

Report to the Public Health Partnership Board 26 June 2006

LAA Healthy Communities Enhanced Public Health Programs Progress Report and Role Out Review

Purpose

This report provides a brief update on progress with the development of the Enhanced Public Health Programs (EPHP) for target neighborhoods as part of the LAA Healthier Communities Three Year Plan and seeks the partnerships views on options to revise the role out of the program.

Progress

A summary of progress for each of the Enhanced Public Health Programmers (EPHP) is set out at Appendix 3. The programs are being rolled out in three phases with neighbourhoods being grouped into clusters to ensure joined up local delivery and efficiency. To summarise:

- **Phase 1** (the trailblazer areas) - Business cases in place, delivery commenced April 06
- **Phase 2** - Development of business cases commenced April 06, delivery due to commence April 07
- **Phase 3** - Development of business cases due to commence October 06 with delivery commencing in October 07

The EPHP working group is coordinating this work and is currently working to develop a performance management framework for the whole program.

Review of Role Out

The key barrier to the delivery of the neighbourhood based EPHPs identified through the LAA review process is the lack of resources to support the development and role out of the programs. In the light of this it has been suggested that the partnership may wish to reconsider the role out of the program.

A table setting out the current agreed program is at Appendix 1. In considering any revision to the program it is important that the partnership take into consideration that:

- Work on Phases 1 and 2 have already commenced
- Phase three neighborhoods will be aware that the program is due to roll out to their areas in October 2006
- Neighborhoods have not been allocated to Phases based on need. Rather they have been allocated according to the expected length of time to build the foundation and relationships within the communities before beginning the business case development process. For example whilst the Flower neighborhood ranks as the 4th most deprived it has been allocated to Phase 3 as it has significantly less well developed community infrastructure than other

neighborhoods (Rankings for the 36 targeted neighborhoods are asset out at Appendix 2).

- Any significant amendment to the program will need to be endorsed by Sheffield First health and Well-being Partnership Board and renegotiated with central government through the LAA review process (Government office are aware that this may be a possibility).

In the light of the above the board is asked for its recommendations on the following options to amend the role out of the EPHP for Neighborhoods:

- Option A – No change
- Option B – Delay role out of Phase 3
- Option C – To substantially revisit the role out of the program.

Additional suggested minor amendment to role out order

South East PCT have requested that the Tinsley, Darnall and Acres Hill cluster be brought forward to Phase 2 (from Phase 3) to enable coordination with current work in this area including the development of the Darnall and Tinsley Community Action Plans. To enable this they have asked that the Norfolk Park and Arbourthorne cluster be put back to Phase 3.

Recommendation: Tinsley, Darnall and Acres Hill to be brought forward to Phase 2 and Norfolk Park and Arbourthorne to be put back to Phase 3

Appendix 1 – Phasing of Target Neighbourhood Clusters

Cluster Area	Trailblazer (Start April 05)	Phase Two (Start April 06)	Phase Three (Start Oct 06)
1.	Sharrow (plus Abbeydale Rd) T Highfield T	Broomhall 2	
2.	Abbeyfield T <i>Burngreave T</i> Fir Vale T Firshill T Woodside T		
3.	Langsett T Netherthorpe T Upperthorpe T		
4.	Wybourn T	Manor 2 Woodthorpe 2 Park Hill 2	
5.		City Centre 2	
6.		Middlewood (Winn Gardens) 2	
7.		Southey Green 2 Longley 2 New Parsons Cross 2 Old Parsons Cross 2 Shirecliffe 2	
8.		Lowedges 2 Batemoor/Jordanthorpe 2	
9.		Norfolk Park 2 Arbourthorne 2	
10.			Gleadless Valley 3 Hemsworth 3
11.			Tinsley 3 Darnall 3 Acres Hill 3
12.			Flower 3 Shire Green 3 Stubbin Brushes 3
13.			High Green (High Green) 3
14.			Hackenthorpe (Scowerdens) 3

Appendix 2 – Health Deprivation Ranking of Target Neighbourhoods

Sheffield has 100 defined neighbourhoods, which the city has used to develop a successful neighbourhoods information system¹ Linked to this system, Sheffield has previously carried out extensive research into measuring health inequalities across neighbourhoods².

