in children’s social care.

## **Workforce**

Recruiting and retaining trained Specialist Community Public Health Nurses (SCPHN health visitors and school nurses) continues to be a challenge. An active recruitment plan is in place with the development of a workforce strategy, and training places during 22/23 and into 2024 have been increased to meet the desired trajectory over the next two years supported and lead by practice educators. Further support is required across the organisation to support recruitment and retention, similar to the campaigns run by social care.

## **Service Development**

Service development areas, in addition to quality assurance, RIO and school nursing include the Best Start in Life, linking closely with the Education for Life Strategy, Integrated Care Board (ICB) and Connect Somerset programmes of work.

Key interventions saw the launch of the Enhanced Parent Pathway, now known as the Forest team, which provides a more targeted midwifery and health visiting offer. The service has also made improvements in line with the SEND written statement of action and continues to engage with the SEND Partnership Board to support partners in achieving against the Ofsted Accelerated Improvement Plan.

## **2.2 Maternity and Early Years**

### **Breastfeeding**

Development of a systemwide breastfeeding strategy is a recommendation set out within the guidance for Local Maternity Systems. To achieve this, the local maternity and neonatal system (LMNS) commissioned in partnership with Public Health, Better Breastfeeding to support developing a Co-produced Breastfeeding Strategy. A multiagency task and finish group has been established, and wide consultation with commissioners, wide workforce, and service users is underway. The draft five-year strategy is due for consideration in the autumn.

### **ICON**

ICON is an acronym for a set of key messages: **I**nfant crying is normal, **C**omforting methods can help soothe your baby, **I**t's **OK** to walk away from your baby for a moment, if you have left them in a safe sleep space and **N**ever, ever shake a baby.

ICON was launched across Somerset in 2022. ICON, a national prevention programme, aims to reduce incidents of non-accidental injuries (NAI) and abusive head trauma in infants through supporting parents to manage the stress caused by an infant crying. The intervention has been incorporated in all universal contacts with families from midwifery, health visiting and GP's and across secondary care services such as emergency departments.

A task and finish group established by the SSCP in in 2023 has developed further recommendations to prevent Non-accidental Injury (NAIs) in under one-year olds, including father engagement and the implementation of ICON throughout all frontline and community services.

### **Child Unintentional Injury**

Within the data for emergency admissions for children aged 0-4 years, Somerset has a higher numbers of emergency admissions than England and some of our regional neighbours. Incidence of injury is reported as child unintentional injury (CUI). In the greatest number of cases, the injury occurs in the home. The types of

injury leading to hospital admissions include, with a higher incidence rate, falls (downstairs, from high surfaces), exposure to heat and hot substances (burns and scalds) and accidental poisoning (consuming liquitabs, medicines or products).

Scoping and engagement work has taken place in 22/23 and a task and finish group is being established to co-produce a CUI strategy that addresses prevention through a programme of work: providing accessible and timely public information, enablement, and support proportionately and appropriately to all families in Somerset.

### 2.3 Promoting Health and Wellbeing with Schools

*Somerset children and young people's health and wellbeing website:*

[www.cypsomersethealth.org](http://www.cypsomersethealth.org)

The Somerset Wellbeing Framework (SWF) is our local evidence-based model to support schools in developing a whole school approach in relation to health and wellbeing. It is based on an evidence-based approach developed nationally, to create a positive culture of wellbeing in schools.

The model promotes three key pillars of wellbeing that help us stay resilient and promote positive mental health:

- Belonging – creating a sense of belonging and inclusivity.
- Relationships – promoting positive respectful relationships.
- Lifestyles - in relation to food, physical activity and sleep.

We now have 257 Somerset schools registered with the Somerset Wellbeing Framework. This shows an increase of 63 settings since June 2022 and represents a high proportion of Somerset schools. Work has been undertaken to ensure the framework and audit tool meets the needs of SEND learners and settings.

There are a number of toolkits and support pages associated with the framework, including an [Audit Tool](#) (which is under review), the Parent and Carer Toolkit which provides [wellbeing information, resources and help for families](#) and emotional and mental health support [Somerset Emotional and Mental Health Support](#). There is also a [Quick Guide](#) for young people and families which provides easy access and signposting for schools and practitioners to use and share with families.

#### **Somerset Children & Young People's Emotional, Mental Health and Wellbeing Public Health Training / CPD Offer**

Public Health commissions a range of free face to face training programmes to support the development of a whole school approach and children and young people's emotional, mental health and wellbeing courses for school staff and

children and young people practitioners. During the academic year September 2022 – July 2023 our commissioned training providers have delivered the following:

- Mental Health First Aid (Youth)
- Compassionate Mindful Resilience
- Creativity and Play in Relationships
- Harmless Self-Injury
- Emotion Coaching training

### **Senior Mental Health Leads (SMHL)**

The Department for Education (DfE) has advised schools to have a designated Senior Mental Health Lead (SMHL). A SMHL training partnership has been formed with Public Health, the Educational Psychology Service, Young Somerset and CAMHS. To date, a total of 192 Somerset schools have accessed grant funding for the national SMHL training, with 157 Somerset settings attending our four-day training programme. A local network has been set up to provide ongoing supervision and support to all Somerset Senior Mental Health Leads in their roles.

### **Relationships Sex and Health Education (RHSE)**

**LIFEBeat** are contracted by Public Health to deliver the RSHE curriculum development CPD and youth leadership for schools. The training course supports attendees to develop and implement a curriculum which meets Ofsted requirements as well as the national guidance set by DfE Senior Mental Health Leads Training.

