

**Appendix 1: Existing commitments within Public Health General Reserves**

Topic	2019/20 £	2020/21 £	Brief description of activity	Impacts
Small Steps	372,000		Support service for children and young people with concerning behaviours (indicative of Autistic Spectrum Disorder and Attention Deficit Hyperactivity Disorder) in Nottinghamshire.	<ul style="list-style-type: none"> <li>• Prevention in the escalation of concerning behaviours; equip families with knowledge and skills to manage concerning behaviours in the home setting; children are better able to learn and achieve if their concerning behaviours are effectively managed; demand for statutory assessment of special educational need is reduced.</li> <li>• Longer term, children can have their needs met within mainstream settings through better understanding, management and communication of their behaviours from a young age and early on in their educational journey, reducing demand for specialist educational support and placements</li> <li>• Referrals for specialist health services, such as community paediatrics, are reduced.</li> </ul>
Future in Mind Health and Justice	56,276	11,862	Resource received from CCGs to support Future In Mind activities related to mental health of young people.	Improved mental health and wellbeing of children and young people.
Kooth Online Counselling service	37,500	187,500	Universal, open access service providing advice, guidance and counselling for young people with mild emotional and mental health concerns, to improve wellbeing and reduce escalation and need for higher cost, specialised services.	Improved mental health and wellbeing of children and young people. Reduced need for higher cost, specialised services.
Children's Health Website	7,500	7,500	Expansion of existing health web site aimed at teenagers (Health for Teens) to provide advice for younger children and families/parents/carers (Health for Kids). Clinically assured interactive content, striking design, games, localised information and signposting, divided between sections on staying healthy, illness, feelings, help yourself and getting help.	Engagement with more families including those who may not engage with traditional services. Increased knowledge of available health and other services and when to use them. Reduced barriers to accessing services leading to earlier intervention and better outcomes. Early identification of need or prevention in relation to weight management, physical activity, smoking, emotional health and other PH priorities

Children's 0-19 PH Service	1,261,290	621,515	The 0-19 service includes delivery of Healthy Child Programme 0-19 (statutory duty of LAs), delivery of mandated reviews and delivery of National Childhood Measurement Programme (NCMP - statutory duty of LAs). These reserves represent slippage from previous years, which will be needed to meet activity profiles in future years.	Services contribute to Council Plan Commitment 1 and 2 and to all priorities of the 2016-2018 Children, Young People and Families Plan Contribution to Public Health outcomes: <ul style="list-style-type: none"> <li>• Maternal smoking status at time of delivery</li> <li>• Breastfeeding initiation and maintenance</li> <li>• School readiness</li> <li>• Proportion of five year old children free from dental decay</li> <li>• Children aged 4-5, children aged 10-11 classified as overweight or obese</li> <li>• Smoking prevalence at age 15</li> </ul>
Family Nurse Partnership Service extension	426,716		Intensive preventive home visiting programme for vulnerable, first-time young parents.	Contributions to Public Health outcomes: <ul style="list-style-type: none"> <li>• Reduced under 18 conception rate per 1,000 population</li> <li>• Lower % all live births at term with low birth weight</li> <li>• Improved breastfeeding initiation and prevalence at 6-8 weeks after birth</li> <li>• Reduced maternal smoking at time of delivery</li> <li>• Improved school readiness in vulnerable groups</li> <li>• Fewer 16 to 18 year olds not in education, employment or training</li> <li>• Reduced incidence of domestic abuse</li> <li>• Fewer hospital admissions caused by unintentional and deliberate injuries in children and young people under 25.</li> </ul>

