

**Health and Wellbeing 06 March 2019**

**Quarterly Report of the Director of Public Health for Lambeth (October – December 2018)**

**Wards:** All

**Portfolio:** Cabinet Member for Health and Adult Social Care (job-share): Councillors Jacqui Dyer and Ed Davie

**Report authorised by:** Fiona Connolly: Acting Strategic Director for Adults and Health

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**Report summary**

This report is the quarterly report of the Director of Public Health to the Lambeth Health and Wellbeing Board and the NHS Lambeth Clinical Commissioning Group for October – December 2018.

**Finance summary**

None arising from this report.

**Recommendations**

1. The Board is asked to note the report.

## 1 CONTEXT

- 1.1 This is quarter's report highlights some of seasonal health improvement work going on in Lambeth, as well as the longer term action underway to tackle food poverty which seeks to address some of the health inequalities we see in the borough. Continuing the theme of health inequalities from our [short film](#) developed with ITN and the Royal Society of Public Health, our 2018 Annual Public Health Report (due out in early 2019) will also focus on health inequalities.
- 1.2 The publication of the Global Burden of Disease provides an interesting insight into the causes of morbidity and mortality in Lambeth. In particular, it highlights once again the gradient of ill-health associated with deprivation and disadvantage. It also notes how many of the causes of ill health (morbidity) differ from the causes of mortality, and the importance of looking at both of these to improve the quality of life for our local population.

## 2 PROPOSAL AND REASONS

### Health Improvement



#### **Eat, Pace, Plan Campaign - "Tis the season to be jolly!"**

Lambeth Council is proud to be supporting this year's **Eat, Pace, Plan** campaign helping residents stay safe when drinking this Christmas. The campaign will share 15 useful tips in relation to eating beforehand, pacing and spacing drinks, and getting home safe.

To find out more, please [click here](#).



#### **Identification and Brief Advice - Don't Bottle It Up**

It is estimated that in Lambeth around 25% of residents binge drink at least one day a week, 33.8% of adults drink more than the recommended 14 units per week, and for every 100,000 hospital admissions, 836 are alcohol related. All of these statistics are significantly higher than both the national and London averages.

- 2.1 In response to this, Lambeth Public Health have commissioned a digital Identification and Brief Advice (IBA) platform called 'Don't Bottle It Up' (DBIU). By answering 12 simple questions on drinking habits, users can identify the risk posed to their health. Upon completion users receive advice and, where appropriate, are signposted to local face to face support. On average, the test should take only two minutes to complete.
- 2.2 DBIU is due to go live in January, coinciding with 'Dry January', and will be supported with a broad communications campaign. The new service will be promoted by a range of social media platforms which will target Lambeth residents who are most likely to be increasing risk drinkers throughout key promotional periods. The service will also be promoted via plasma screens in both the Lambeth Civic Centre and GP surgeries in the borough. We are also exploring using the GP text message service (MJOG) to promote Don't Bottle It Up and encourage patients, particularly those which evidence

suggests may be at greater risk, to assess their alcohol consumption and takes steps to reduce it or seek support from their GP.

2.3 To take the test yourself please [click here](#).

### **Lambeth Healthy Pupils Capital Fund (Sugar Levy)**

2.4 The Soft Drinks Industry Levy (Sugar Levy) took effect from April 2018. The allocation for Lambeth was £349,915. The Department for Education gave local authorities the flexibility to distribute the funding to schools for capital use based on the health and wellbeing needs and priorities in their communities. In London, a commitment was made to encourage the funds to be used towards tackling childhood obesity, and this approach was further endorsed in Lambeth. Additionally, Lambeth Public Health was able to secure support from Guy's and St Thomas' Charity, Trees for Cities, and Crystal Palace Football Foundation to partner with the local authority and to boost Lambeth's allocation through match funding, both in cash and in kind.

2.5 Lambeth Public Health and Education worked together with the schools. All local authority maintained and voluntary aided primary and secondary schools in Lambeth were encouraged to put in an application. Individual schools were able to bid for up to a maximum of £10,000.