In 2022/23 this offer included two three-day CPD training courses for developing and implementing a mental health and wellbeing curriculum. A working group has been established with Somerset Wide Integrated Sexual Health (SWISH), Public Health and SEND Schools to review the Relationships and Sex curriculum for SEND pupils and improve parental/carer engagement.

### **LIFEBeat Camps**

LIFEBeat has funded two summer camps and a winter reunion for Somerset 14–18-year-olds in the past two years. The camps are a week-long opportunity for young people to make positive new friendships, explore their creativity, build resilience, greater independence and improve self-esteem. Opportunities are available during the camps to join workshops on nature connection, music, theatre, crafts, outdoor activities and loads more. Fifty-one young people participated in this year's camp, which included refugee children and children with special educational needs.

### **LIFEBeat Youth Wellbeing Ambassadors**

LIFEBeat were contracted to deliver a Youth Wellbeing Leadership Programme. During 2022 the LIFEBeat youth leadership team produced a film about belonging

and community which focused on what is what like to live in Frome and the Mendip area. The film can be accessed here: [LIFEBeat\\_Frome\\_Town\\_Hall \(vimeo.com\)](https://vimeo.com/LIFEBeat_Frome_Town_Hall)

### **Somerset Schools Wellbeing Survey 2023**

This is a bi-annual countywide health and wellbeing survey targeting pupils aged 6-18 in all types of educational settings. For the 2023 survey a revision of questions was undertaken with input from the behavioural science team and colleagues from education. Chapters of questions cover emotional wellbeing, lifestyle, transport, risk, educational experience and for older students' sexual health/relationships, future plans and drugs, smoking and alcohol. The questionnaire was also adapted into an accessible version to ensure that it was inclusive to pupils who have a special educational needs and letters to parents were also translated into different languages.

The results show self-reporting of young people's perceptions of their feelings, thoughts and behaviours at school and in the wider community. A total of 89 settings took part this year, with 6,407 individual responses received and 1,183 responses received from different age groups. Analysis of the 2023 findings will be published at end of September 2023. Each school has the right to decide whether to share their individual report; we do not share or publish them in the public domain or with other departments. The report findings will be aligned to reflect the key priorities as outlined in the Education for Life Strategy which are Curriculum Quality, Trauma Awareness and Mental Resilience.

Yeovil College piloted the first in-house FE (Further Education) Health and Wellbeing online student survey in 2022/23. The question set was designed in partnership with the college and consulted on with other Somerset Post-16 settings. The questionnaire was completed by 694 students aged 16-19. The college used to the survey results to develop an in-house Relationships, Sex and Health Curriculum for their students and have protected tutor time to explore these themes. The college remains committed to embedding a positive culture of wellbeing as part of a whole setting approach.

## **3. Improving the Health and Wellbeing of the Whole Population**

### **3.1 Smoking Cessation and Tobacco Control**

The Smokefree Somerset Service has continued to see an increase in referrals from people wanting to quit smoking. Since May 2022, the GoSmokefree team have supported 1,485 people to quit, a 62% quit rate which is above England Average. In addition, the Smokefree Families team have supported 705 pregnant women/people and their significant others with 518 quitting, achieving a 66% quit rate. A further 187 people have been supported for Readiness to Quit, the harm

reduction pathway. Importantly maternity smoking prevalence 'Smoking at Time of Delivery' (SATOD) decreased from 10% to 9.1% in year 2022/23.

- For children and young people who smoke, vape or are at risk of starting, several initiatives have been developed/commissioned including:
  - 'INTENT' vaping prevention programme for delivery in education settings to students in Years 7-10 has launched. Over 20 settings have expressed an interest in the programme. The programme supports young people to have the confidence to refuse tobacco related products and vapes and includes quit messaging for those who may already be using them.
  - Launch of 'Jenny and the Bear' second-hand smoke campaign in primary schools with resources for use in the classroom, take home, and smokefree signs at school gates encouraging smokefree homes and cars.
  - Range of online and social media resources for education settings, youth provision and local families on information and prevention of smoking and vaping.
  - A pathway to support children and young people wanting to stop smoking and vaping is being implemented with School Nurses and with Bridgwater and Taunton College.
  
- The Tobacco Alliance, chaired by Cllr Adam Dance, brings together stakeholders from across Somerset the focus this year has been to:
  - Reduce the harms of smoking and health inequalities from smoking for:
    - vulnerable and disadvantaged groups
    - children and young people
    - maternity
  - Strengthen partnerships with trading standards to reduce illicit tobacco and e-cigarettes, increase fire safety checks in partnership with fire service.
  - Work with partners to spend a small one-off community fund for prevention of smoking in community groups.
  - Future work will focus on:
    - Working with local waste partnership and environmental health on the recycling of e-cigarettes and impact on climate of smoking
    - Strengthen pathways with mental health, homelessness and people with Long-term conditions to continue to reduce smoking prevalence.
    - Insight and engagement work for pregnant people who do not quit smoking during pregnancy.
    - Reducing the harm of smoking & vaping young people and families.

### 3.2 **NHS Health Checks Programme**

The programme is offered to those aged 40-74 who do not already have a diagnosed cardiovascular condition like hypertension. An NHS Health Check is recommended every five years and results are forwarded to the person's GP.

The Somerset NHS Health Check supports the local population and system with early disease detection. In 2022/3, the programme is almost back to pre-pandemic delivery levels with 8,535 people receiving a check. There has also been a great expansion in delivery locations and making slots available at the evening and at weekends. Delivery in early 2023/24 continues to maintain these levels.

The contract for the NHS Health Checks Programme expires end March 2024. Since May 2022 we have been working on the recommissioning process and have agreement to bring the current contract in-house from April 2024.