Schools Health Hub / Tackling Emerging Threats to Children team	204,863	186,000	Staffed Schools Health Hub (SHH), working with CFS as part of the Tackling Emerging Threats to Children team, and also funding for the full time post of 'Child Sexual Exploitation Coordinator' within the TETC team.	Contributions to Public Health outcomes: <ul style="list-style-type: none"> <li>• reduced pupil absence</li> <li>• fewer first time entrants to the youth justice system</li> <li>• reduced smoking prevalence at age 15</li> <li>• reduced conception rate in under 18s.</li> </ul> Contribution to TETC offer including CSE, anti bullying and prevent work with yougn people. Contributes to priorities of the 2016-2018 CYPF Plan and Commitment 1, 2 and 3 of Council Plan.
ASSIST smoking prevention in schools	140,000	150,000	Smoking prevention in schools service, delivered under licence by NCC Youth Service, using a model of peer support within target schools.	Contributions to Public Health outcomes: 2.09 Smoking prevalence at age 15 2.14 reduce smoking prevalence among adults and young people
Tobacco control acute trust smoking cessation activity	227,821	153,000	Smoking cessation support in acute trusts - hospitals and mental health units - to implement new NICE guidance on smoking cessation.	Contributes to PH outcomes:2.14 reduce smoking prevalence among adults and young people
Mental Health First Aid Training	50,000		Mental health first aid awareness raising and training delivery for emergency services and front line staff.	Improve mental health outcomes such as; <ul style="list-style-type: none"> <li>• Increased prevalence of self-reported wellbeing</li> <li>• Reduce the number of suicide deaths</li> <li>• Reduce the rate of self-harm A &amp; E attendances</li> </ul> Impacts include; <ul style="list-style-type: none"> <li>• Promoting good mental health</li> <li>• Preventing future mental health and co-existing physical health problems</li> <li>• Target and develop pathways for those with existing mental health problems to access health improvement interventions.</li> </ul>
Health and Housing Coordinator	23,432		Joint initiative with district Councils to promote health in housing, supported by NHS Pioneer Fund award and previously approved PH reserves until September 2019.	Relevant Public Health outcomes 4.15 Excess winter deaths, all ages and 85 years+ 1.17 Fuel poverty

Seasonal Death Reduction Initiative	3,894		Work with partners approved through HWB; provides advice on keeping warm and support with making grant applications throughout the County, targeted on vulnerable older people, people with long-term health conditions and families with children under 5 who are in fuel poverty.	Relevant Public Health outcomes 4.15 Excess winter deaths, all ages and 85 years+ 1.17 Fuel poverty
Community Infection Prevention and Control Service	96,725	113,319	Additional advice and guidance to care homes, nursing homes and other organisations to help them prevent and control infections. Delivered via Section 75 agreement with CCGs.	Improved health and wellbeing and quality of life of the general population and more specifically reducing risk of harm to people who are more vulnerable to infection due to pre-existing health conditions. Fewer people experience long term disability. Better quality of life, fewer infections and associated deaths. Lower burden on adult social care as a result reduction in avoidable hospital admissions and need for social care at discharge.
Chlamydia Control activities	53,441	45,000	Provision of additional Chlamydia testing service in response to outreach work to address need in the population.	Address failing DRI (Detection Rate Indicator) to support achievement of the Public Health outcome 3.02 Chlamydia Diagnosis Rate (Aged 15 to 24) <ul style="list-style-type: none"> <li>• Facilitates access from different client groups that may not access a test via current outlets (young males)</li> <li>• Manage demand via online access route</li> </ul>
Avoidable injury campaign	90,000		Home safety equipment provision and education scheme to improve home safety in families with young children.	Improved home safety for local families. Reduced inequalities in safety equipment possession and use. Increased parental knowledge, confidence and skills in maintaining safer homes. Reduction in hospital admissions and ED attendances. Reduced short and longer term (disability, scarring, psychological harm) consequences of injuries.