2.6 A total of 67 schools applied and all were successful, meaning that more than 23,000 Lambeth pupils will be able to benefit from the facilities the fund has provided. The most common items requested by schools were:

- Cooking equipment;
- Playground equipment & markings;
- Water fountain and coolers;
- Gym equipment; and,
- Edible garden.

2.7 Overall, schools with the greatest needs have benefited most from the funding and schools are using the money for things that can help contribute to tackling childhood obesity.

2.8 All schools said they had either implemented or were committed to implementing the "Daily Mile" programme, and as part of the process schools were encouraged to continue to progress with their Healthy Schools accreditation.

2.9 All secondary schools that applied and some SEN schools are being offered support from Crystal Palace Football Foundation to run health and wellbeing initiatives.

2.10 Lambeth is one of the only boroughs taking this comprehensive approach to maximising the local impact of the Sugar Levy and we have had requests from other boroughs and PHE to share how we have gone about it.

2.11 Feedback from schools has been extremely positive, some comments received are below:

*".....thanks to all who have made it possible! This is amazing news! This means that we can do even more at our school!!!! (lots of exclamation marks but we are very excited!)"*

*"..... We look forward to putting our plans in place now and we are all sure that the impact on the children's education will be significant."*

*".....the way you organised the funding has helped us to take time to consider what more we could be doing as a school to tackle childhood obesity. This approach really works because it is supportive as well"*

*".....this will make a huge difference for our children."*

2.12 In addition to the positive feedback from schools, this approach has further enabled the building of relationships between the schools and the Local Authority. Some schools who in the past may not engaged with the council around health and wellbeing have done so as part of this process. This will also open more opportunities to work with schools around other important programmes such as the London Healthy Schools Programme and the Daily Mile programme.

2.13 The process has also encouraged joined up work and synergies with other activities taking place in the borough such as the *Let's Get Cooking* Programme funded by the British Dietetic Association. Early in the autumn, a few of our primary schools and four community groups sent staff to receive training around healthy cooking lessons. The programme prepares those attending to gain the necessary skills which could then be used to train other team members, as well as gaining the necessary skills to run breakfast and healthy eating clubs. One of the schools (Bonneville Primary School, who have invested the Sugar Levy money in a new food tech space) sent their staff to attend the *Let's Get Cooking* training so that they can go back and train more members from their school to ensure that the funds from the sugar levy are maximised.

2.14 As part of the ongoing process for the Sugar Levy local implementation, Lambeth Public Health will oversee an independent evaluation to assess the process and impact of the local implementation of the fund on children, schools and parents. This evaluation will take place at the end of the academic year.

## **2.15 Lambeth tops London rankings for action to address food poverty**



A new report from the London Food Poverty Campaign at Sustain has recognised Lambeth council for taking an effective approach to address food poverty for residents in Lambeth.

### **Beyond the Food Bank**

The annual Beyond the Food Bank report monitors what London boroughs are doing to avert or ease the causes of food poverty and improve the local food system. This year's edition, which has seen the addition of a new measure on 'holiday hunger', awarded Lambeth 'Best Overall Borough' in this year's Beyond the Food Bank league table at a launch event on 5 November at City Hall.

- 2.16 Not only did Lambeth scoop the top spot in relation to addressing Food Poverty, but the Borough also climbed up the rankings in The Good Food for London report which charts the progress made by London's boroughs in making London's food system healthier and more sustainable.
- 2.17 The **London Food Poverty Report** (and the **Good Food for London report**), are yearly publications by *Sustain: the alliance for better food and farming* that advocates for food and represents over 100 organisations working at international, national, regional and local levels.
- 2.18 Both reports use league tables to showcase how well London's Boroughs are doing around a set of food-related criteria, and the actions boroughs are taking to reduce long term food poverty and improve the food system.
- 2.19 The Food Poverty Report is in its third year of publication. In 2016 Lambeth was ranked 1<sup>st</sup> as the London Borough leading the way in tackling food poverty. In 2017, the borough ranked 2<sup>nd</sup> and in 2018, Lambeth has once again ranked joint first. The first place is shared with the borough of Tower Hamlets.
- 2.20 The indicators covered by 2018 Food Poverty report include:
- Local actions to increase uptake of Healthy Start vouchers;
  - Promotion of breastfeeding to boost the health of infants and mothers;
  - Actions to harness the value of Children's Centres;
  - Ensuring low-income families have adequate access to childcare;
  - Ensuring children have access to food 365 days a year;
  - Borough actions to become a London Living Wage employer and promotion of the London Living Wage;
  - Ensuring all residents have physical access to good food;
  - Supporting and enhancing provision of meals on wheels;
  - Development of a local action plan to tackle food poverty; and,
  - Supporting financial advice services.
- 2.21 For copies of previous years' reports see the Sustain website:  
<https://www.sustainweb.org/foodpoverty/profile/>