### 3.3 **Food, Physical Activity and Healthy Weight**

#### **Food**

The Healthy Lifestyle Team developed and implemented a series of offers for sharing with providers and the public to promote healthier food choices with the cost-of-living crises, food waste reduction, and seasonal produce in mind. These included:

- A range of easy recipes with nutritional analysis and meal planning tips.
- After a partnership with Food for Life from the Soil Association, the Somerset Food Champion Network has been developed, comprising training and ongoing capacity building and support, with providers and communities to co-create enabling environments for weight-inclusive healthier choices and a community cookery venue mapping tool.
- Basic Human Nutrition training.
- Several school-based offers including:
  - Food & Fun Together workshops, engaging families/carers and their children in interactive cooking.
  - Water Schools project to reduce sugary drinks.
  - School Nurse training for Eating Well.
  - 'Conversation for Change' tool with standardised messaging and training for healthier lives.

The Community Food and Growing Grant in partnership with Somerset Community Foundation and Somerset Community Food has seen over 40 community organisations embedding sustainable food activities into their work. Some of the innovative projects include connecting neighbours with unused gardens for food growing, creating or expanding green spaces and food growing areas in neighbourhoods, schools, hospitals and workplaces, development of community farms in urban areas, and cooking programmes for asylum seekers. An evaluation of the programme is due in early 2024 to provide learning for future food strategy development.



## **Physical Activity**

Somerset Moves, the physical activity strategy has continued engagement with system partners and implementation over the last 12 months.

Somerset Health Walks, led by Somerset Activity and Sports Partnership (SASP), has continued to grow, with over 600 walks delivered, and now has 161 walk leaders across the county, which has doubled from last year. New walks are being added to the programme all the time, including shorter walks for people with multiple long-term conditions or low mobility.

The exercise referral programme 'Proactive' has 18 leisure providers now signed up to the scheme and accepting referrals from health and social care across the county. Since May 2023 the scheme has received over 500 referrals supporting people with multiple long-term conditions. The most common conditions referred for are high blood pressure, back pain, obesity, osteo-arthritis and anxiety. The scheme has been working hard to ensure enough staff are trained across the county in leisure centres to support people to exercise safely with multiple health risks and has been working with leisure providers to develop their offer including, gym, groups, swimming and community-based activities.

## **Weight**

A strong partnership has developed to drive a Somerset whole-system approach to weight. A healthy weight steering group has helped to secure funding from the ICS to support delivery of the healthy lifestyles element of the enhanced parent pathway. The HENRY (Health, Education, and Nutrition for the Really Young) national programme starts in Somerset later this year to support healthy lifestyles in early years.

Following the successful launch of the 'Compassionate approach to weight' event in June with over 50 partners in attendance from across the region, the partnership has been busy developing a programme of work to support Somerset to become one of the first areas in the country to have a truly compassionate approach to weight, to reduce the stigma and judgement experienced by people and families living with obesity. We are working with ICS colleagues to strengthen the community weight offer through health coaches. Public Health, in partnership with ICS colleagues, are also proceeding with a number of bids to look to generate funding to support the healthy weight agenda.

### **3.4 Falls Prevention**

Preventing falls and improving outcomes for those who fall remains a high priority in Somerset, as we have higher rates of falls and hip fractures in our older people than similar areas. With an ageing population and significant physical deconditioning in older adults in the wake of Covid19, we expect rates of falls to increase further. Our role is to ensure system coordination to deliver evidence-

based interventions that prevent falls, partly through reconditioning for our ageing population through movement and physical activity. A multi-agency Somerset Falls Prevention Strategic Steering Group has been meeting monthly since May 2022 to help shape future delivery and priority of falls across the county. The group membership includes Somerset Council, Age UK Somerset, the Integrated Care System, Somerset Activity and Sports Partnership (SASP), Somerset Foundation Trust, South Western Ambulance Service NHS Foundation Trust.

The Steering Group informed the recent Falls Prevention Health Needs Assessment (HNA), ensuring that the HNA and the recommendations are evidence-based, up to date, relevant and inclusive for all agencies delivering a falls prevention agenda. The HNA was published in July 2023 [Falls Health Needs Assessment.pdf \(somersetintelligence.org.uk\)](https://www.somersetintelligence.org.uk/Falls_Health_Needs_Assessment.pdf)

In May 2022 Public Health commissioned SASP to deliver a one year “Stronger 4 Longer” communication campaign, aimed at increasing movement and mobility for 50+ year olds. Our collaborative commissioning approach enabled SASP to partner with Age UK to develop a communications campaign to support the reconditioning of our ageing population in Somerset as we emerge from the Covid19 pandemic, working to embed movement as a part of life for ‘younger’ older adults who may not access traditional falls prevention classes. The campaign developed system wide positive and empowering evidence-based messages throughout the year, as well as showcasing a range of pre-existing local classes supporting older people to access support and regain strength and mobility.

### 3.5 **Oral Health Promotion**

Roderick’s Dental services provide the Oral Health Improvement Service commissioned to meet the statutory responsibility of Somerset Council to deliver an oral health promotion programme. Roderick’s prioritised fluoride varnish applications as a focus for performance in 22/23. There are two Fluoride varnish delivery elements; early years settings and a community programme delivered in Public Health Nursing bases. Targeted fluoride varnish sessions in the community are planned for children identified as higher need during mandated health visitor contacts, including displaced children of eligible age. A targeted supervised toothbrushing scheme is currently available to settings engaged in the fluoride varnish scheme.

The council also has a duty to commission the national dental epidemiology programme, which is an oral health survey of five-year old children, which looks at the prevalence of children with decay; this was last undertaken in the 21/22 school year, having been delayed due to the pandemic.