Falls pilot project	89,081		Extension of ASCH developed pilot project seeking to reduce falls in older people. Focus on creating and promoting resources specifically for prevention and early intervention services, using communications to promote the benefits of physical activity and home safety in reducing the falls risk; providing training for front line staff to identify people at risk of a fall and offering advice on supporting them and signposting to appropriate guidance; and collaborative working: building the strength of preventative approaches within the falls pathway and the links between primary and secondary prevention.	Contribution to Public Health outcomes: 2.24i - Emergency hospital admissions due to falls in people aged 65 and over (Persons) 4.14i - Hip fractures in people aged 65 and over (Persons) 2.13ii - Percentage of physically inactive adults - current method Impacts on Adult Social Care Outcomes Framework: Permanent admissions to residential and nursing care homes per 100,000 aged 65+ NICE Guidance states that evidence based tailored exercise programmes to reduce falls can reduce falls by between 35 to 54 per cent.
BHP Rebasing	483,902		Transfer of Public Health grant attributable to the Bassetlaw CCG.	Public Health grant attributable to Bassetlaw CCG.
Temporary Commissioning Resource	115,246	32,079	Fixed term staff to support recommissioning of Public Health services by 1 April 2020.	New commissioned services will contribute to Public Health outcomes linked to smoking, physical activity, obesity, alcohol.
Increase capacity within the Public Health division to support the wellbeing agenda in the workplace	49,000	49,000	Fixed-term staff to support the wellbeing agenda (including wellbeing@work (W@W), Making Every Contact Count, and the Tobacco Declaration).	<ul style="list-style-type: none"> <li>• reduced sickness absence (PHOF indicator)</li> <li>• reduced presenteeism (attending work when not fit or able to work productively)</li> <li>• reduced turnover of staff</li> <li>• reduced recruitment costs</li> <li>• happier, more motivated workforce.</li> </ul>
Better data for prevention and population health need	24,000		Data sharing and collaboration between Public Health intelligence analysts and health and care organisations	Supports future fulfilment of PH mandatory functions associated with intelligence and information - advice to CCGs, production of Joint Strategic Needs Assessment, information to inform service commissioning, production of DPH Annual Report

ICS Support	120,000		Support for use of JSNA: Joint Strategic Needs Assessment (JSNA) and Population Health Management (PHM) products for Integrated Care System (ICS), Integrated Care Partnerships (ICP) and localities (Locality Integrated Care Partnerships). Mental health leadership: Dedicated capacity and expertise to provide leadership on the prevention elements of the ICS Mental Health Workstream, to ensure effective delivery on its ambitions and outcomes.	Enable the ICS to build on an understanding of population health needs in a defined geographic area (notably the ICS, ICP or LICP footprints). Additional leadership capacity to enable ICS to realise its ambitions, particularly affecting prevention.
Emergency Preparedness	40,000		Improved preparedness for emergencies involving a risk to public health.	Increased resilience in regard to response to emergencies.
Systematic approach to alcohol Identification and Brief Advice (IBA)	75,000	75,000	System wide implementation of Alcohol Identification and Brief Advice (IBA) is a simple and brief intervention that aims to motivate at-risk drinkers to reduce their consumption and so their risk of harm, through delivery of training in IBA to the wider workforce, which will enable professionals trained to conduct an audit of screening to assess alcohol consumption, alcohol related behaviours and alcohol related problems; offer evidenced based brief advice and information and promote appropriate interventions and services dependant on screening outcomes.	Training for 1,386 professionals; 198 training sessions per year. Target groups within agencies such as family services, district council housing teams and homelessness team, pharmacies, fire service (wellbeing team), hostels and care homes.  Contributions to Public Health outcomes: Reduction in % of adults drinking over 14 units of alcohol a week Reducing admissions and readmissions for alcohol related conditions Reduction in admissions for alcohol related unintentional injuries Reduction in benefit claimants due to alcoholism (/mental health) Years of life lost due to alcohol-related conditions Alcohol related road and traffic accidents
REACH: Routine Enquiry about Adversity in Childhood Implementation and Evaluation	123,100	72,000	Implementation of Routine Enquiry about Adversity in Childhood (REACH) model which aims to ask people directly about adverse experiences to enable professionals to plan more focused interventions.	650 professionals to be trained in the REACH approach. Benefits include reduction in the demand for services, improvement in engagement; benefits for service users include improved health, social outcomes; wider benefits may include a reduction in crime as a result of improved engagement in services.