Each neighbourhoods has been ranked against each of the indicators using comparative quintiles. This information was put together in the form of a quilt. The quilt is a visual tool, which clearly shows a group of neighbourhoods which consistently appear in the most deprived quintile and above average quintile across the indicators.

Neighbourhoods have been ranked according to how often they featured in the most deprived quintiles and above average quintile and the third with the highest number were identified.

The final list of neighbourhoods to be targeted for enhanced public health programmes through the local area agreement are detailed below. According to the Census 2001, the total population of Sheffield is 513,234, the neighbourhoods identified below total 187,220, which equates to 36.5% of the total population.

Neighbourhood	Population	Neighbourhood	Population
1. Old Parsons Cross	9,336	19. Netherthorpe	2,789
2. Arbourthorne	6,548	20. Fir Vale	7,410
3. Manor	8,753	21. Firs Hill	1,845
4. Flower	2,619	22. Shire Green	11,173
5. Wybourne	6,252	23. Highfield	4,179
6. Woodside	3,062	24. Abbeyfield	2,818
7. New Parsons Cross	5,455	25. Woodthorpe	5,264
8. Brungreave	3,836	26. Tinsley	4,198
9. Darnell	7,182	27. Acres Hill	3,154
10. City Centre	2,673	28. Sharrow	8,072
11. Norfolk Park	5,613	29. Shirecliffe	4,449
12. Lowedges	6,156	30. Hemsworth	4,111
13. Park Hill	2,554	31. Broomhall	5,277
14. Gleadless Valley	6,193	32. Hackenthorpe (Scowderden)	5,810 2,967
15. Batemoor/Jordanthorpe	4,160	33. Uppertorpe	3,262
16. Southey Green	5,707	34. Middlewood (Wyn Gardens)*	9,561
17. Stubbin Brushes	4,222	35. High Green (High Green)*	4,679
18. Longley	5,881	36. Langsett**	

*These neighbourhoods are included due to the significant pockets of health inequalities within the total area.

**This neighbourhood is included as it forms part of the 'natural neighbourhood' of Netherthorpe and Uppertorpe

¹ This system provides an in depth analysis of neighbourhoods focusing on a range quality of life aspects. The system is managed by Sheffield City Council.

² Basket of Indicators, Sheffield NHS Health Informatics Service, 25/05/04

www.sheffieldfirstforhealth.net/healthcity/docs/sffhbasketreport.pdf

Appendix 3 - Neighbourhood Enhanced Public Health Programs Update

PHASE 1 (Trailblazer Areas) (commenced April 05)

Burngreave (lead Gary McCulloch, Tel: 2716276)

(including: Abbeyfield, Burngreave, Fir Vale, Firhill And Woodside)

- EPHP produced and agreed
- Community partnership in place (linked to the Burngreave New Deal for Communities)
- Priority areas for action identified: Diabetes, Cancer, Respiratory Disease, Sexual Health
- Reaching Communities Program Stage 1 bid agreed
- New deal for communities proposal rejected, working to overcome

Netherthorpe, Uppertorpe and Langsett (Lead: Louise Brewins, Tel: 226 4615)

(Including: Langsett, Netherthorpe and Uppertorpe)

- EPHP produced and agreed
- CHILDREN AND FAMILIES: Funding for Family Support worker post secured; Big Lottery Fund application submitted but unsuccessful
- BME: Language support network being established; Development/promotion of resources and materials for practices; ICD&H courses being commissioned and participants being recruited and Dedicated Public Health worker appointed to take this forward.
- OLDER PEOPLE: Community matrons appointed and started in post; Funding secured to support Healthy Ageing campaign; Strength & Balance training commissioned
- CHRONIC DISEASES: Funding secured to develop Pulmonary Rehabilitation Clinic; Agreement reached on stop smoking focus around community groups; Recruiting Heart Failure Nurse and Cardiac Rehabilitation Nurse
- Unable to progress any further until NRF contracts signed off