### 3.6 **Mental Health Promotion**

Support and resources to help people look after their wellbeing was a critical part of the Covid19 response and continues to be a crucial element of public mental health work. We recognise that now more than ever support and resources that support and promote mental health and wellbeing are crucial to protect public mental health.

An updated version of the Somerset Bereavement Support booklet has been published (originally produced in 2021). The booklet has been updated to reflect changes in guidelines, procedures and support available. The booklet can be viewed here: [Bereavement in Somerset 2022 \(pubhtml5.com\)](https://pubhtml5.com).

Two successful communications campaigns ran between May and June 2022, focusing on Mental Health Awareness Week and Men's Health Week. Content was shared through ad banners on websites and a boost on Facebook, which helped achieve more than 400,000 impressions and 6,000 more website clicks than the previous months. A new page was created on the Healthy Somerset website for Mental Health Awareness Week, which ran between 15<sup>th</sup> and 21<sup>st</sup> May 2023. Members of the public submitted photos of places they went in Somerset to help them to feel calmer and lift their mood through the #SomersetMyHappyPlace social media campaign. These photos have now been uploaded to a digital map of Somerset which has been shared on social media and is available on the Healthy Somerset website. The map can be viewed here: [Somerset Happy Places – Google My Maps](#). The page will be updated every year as the theme of Mental Health Awareness Week changes annually.

Public Health currently commissions Mental Health First Aid, Applied Suicide Intervention Training Skills (ASIST), Self-Harm Awareness, Suicide Alertness and Every Life Matters training. In 2022, 716 people completed online Suicide Alertness and Suicide Awareness courses, 229 people completed Applied Suicide Intervention Training Skills (ASIST) training and 126 completed Mental Health First Aid training. Training numbers for 2023 have not yet been finalised.

### 3.7 **Suicide Prevention**

The Suicide Prevention Partnership Forum is a multi-agency group facilitated by Public Health with approximately 40 participants in attendance representing up to 30 organisations. This board uses a partnership approach to preventing suicides and comprises of four workstreams. These workstreams include programme management, high risk groups, communications and media management, training and community engagement. We also continue to be involved with the Association of Directors of Public Health (ADPH)/Local Government Association (LGA) Suicide Prevention Sector Led Improvement (SLI) Programme and recently engaged with colleagues from South Gloucestershire Public Health in a SLI peer review work.

The Orange Button Scheme, a community awareness of suicide, was launched in 2022 alongside World Mental Health Day. The Orange Button Social Media Campaign reached over 61,000 people resulting in 2,861 link clicks to the website. The Orange Button is worn by people in Somerset who have undergone quality-assured Mental Health or Suicide Prevention training; whilst they are not able to counsel people, they can signpost to relevant services locally. The Orange Button means that the person wearing it is OK to say/hear the word suicide, can listen without judgement, and can support people with signposting. As of August 2023, approximately 900 people have signed up. The Orange Button scheme is promoted in 5 Local Authorities nationwide, Somerset alongside the others have been nominated for the national Health Service Journal Award in 2023.

The Walk for a Life event was held on 10<sup>th</sup> Sept 2022, with over 60 people joining the event. Feedback was excellent. In the lead up to the walk, members of the public were asked to submit quotes, lyrics or poems that had got them through difficult times. Submissions were anonymised into a “Somerset Book of Hope” and were presented at the Walk for a Life event and then made available to be downloaded. [Book of Hope – Walk for a Life](#). The event is being held again this year on 9th Sept 2023 at the Museum of Somerset with a similar Book of Hope for this Walk, which will be published online in due course.

### **3.8 Behavioural Science Unit**

The Behavioural Science Unit supported two main pieces within health improvement. The Unit informed the development of the School Health and Wellbeing Survey, ensuring the items used in the survey represented appropriate constructs and used valid measures. This ensured a robust design.

Additionally, the Unit undertook nine focus groups with 35 parents/carers of children who were eligible to take part in the NCMP that year. The focus groups explored the acceptability of the results letter, and the findings and feedback informed changes to the letter.

## **4. Protecting Health**

### **4.1 Communicable Disease**

After the Covid19 pandemic, Somerset established a whole system Health Protection Board, which enables a more strategic approach to protecting the population’s health. This has taken forward work to respond to communicable disease outbreaks in a co-ordinated manner, develop and cascade a weekly dashboard of outbreaks that are affecting patients in a range of high-risk settings and mature our system assurance role.

This year has seen the transition to ‘Living With Covid19’ plan being implemented. Despite good immunisation coverage, high risk settings such as hospitals and

community care settings are being continually compromised by this infection. Surveillance of new variants of SARS CoV-2 (Covid 19) is led by UK Health Security Agency (UKHSA) and where there is a potential increased risk of a new variant, this is cascaded across the health and care system.

There has been a resurgence in other infectious diseases post the pandemic. Somerset Council Public Health ensures that each situation is managed effectively and where required, system improvement undertaken. Particular challenges this year have been MPox (previously called Monkey Pox) Scarlet Fever, Invasive Group A Streptococcus, influenza, Avian Influenza and scabies. We are working across the ICB to develop a system wide health protection function for Somerset, including the development of a community Tuberculosis service.

It has widely been reported that we have seen the worst influenza season for a decade. The high flu rates resulted in very high hospital admissions, in Somerset and the southwest as a whole. The high rates of flu infection came at the same time as high rates of SARS CoV-2 in circulation, causing outbreaks across health and social care settings and resulting in high numbers of staff being sick with either flu or Covid19. This caused significant challenges within the health and social care system, at a traditionally busy time. Somerset (County) Council as it was then, utilised Covid19 funding to provide an enhanced flu vaccination scheme for staff who were not covered by the national NHS scheme a total of 1,350 staff from Somerset County Council and Somerset schools have been vaccinated for flu, supported by the SCC funded flu vaccination.