**Lambeth cited as an example of good practice for Breastfeeding - helping to ensure the best start for babies**

- 2.22 Lambeth is now a fully accredited Unicef Baby Friendly Borough. The Unicef UK Baby Friendly Initiative (BFI) is an externally evaluated programme for improving infant feeding and parent-infant relationship building, and the health and wellbeing outcomes of all infants.
- 2.23 Implementation of the BFI standards is recognised by the Department of Health, Public Health England and the National Institute for Health and Care Excellence, and helps ensure good quality support is available across the community for all mothers and babies, whether breastfeeding or bottle feeding.
- 2.24 The approach to improving breastfeeding practice taken in Lambeth has been cited as example of good practice by *Sustain*– The alliance for Good Food.
- 2.25 The journey towards achieving BFI status began with a business case from Public Health, outlining the potential benefits of the BFI approach for Lambeth, as well as a proposal for implementation towards accreditation. The proposal was endorsed and commitment made by the local authority and NHS to start the process of Lambeth becoming a UNICEF Baby Friendly Borough.

- 2.26 Strategic oversight and support from a range of stakeholders including statutory, voluntary and community helped with the implementation process. Breastfeeding is an integral part of the healthy nutrition and healthy weight pathway in Lambeth, as well as the better start pathway. A systematic approach was taken for the implementation which included building the capacity of multi-agency staff who are in contact with pregnant women and infants to promote and provide practical and timely support for the initiation and continuation of breastfeeding.
- 2.27 The approach Lambeth has taken to achieve full BFI status has been recognised as good practice. Success has been mainly due to the statutory and voluntary sector working together to achieve the different stages of the Baby Friendly Accreditation. Taking an evidence based approach in understanding local needs supported developing targeted interventions. Building local capacity and support through the establishment of a breastfeeding coordinator, a network of breastfeeding peer support workers to support mothers to breastfeed, and ensuring consistency of messages through training and capacity building of the workforce.
- 2.28 The Lambeth Case Study can be access via the link below:  
<https://www.sustainweb.org/gffl/?m=1&b=0&y=2018&v=2>

### **Health Services**

- 2.29 Young Peoples Drug, Alcohol and Sexual Health Service.
- 2.30 The DASH young people's drugs, alcohol and sexual health service celebrated its first birthday in November. DASH sexual health and wellbeing support workers run regular pop-up clinics in a range of community venues across the borough where young people can seek advice and information, support, testing, treatment or contraception. The service is for anyone living or going to school/college in Lambeth.
- 2.31 Young people can access the service directly by attending one of the clinic sessions, alternatively, professionals may refer directly into the service where specific support is required. For further details or a referral form visit [www.brook.org.uk/dash](http://www.brook.org.uk/dash)

### **National HIV Testing Week**

- 2.32 The RiSE partnership, our LSL Sexual Health Promotion Service, were active again using it as another opportunity to raise awareness of the importance of HIV testing, particularly in BAME communities. HIV testing and one to one engagement took place at Lambeth College, Brixton Library and Brixton Soup Kitchen.