Sharrow (Lead: Joanna Rutter, Tel: 226 3401)

(including: Sharrow and Highfield (plus Abbeydale Rd)

- EPHP produced and agreed
- Health and Wellbeing information opened October 2005
- Diabetes Drop in started in ShipShape April 2006
- Community based drop in stop smoking service started. Meeting with John Soady booked to secure additional support to contribute to neighborhood targets
- Area being extended to include Broomhall (see phase 2 below)
- Unable to progress any further until NRF contracts signed off

Wybourn (Lead: Jackie Gladden, Tel: 226 2443)

(Including: Wybourn)

- EPHP produced and agreed
- Manor Castle Development Trust agreed as accountable body for the NRF Discussions ongoing with local organisations and GP practices about work to be carried out at the Wybourn Well Being Centre
- Successful weight loss group running
- Event held on 12th May on health improvement and on initiatives to support people into work.
- Area being extended to include Manor, Woodthorpe , and Park Hill (see phase 2 below)

PHASE 2 (Commenced April 06)

City Centre (Lead: Louise Brewins, Tel: 226 4615)

(Including city center only)

- Proposal to undertake Health Impact Assessment of City Centre Living to include considering implications of increased city centre living, assessment of revised city centre masterplan, consideration of provision of health services in city centre and measures to mitigate negative impacts of mixed use living (see HIA paper to this meeting)

Broomhall (Lead: Joanna Rutter, Tel: 226 3401)

(Including: Broomhall (plus Springfield estate), extension of Sharow area)

- Initial contacts made with stakeholders and briefings sent out
- Discussions taking place with Area Panel Coordinator regarding how to approach/sell the EPHP
- Awaiting EPHP Working Group to decide what to do with the £50K before methods agreed

Lowedges, Batemoor, Jordanthorpe (Lead: Elaine Muscroft, Tel: 226 3531)

(Including: Lowedges and Batemoor/Jordanthorpe)

- Have identified key stakeholders and stakeholder working group
- Identified health needs and agreed locality priorities
- Updated Health Needs Assessment
- Completed two day Log Frame Training and produced first draft Log frame (Risks Table, Options Appraisal etc)
- Worked through draft Terms of Reference for working group and identified publicity and communications strategy with community/local residents
- Health profile being updated
- Community based drop in stop smoking service started. Meeting with John Soady booked to secure additional support to contribute to neighbourhood targets

Winn Gardens (Lead: Louise Brewins, Tel: 226 4615)

(including part of Middlewood)

- Additional Health Promotion input secured (April – July 2006)
- Six key areas agreed for development (Smoking, Physical Activity, Food and Nutrition, Drugs/Alcohol, Sexual Health/TP and Chronic Diseases)
- August Festival being planned
- Key partner GP practices identified

Tinsley, Darnall and Acres Hill (Lead: Chris Nield 226 2246)

(including Tinsley, Darnall and Acres Hill)

- Propose bring forward from phase 3 to phase 2 as work is currently progressing in the areas and the Darnall and Tinsley Community Action Plans are being developed at the moment, and we want to ensure that the EPHP work is included.

PHASE 3 (Due to commence October 06)

High Green (Lead: Jill Lancaster, Tel: 271 8411)

(Including High Green only)

- Work being undertaken with High Green Forum and North area Panel to build communities capacity to engage with development of EPHP
- Objective 1 funding secured to undertake a health needs assessment and gap analysis to inform the EPHP and to deliver a substance misuse project
- Work being undertaken with the North Area Partnership to identify potential further funding for delivery

Norfolk Parka and Arbourthorne (Lead: Chris Nield 226 2246)

(Including: Norfolk Park and Arbourthorne)

- Propose transferring to phase 3 (in place of Tinsley, Darnall and Acres Hill, see note below), although some preparatory has been done including a Health Needs Assessment for Arbourthorne.

Gleadless Valley and Hemsworth

Due to commence October 06

Tinsley, Darnall and Acres Hill

Due to commence October 06

Flower , Shire Green and Stubbin Brushes

Due to commence October 06

Hackenthorpe (Scowerdens)

Due to commence October 06