The Covid19 Public Enquiry was launched and is chaired by Baroness Heather Hallett – [UK Covid-19 Inquiry](#). Somerset Council have responded to three Rule Nine requests from the enquiry, focused on our preparations for a pandemic and our procurement once the pandemic was declared and throughout the ensuing time period. All of our decision making and documentation has been organised to enable us to respond over the life of the enquiry, regardless if personnel move on.

#### **4.2 Screening and Immunisations**

NHS England (NHS E) is responsible for the commissioning of all age immunisations and screening programmes as recommended by the National Screening Committee [Population screening programmes](#). The focus of screening programmes has been catching up with activity that was delayed by Covid19, most prominently breast cancer screening, which only completed screening of women who could not attend during Covid19, in February 2023.

#### **4.3 Emergency Planning and Response**

During this year the new Somerset Local Health & Care Resilience Partnership was launched in October 2022 to deliver the shift in responsibilities under the Civil Contingency Act for the Integrated Care Board to become a Category 1 responder

in their own right. The new Partnership has developed a risk register and workplan to address the risks to health and the necessary planning and mitigation to be undertaken. Somerset Public Health Co-Chair this group and are active members; this is vital as we ensure that the health impacts associated with Glastonbury Festival, Hinkley Point B and C are effectively mitigated against, and a wider set of risks and incidents are planned for, and plans tested to ensure effective responses.

Emergency planning systems have been tested once again by flooding on repeated occasions and several large infrastructure (Storm Eunice) and transport related incidents (Hinkley and Frome bus crashes). In addition to Somerset Public Health staff participating in local, regional and national LRF / NHS exercises.

Somerset Public Health have supported the Civil Contingencies Unit, alongside the radiological division of UKHSA, in redetermining the detailed emergency planning zone for Hinkley Point B and recalling Potassium Iodate Tablets from people within that zone, now that Hinkley B is no longer generating.

#### 4.4 **Sexual Health**

The Somerset Wide Integrated Sexual Health Service (SWISH) commissioned from the Somerset NHS Foundation Trust continues to experience increasing attendances with service use exceeding pre-pandemic levels. There are a number of factors driving this, including increased demand for contraceptive services, particularly for long-acting reversible contraception (LARC) with many women struggling to access via their general practice.

There has been an increase in gonorrhoea in Somerset as elsewhere, and other sexually transmitted infections (STIs) such as syphilis. The routine provision of pre-exposure prophylaxis for HIV (PrEP), which is a key medication for preventing HIV acquisition and significantly reducing transmission, has led to more people with high-risk sexual behaviour accessing sexual health services and once on PrEP, individuals are required to have regular sexual health screens which in turn identifies other STIs that can then be treated more promptly. Whilst MPox is not considered an STI, 2022 saw the emergence of this infection amongst gay and bisexual men with high-risk sexual behaviour. There were no cases reported for Somerset but SWISH and the HIV Prevention and Health and Wellbeing service provided advice and information and SWISH successfully delivered the MPox vaccination programme in Somerset.

As the contracts for SWISH and the HIV Prevention and Health and Wellbeing Service come to an end on the 31<sup>st</sup> of March 2024, this year has been busy with the recommissioning of statutory sexual health services. A sexual health needs assessment was completed as part of this process [Sexual Health Needs Assessment 2023](#), and the outcome of the recommissioning process will be announced in September 2023. The contracts for the provision of emergency

hormonal contraception in community pharmacies and LARC in general practice have been renewed. General practices continue to fit more LARC catching up from when this service was unable to be offered through the pandemic. However, there continues to be more women seeking LARC services and we have been working with general practice and SWISH to provide training for more fitters and to develop inter-practice referrals. We are working collaboratively with NHS Somerset on the development of Women's Health Hubs which will include improving reproductive health services.

In the last year Somerset launched the innovative C-card 'Click and Collect' service, believed to be the first in the country, to improve access to condoms for young people to reduce teenage conceptions and sexually transmitted infections [www.myccard.co.uk](http://www.myccard.co.uk). Young people signing onto the C-card scheme are provided with advice and information on condom use and sexual health, as well as safeguarding, and the scheme encourages young people to take responsibility for their own sexual health. The 'Click and Collect' service has enabled better access to condoms with sites across the county including all colleges, some pharmacies, young people's venues and for the first time most of our libraries are now offering this service.

Campaigns and social media have run throughout the year to raise awareness of contraception, STIs and PrEP targeting those most at risk as well as events such as Pride and college Freshers Fairs. The public health sexual health training programme provided a mix of face to face and virtual training opportunities to increase knowledge and skills of health and social care practitioners. In February 2023 the Lead Member for Public Health, Equalities and Diversity participated in National HIV Testing Week 'I Test' by having an HIV test and supporting the social media campaign to encourage others to come forward and test. The late diagnosis of HIV is high in Somerset and this campaign alongside the work of our sexual health services aims to improve the uptake of HIV testing to identify undiagnosed HIV and fast track onto HIV treatment where required. Early access to treatment improves health outcomes for those who are HIV positive and also prevents onward transmission through reducing HIV viral load.

Work has commenced this year on a needs assessment on sexual violence and the development of a Sexual Violence Strategy for Somerset.

#### 4.5 **Drugs and Alcohol**

The Somerset Drug and Alcohol Partnership was re-established in 2022 and developed a local drug and alcohol strategy which can be found at this link, [Drugs and alcohol](#), based on the new national drugs strategy "[From Harm to Hope](#)".

We have recognised that in Somerset the harm not only arises from drugs but also from excessive alcohol consumption and so our strategy aims to address both.