2.33 For more information <https://www.startswithme.org.uk/>

### **Health Intelligence**

#### **Global Burden of Disease (GBD) Study**

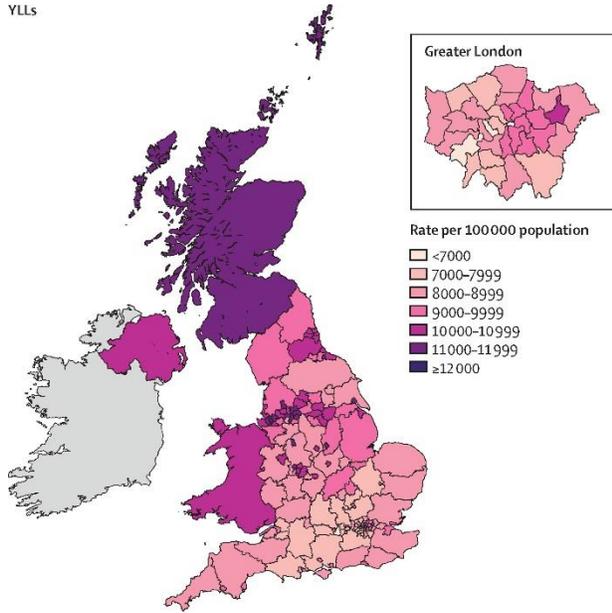
2.34 The GBD study is a comprehensive observational study describing the main causes of deaths and disease (long term conditions that people live with), injuries and risk factors attributed to these at a global, national, regional level and in the case of the UK – now available at a local (borough) level.

2.35 The Lancet published a systematic analysis of the UK and 150 English local authorities GBD study 2016 ([link to Lancet paper](#)). The main findings from this were that in the UK the leading causes of death (measured as years of life lost - YLL) are ischaemic heart disease, lung cancers, cerebrovascular disease and chronic obstructive pulmonary disease. There was a twofold difference in deaths from these, with higher levels in deprived local authorities. Improvements in life expectancy and YLLs has slowed from 2010 compared to the period 1990-2010. This study also shows that morbidity makes an increasing contribution to the overall burden of disease compared to mortality. The main causes of ill health were low back & neck pain, skin disorders, migraine, depressive disorders and sense organ disease.

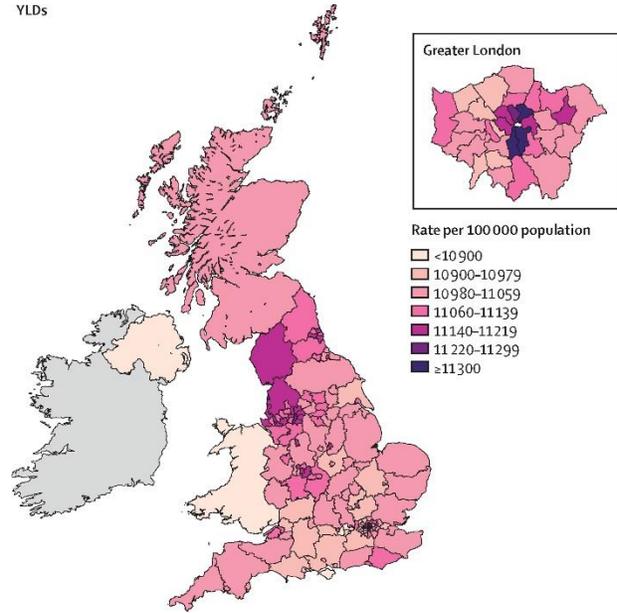
2.36 The map below from the Lancet paper shows that Lambeth has a greater burden of morbidity compared to other London boroughs.

**Figure 1 All-cause age standardised YLL and YLD per 100,000 population by UK country and English upper Tier Local authorities', 2016 (i)**