Somerset has implemented the first year and a half of the additional funding called the Supplementary Substance Misuse Treatment and Recovery Grant and our local ambitions are reflected in its use, alongside national ambitions to increase the numbers of adults in treatment by 20% from a baseline in 2021/22 of 2,233 to 2,680 and young people (under 18) by 50% (123 to 180) by end of 2024/25.

### **Dry January and Alcohol Awareness Week 2023**

There was a far-reaching campaign that included roadshows within libraries and promotion of the Dry January app and promoting referrals into our specialist services, Somerset Drug and Alcohol Service (SDAS).

The Alcohol Awareness Week campaign highlighted the harm caused by alcohol, how it affects millions of people every year in the form of health problems, financial worries, relationship breakdown and family difficulties. We produced short films with SDAS Peer Mentors, which were well received.

### **International Overdose Awareness Day 2023 / Promotion of Naloxone in Somerset**

Working in partnership with SDAS and Bristol and Bath Universities, we marked International Overdose Awareness Day 2023 with the launch of a unique new app to access Naloxone, the life-saving medicine to prevent an opioid overdose. Our campaign also included posters across Somerset, including the Taunton rotundas to raise public awareness. The promotional work attracted attention positive press attention, including a lead article on BBC Points West.

### **Consultation on Statement of Alcohol Licensing Policy**

The Council is undertaking a public consultation on the new alcohol licensing policy. We had an input, proposing the policy acknowledges alcohol can negatively impact the health of residents in Somerset and the policy should promote the responsible sale of alcohol, reduce the availability of cheap alcohol, promote an alcohol-free childhood and pregnancy and the health and wellbeing of residents.

## **4.6 Behavioural Science**

The Behavioural Science Unit supported projects on childhood immunisations, flu vaccine, and drugs and alcohol.

For childhood immunisations, behavioural insights were gathered through short interviews with parents and reviewing the literature. This helped to inform a successful small bid, where we worked with three GP practices to increase uptake of childhood immunisations. This involved the development of a reminder letter, using behavioural-science techniques, as well as delivering training to GP staff on motivational interviewing to use in telephone calls with patients. The project resulted in 27.1% of the patients included in the project booking an appointment



and 18.8% of patients getting vaccinated. The findings of this project are particularly important as we work to try and increase the coverage of MMR vaccination, in the context of rising concerns regarding declining measles protection. Additionally, we have informed regional training on vaccine confidence, aimed at upskilling health professionals to have conversations with parents about childhood vaccinations.

The Unit conducted a survey with health and social care workers to find out barriers to getting the flu vaccine, with 127 responses. The results were presented at the Health Protection Board, with recommendations for the next year's flu vaccine delivery and communications. Additionally, the Unit presented an oral presentation at the South West Public Health Scientific Conference, which detailed a successful randomised trial the Unit conducted to evaluate the effectiveness of using behaviour change techniques in email invitations to increase uptake of the flu vaccine in Somerset County Council employees.

Furthermore, the Unit worked with the Drugs and Alcohol team to develop alcohol brief intervention training, ensuring behavioural science theory and technique informed the development of the content and evaluation. Additionally, a Behavioural Science Practitioner was successfully appointed in July 2023 to work with the Drugs and Alcohol team to deliver the Harm to Hope strategy.

#### **4.7 Community Safety**

The council have received a Serious Violence Fund since 2018-19 to allocate against projects and services which meet the strategic priorities of the Serious Violence Strategy, managed by the Violence Reduction Unit. The Unit forms part of a 'hub and spoke' model, with a Strategic Violence Reduction Unit operating across Avon and Somerset.

The total fund for 2022-2023 was £533,706.00 and included a 12-month uplift specifically for a 'teachable moments' programme aimed at young people at risk of exclusion from school. The funds have also paid for a continued "navigator" support service at both Taunton and Yeovil A&E departments for those at risk of violence and a greater range of youth diversionary activities in our communities, such as Yeovil Boxing Club, SASP sports mentors and a "new beginnings" program in Mendip.

In addition, following the tragic murder of Sarah Everard in March 2021, the government funded North Somerset and Somerset Council's Safer Streets program £317,694 during 2022, to hear the voice of women around this issue and help promote safety in public spaces. This resulted in education programs in local schools, public engagement, and the funding of a new community engagement bus that is due for launch Autumn 2023. More information can be viewed on the landing site [www.saferstreetsawareness.co.uk](http://www.saferstreetsawareness.co.uk).

#### **4.8 Domestic Abuse**

During 2022/23, Public Health recommissioned the specialist domestic abuse service for the county (known as Somerset Integrated Domestic Abuse Service), this has been split into 5 separate lots to help better meet the needs of families affected by domestic abuse, and help the Council meet the requirements of the Domestic Abuse Act 2021. The domestic abuse element of the Children Social Care Family Safeguarding service was included as part of this. Four of the five contracts commenced 1st April 2023, which are for a five-year term. The remaining fifth contract (for counselling to adults and children in safe accommodation) is due to start 1st October 2023.

A domestic abuse communications campaign is ongoing, with a significant aim being to develop and publicise a series of 30 second awareness raising videos, for television and social media. These are now online and their accompanying publicity campaign starts in September 2023.

Somerset Council public health coordinates and manages the statutory domestic homicide review (DHR) process for the Safer Somerset Partnership and since April 2022, there have been 11 notifications that have led to a statutory review.

### **5. Wider Determinants of Health**

#### **5.1 Air Quality and Climate Change**

With partners in the council, air quality monitors have been installed in five locations: North Street and East Reach in Taunton, Sherborne Road and Bond Street in Yeovil and Portway in Frome.

These monitors provide in near real time accurate data on levels of nitrogen oxide and dioxide, ozone, and particulates (PM<sub>10</sub>, PM<sub>2.5</sub> and PM<sub>1</sub>). These monitors supplement the nitrogen dioxide diffusion tube monitors that have been used for many years to measure NO<sub>2</sub> based on monthly and yearly averages, the air quality monitors in Bridgwater funded through the Hinkley Point C work, and DEFRA's rural background site in South Somerset.

These monitors provide much more detailed data and for the first-time particulate data in these urban areas. They help inform action plans to improve air quality, particularly in the Air Quality Management Areas in Taunton and Yeovil. In future the monitors may be moved to other locations or be used for mobile application, such as monitoring exposure of car occupants, especially professional drivers, to exhaust pollutants.

## 5.2 **Health of the Homeless Population**

The Health Inequalities team, working closely with the NHS and VCFSE sector, have achieved a great deal over the last year, particularly in relation to Homeless Health.

At the NHS Parliamentary Awards held in London in July, to coincide with the NHS 75th birthday, 'Homelessness Health in Somerset - the Homeless and Rough Sleeper Nursing Service and Salaried Inclusion Health GP's (NHS)' was a winner in the national Health Equities category.

This multi-disciplinary approach has been achieved through close collaboration between Public Health and the NHS. Together we have secured additional NHS funding for a specialist Mental Health offer for those experiencing homelessness.

In August 2023 we secured funding approval from the Population Health Transformation Board to both maintain the existing provision and expand the GP offer into Sedgemoor area plus further service development and training within the Homeless and Rough Sleeper Nursing Service for another 18 months.

## 5.3 **Health of Displaced People**

Inclusion Health groups have been identified as a key priority within Public Health; Displaced People including asylum seekers, refugees and vulnerable migrants fall into this category.

### **Asylum**

A contingency accommodation was stood up in North Petherton in November 2022; at any given time, up to 255 asylum seekers can be accommodated in this setting. At present, there are over 35 nationalities. Public Health have worked closely with health partners in the system to provide a prompt health response for new arrivals. This includes health checks delivered at the hotel, coordination of GP registration access five Bridgwater practices, immunisations for school aged children, and COVID and Diphtheria prophylaxis for adults, regular health visitor and maternity services presence, sexual health support and mental health provision. In addition, regular co-production takes place with residents from the hotel and other refugees to ensure their voices are included in work being commissioned, support access into health services and improve health literacy, the overall aim to increase confidence and autonomy for these individuals.

Food and nutrition is a source of concern for many professionals, volunteers and individuals living in the hotel. A letter advocating for a change in Healthy Start eligibility and more transparency around the nutritional value of the food provided by Home Office contracted suppliers is being led by Somerset Public Health, and this has gained regional and national attention; over 12 Local Authorities and ICBs across the South West are signatories, and Local Authorities across London are

formulating a similar response in recognition of this effort. The finalised letter will be sent to the Department of Health and Social Care and the Home Office for attention and action.

Appropriate and adequate mental health provision continues to be a priority for this cohort, given the high level of trauma likely faced by most individuals in the setting. Regular multi-agency meetings are held to coordinate the mental health response. Most recently, Rethink Mental Illness, Diversity Voice and Mind in Somerset have been commissioned to provide Wellbeing Practitioners across six Welcome Hubs in the county and the hotel setting; the aim will be to provide emotional wellbeing support and signposting, ensuring sustainability across the county for any asylum seeker or refugee with a mental health need.

### **Planned Resettlement Schemes**

An oral health improvement pilot has commenced in collaboration with Rodericks Dental Partners, Public Health and the Displaced People Service. The pilot is initially aimed at Afghan and Syrian families with culturally appropriate, targeted oral health messaging; the aim will be to improve oral health knowledge and assist with triaging into Dental Services if needed. Once evaluated, it is hoped this model will be replicated across the county in Welcome Hubs and other appropriate settings to support Displaced People and possibly other Inclusion Health groups.

In addition to asylum contingency accommodation, the government mandated widening of Asylum Dispersal which will also see a further 399 asylum seekers move into Somerset by December 2023. Furthermore, families will continue to arrive through planned Resettled pathways as well. The health system is therefore looking to establish a more sustainable solution to support the health needs of this cohort across the county by working closely with the NHS, VCFSE, and other partners to build system knowledge and confidence of Displaced People through workforce development, and to improve the data and intelligence available for Displaced People to understand the needs further.

#### **5.4 Licensing and Health**

In recent months we have rolled out a new tool called Alcohol Harm Index (Formerly HaLO tool) to inform the alcohol licensing process. HaLO was an analytical support package originally developed and piloted by Public Health England, to help public health teams fulfil this role. The purpose of the Alcohol Harm Index is to enable Somerset Council to consider all alcohol-related health harms when considering a licensing application, based on the Licensing Act 2003. It is designed as a one-stop resource with links to various local data sources to provide supportive evidence linked to alcohol related harm. The tool provides an overall comparative county wide “harm ranking” at a Lower-layer Super Output Area level (LSOA). As Somerset Council has consulted on its new Licensing Policy,

the work on the Alcohol Harm Index and other public health advice has been fed into the consultation.

## 5.5 **Behavioural Science**

The Behavioural Science Unit delivered two main projects targeting wider determinants. They delivered Motivational Interviewing and behaviour change techniques training to the Debt Advice service at Citizen's Advice to increase the proportion of clients returning paperwork. The evaluation showed an increase of 10 percentage points in the proportion of clients completing paperwork, which is necessary to receive debt support. The Debt Advice team provided very good feedback on the training and support the Unit provided to help them with this issue.