YLLs

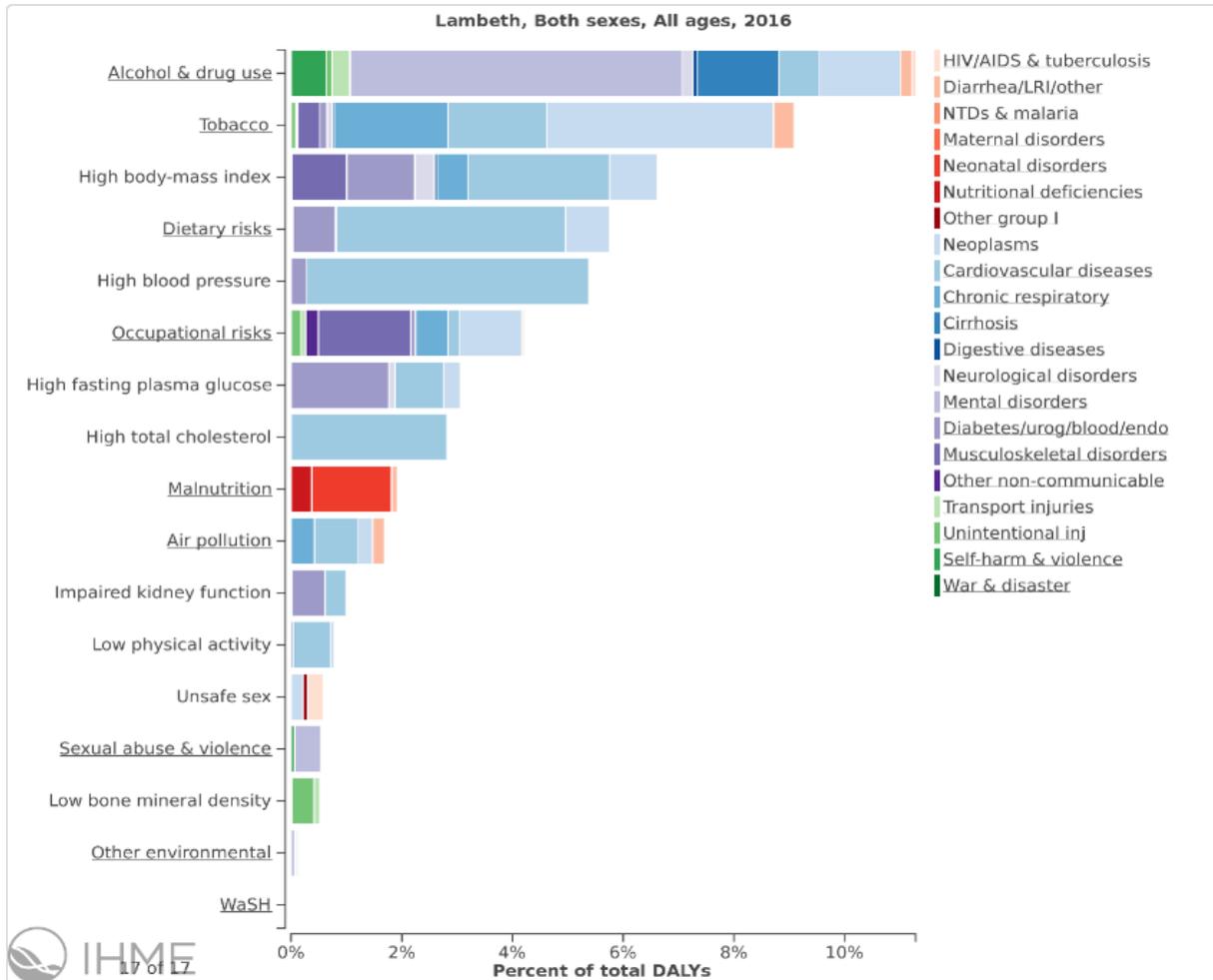


YLDs



### 2.37 Summary of Lambeth GBD data

**Figure 2 Attributable risk factors for current burden of disease (% of all disability adjusted life years - DALYs) in Lambeth 2016 (Source: Institute for Health Metrics and Evaluation)**

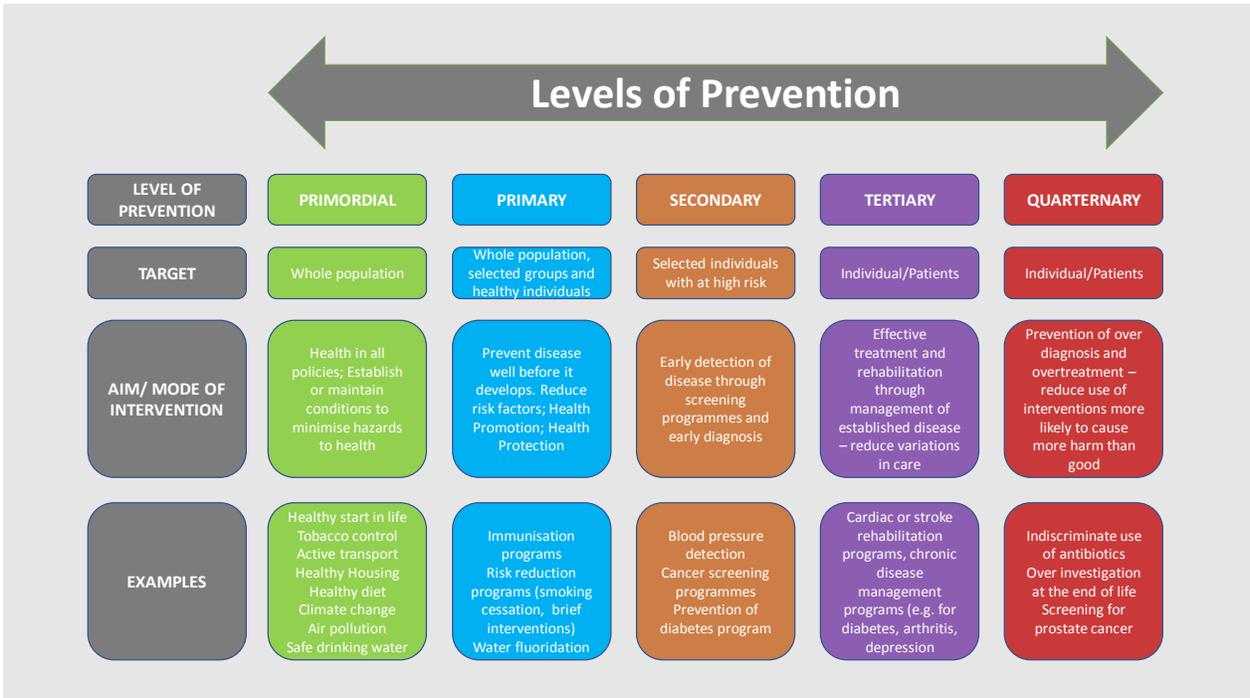


- 2.38 Overall cancer is responsible for the highest proportion of deaths (30.6% of all deaths), followed by cardiovascular deaths (20% of all deaths). Deaths from liver related conditions (liver cancer, alcohol and infective hepatitis) are worsening as are drugs related deaths. The main conditions that people in Lambeth are living with are mental illnesses (24.8% of all YLDs) including substance use, followed by musculoskeletal disorders (22.2% of all YLDs, particularly back and neck pain).
- 2.39 The key preventable risk factors for Lambeth include alcohol & drug misuse, smoking, high body mass index, dietary risks, high blood pressure, and occupational risks.

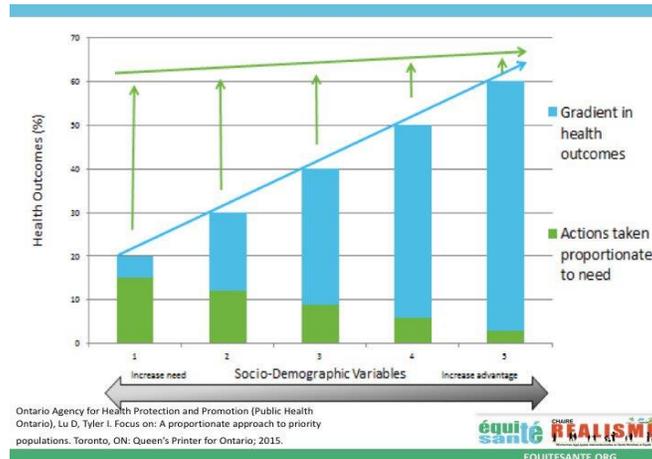
**Implications for actions**

- 2.40 There is a need to refocus and strengthen prevention across all levels both within local government and health & social care systems. Figure 3 provides a framework for looking at population and individual health and wellbeing through a prevention lens. This framework however needs to take into account differing distribution of risk, health outcomes and need for preventive, treatment and care services of the population (i.e. an equity lens – see figure 4).