A larger piece of work is the Innovation in Health Inequalities Project (InHIP) to identify barriers to accessing health services and receiving treatment for cardiovascular disease in homeless and rough sleeper populations. The Unit conducted four interviews and focus groups with professionals working with homeless and rough sleeping adults, as well as 13 interviews with adults who are homeless or rough sleeping. Findings informed the InHIP steering group decision-making on interventions to deliver to address the barriers, as well as contributing to the Homeless Health Needs Assessment.

## 6. **NHS Population Health**

### 6.1 **Healthcare Public Health and Population Health Management**

Seven workstreams have been taken forward under the Population Health Transformation Board to build up our system capacity and capability in Population Health Management. The workstreams are:

1. Align Commissioning, Policies and Finance (Enabling workstream)
2. Tackling Healthcare Inequalities (Delivery Programme)
3. Priority Population Health Programmes (Delivery Programme)
4. Developing use of Data and Intelligence (Enabling Workstream)
5. Healthy Workforce Programme (Delivery Programme)
6. Development of Population Health Management Through Localities (Enabling Workstream)
7. Ambassador Programme (Enabling Workstream)

A piece of work to identify key clinical priority areas was undertaken using Global Burden of Disease Data. The top six risk factors impacting on in Somerset are:

Smoking

High fasting plasma glucose

High body-mass index  
High systolic blood pressure  
Alcohol use  
High LDL cholesterol

Based on the work on clinical priorities, high blood pressure has been chosen as a priority work area and is being taken forwards in a 'Take the pressure off' campaign to address winter pressures by increasing hypertension case finding. It is estimated there are about 4,5000 undiagnosed people in Somerset with hypertension and they are at greater risk of poor outcomes and longer hospital stays.

## 6.2 **Cardiovascular Disease Secondary Prevention**

The Annual Director of Public Health Report for 22/23 has been completed on cardiovascular disease and provides a high-level summary of the key cardiovascular diseases in Somerset, the key risk factors within the population and a set of recommendations to take work forwards in the area.

Project work over the last year has focused on key cardiovascular diseases: hypertension (high blood pressure), atrial fibrillation (irregular heart rhythms) and dyslipidaemia (a condition where your blood has unhealthy levels of lipids, such as cholesterol and triglycerides). Work on hypertension has now been adopted as a population health flagship project so is covered in more detail in that section. For atrial fibrillation a small cross system working group has been working on streamlining the process of detection of atrial fibrillation in the population presenting with palpitations who would currently receive 24-hour tapes. A small trial has been completed at French Weir practice and is now moving to an options appraisal for the system. Within the remit of dyslipidaemia, work is on-going to support the whole system change business case as well as smaller targeted projects with PCNs and to address inequalities (InHIP).

## 6.3 **Behavioural Science**

As part of the work on hypertension, last summer the Behavioural Science Unit conducted interviews with individuals who had borrowed a blood pressure monitor from a Somerset library to explore their experiences and any subsequent behaviour changes. Additionally, a survey was developed for individuals to complete after borrowing a monitor. Overall, the results provided positive feedback on the blood pressure monitor borrowing scheme, with some individuals indicating intentions to change health behaviours, as well as reporting health improvement behaviours such as quitting smoking as a result of their blood pressure reading.

## 6.4 **Healthcare Inequalities**

Health inequalities are avoidable, unfair and systemic differences in health across populations and between different groups in society.

Last year NHS England launched a national approach to tackle healthcare inequalities called [Core20PLUS5](#), with guidance provided for both adults and children and young people. This targets the 20% most deprived geographical areas in the country ('Core 20'), allows local systems to identify groups who are particularly at risk of poorer outcomes ('PLUS') and asks local systems to target 5 clinical areas requiring accelerated improvement. The Population Health Management Board requested that an Inequalities in Healthcare Group was formed. This started in January 2023 and is a dynamic multi-agency working group which has oversight and assurance over the healthcare inequalities work taking place in Somerset, including Core20PLUS5. Senior Responsible Officers have been identified for each of the clinical areas for adults and children and work is currently underway to benchmark progress in these areas.

Additionally, the Inequalities in Healthcare Group has identified three key priorities for this year. The key priorities for this year are to:

1. Strengthen workforce knowledge of healthcare equity and inclusion health groups.
2. Integrate the data and improve the evidence-base.
3. Actively engage with localities to tackle neighbourhood healthcare inequalities.

The priorities have resulted in the establishment of a bi-monthly Healthcare Inequalities Network for healthcare professionals which has over 50 attendees who can act as 'ambassadors' in their workplace. The network covers thematic topics aimed at increasing awareness of healthcare inequalities, sharing best practice and connecting those passionate about healthcare inequalities.

## **7. Overarching Summary**

7.1 It continues to be a busy time for public health with much of the work being reframed for the team. A new target operating model has been developed during the last year and is being implemented in a phased approach. There are many significant reasons for the implementation of the new operating model, including:

- 1) The indirect impacts of Covid19 are starting to show. Public health skills and expertise are in great demand to help the rest of the system respond.
- 2) The new council offers many opportunities to tackle the wider social and environmental determinants of health. The 'building blocks' for healthy lives, are now within one organisation and public health can provide valuable input and influence into these areas in order to support and maximise opportunities to improve health outcomes for the population of Somerset.

7.2 The public health grant from government has again seen a real time reduction in 2023-24 and an increased number of costs baselined within it. Somerset is one of the lowest funded local authorities for public health in the country, being underfunded by in excess of £13m when compared to the average local authority. Given this position, national cuts to the budget and 11 years of below inflationary increases, the budget is now only able to fund the specialist public health team and mandated public health services. The budget is not sufficient to achieve improvements of the health and wellbeing of the local population. The only way to achieve public health gain is through investment in the specialist public health team and to use their knowledge and skills to influence the budget of the new council and the NHS.