**Figure 3 – levels of prevention with a focus of the target population, aims & mode of interventions, and examples**



**Figure 4: Schematic illustration of proportionate universalism (source: Ontario Agency for Health Protection and Promotion (Public Health Ontario), Lu D, Tyler I. Focus on: A proportionate approach to priority populations. Toronto, ON: Queen’s Printer for Ontario; 2015).**



## Health Protection Antibiotic Awareness week



To mark antibiotic awareness week the musical “*The Mould that Changed the World*”, was brought to Oval House Theatre by Lambeth Public Health. The event was attended by more than 300 people in three free “sell out” performances on Sunday 18<sup>th</sup> November.

It tells the story of the discovery of the penicillin which saved so many lives in the Second World War and explores the challenge of antimicrobial resistance, which is now a global threat as many common infections are becoming resistant to treatment.

- 2.41 We hope that local schools may be interested in putting on their own versions of the musical using the [resource pack available](#) – it has proved a powerful way of communicating with the public. Participants learnt new information about only using antibiotics when needed and that resistant infections could be passed directly between people.
- 2.42 To learn more about what you can do to protect antibiotics sign up to be an “[antibiotic guardian](#)”.

## Seasonal Flu

- 2.43 Preventing flu infection through vaccination contributes to avoiding secondary bacterial infections. This can help reduce winter pressures on the NHS, as well as contribute towards decreasing antibiotic resistance.
- 2.44 Eligibility for NHS free flu vaccinations is same as last year, with extension to include school year 5 children (9 year olds). Frontline social care workers continue to have access to free flu jabs via community pharmacies across London.
- 2.45 A new aTIV vaccine is recommended for 65 year olds and over. PHE advises that this is the most effective vaccine for this group.
- 2.46 There is evidence that flu is starting to circulate in the community as activity indicators approach baseline threshold levels. The Department of Health & Social Care has issued an alert on the prescription of antiviral medicines by GPs.

2.47 Lambeth Public Health continues to facilitate the partnership across the local health economy and monitor vaccination uptake rates. So far this season, the rate of vaccine refusal has decreased compared with the last season. However, overall vaccination uptake rates in Lambeth are lower than last year. Although flu vaccination runs until the end of March, reporting is planned to close on January 31<sup>st</sup>.

### **3. FINANCE**

3.1 None arising from this report.

### **4. LEGAL AND DEMOCRACY**

4.1 There are no legal implications.

### **5. CONSULTATION AND CO-PRODUCTION**

5.1 Not applicable.

### **6. RISK MANAGEMENT**

6.1 Not applicable.

### **7. EQUALITIES IMPACT ASSESSMENT**

7.1 Not applicable.

### **8. COMMUNITY SAFETY**

8.1 Not applicable.

### **9. ORGANISATIONAL IMPLICATIONS**

#### **Environmental**

9.1 None.

#### **Staffing and accommodation**

9.2 None.

#### **Procurement**

9.3 None.

#### **Health**

9.4 None.

### **10. TIMETABLE FOR IMPLEMENTATION**

10.1 Not applicable.

## AUDIT TRAIL

### Consultation

Name/Position	Lambeth directorate / department or partner	Date Sent	Date Received	Comments in paragraph:
Councillor Jacqui Dyer	Cabinet Member for Adults and Health (job-share)	19.02.19		
Councillor Ed Davie	Cabinet Member for Adults and Health (job-share)	19.02.19		
Fiona Connolly, Strategic Director	Adults and Health	19.02.19	19.02.19	
Andrew Pavlou, Legal Services	Legal and Governance	19.02.19	20.02.19	
Pete Hesketh, Finance	Finance and Investment	19.02.19	27.02.19	
Adrian Bentley, Democratic Services	Legal and Governance	19.02.19	27.02.19	

## REPORT HISTORY

<b>Original discussion with Cabinet Member</b>	
<b>Report deadline</b>	22.02.19
<b>Date final report sent</b>	27.02.19
<b>Part II Exempt from Disclosure/confidential accompanying report?</b>	No
<b>Key decision report</b>	No
<b>Date first appeared on forward plan</b>	N/A
<b>Key decision reasons</b>	Not applicable
<b>Background information</b>	
<b>Appendices</b>	