Physical activity insight work	34,000	34,000	Extend Physical inactivity insight work, previously piloted in Mansfield, across the County. Quantitative & qualitative insight work & an action research approach with communities to identify and provide a replicable framework and approach to get to know and understand local communities; building strong relationships as part of the process, mapping assets, identifying opportunities and areas of concern.	<p>Enable a change in organisational behaviours and approaches to working with underserved communities and delivering services</p> <ul style="list-style-type: none"> <li>• Influence the traditional sports and leisure sector to think and work differently with a public health orientated needs led approach</li> <li>• Inform commissioners and funders to understand what is needed if this work is to be effective and sustainable.</li> <li>• Influence change in Public Health outcomes related to Physical Inactive Adults and Physically Active Adults, PHE, Active Lives, Sport England</li> <li>• Percentage of Physically active Adults - Notts (66.4%) similar to England (66.0%). Mans (58.9%) significantly lower.</li> <li>• Percentage of Physically inactive adults - Notts (23.2%) similar to England (22.2). Mans (27.7%) &amp; Ash (26.6%) significantly higher</li> </ul>
Age Friendly Notts	92,500	69,375	Extend previous pilot in Beeston and Mansfield to another five communities in Nottinghamshire, focusing on addressing loneliness and isolation among older people.	<ul style="list-style-type: none"> <li>• Measured interventions and activities to tackle loneliness and isolation, preventing reliance on public services</li> <li>• Improving healthier life expectancy – reducing exposure to risk factors for ill health</li> <li>• Strong and connected communities</li> <li>• Helping people to help themselves</li> <li>• Inter-connected residents and agencies to ensure public service activity is co-ordinated and supported locally;</li> <li>• Integrated knowledge sharing across partners to cascade the right information clearly and consistently;</li> </ul> <p>Contribution to Public Health outcomes: Self reported wellbeing</p>

Food Environment	70,000		Support the work of the Healthy and Sustainable Places Coordination Group in delivery of specific place-based actions or initiatives across Nottinghamshire, to contribute to one or more of six identified food environment objectives, which cover the promotion of healthy food, tackling food poverty and diet-related ill health, building community food knowledge, promoting a diverse food economy, transforming catering and food procurement and reducing waste in the food system.	Enable and support residents to reduce their risk of obesity and diet related diseases such as diabetes, high blood pressure, cardiovascular disease and certain cancers.
Schools Catering	90,000	90,000	Additional resources for promotion and awareness raising activities by the School Meals service in order to develop healthy eating habits and improve nutrition.	<p>Improve the diet of school aged children through the direct impact of increased uptake of school meals that meet the nutritional standards for school meals.</p> <p>Contribute to development of healthy eating habits among children and young people, with potential to contribute to improved academic achievement, improved behaviour and reduction in picky eating behaviours in schools.</p> <p>Contribution to Public Health outcomes relating to child obesity and adult overweight.</p>



Coordinated travel planning with residents and at workplaces	25,000	165,000	Personal travel planning (PTP) targeted at addressing the identified health issues in Ashfield and Bassetlaw as areas not recently covered or programmed for delivery. Residential PTP with 9,000 households; workplace PTP with 2,000 employees at up to 20 businesses	Changes in travel behaviour amongst participants (the percentage increases below are the percentage increases of all trips to work made by participants e.g. where 2% of the total trips to work are currently made by cyclists, the target would be to increase this to 5% the total trips to work by participants): o 3% increase in cycle journeys to work o 6% increase in walking journeys to work o 4% increase in public transport journeys to work o 4% increase in car share journeys to work o 17% reduction in car journeys (as driver) to work. Public Health outcomes contributions: 2.12 Excess weight in adults 2.13 Proportion of physically active and inactive adults 2.23 Self-reported well-being 3.01 Fraction of mortality attributable to particulate air pollution
Rights of Way promotion	60,000		Promotional activity and publicity for the rights of way network offering opportunities for Nottinghamshire residents and visitors to walk, cycle and horse ride.	Increase the number of members of public enjoying the walking and cycling network; improving health and mental well-being and reducing costs to the local and national economy by reducing reliance on the health provision. Encouraging children and families to appreciate the wider environment in today's technological society. Contributes to Public Health outcomes related to increasing levels of physical activity and improvements in air quality.

NCC Flu Vaccination Campaign	66,880	86,661	Contribute to NCC flu vaccination programme, with targets for uptake at 60% in 2019/20 and 75% in 2020/21.	<p>Benefits for service users include reduced transmission of seasonal influenza from their carers, fewer flu-related hospital admissions for service users and reduced levels of excess winter deaths. Local primary and secondary health care services will be under less pressure as a consequence. Other benefits for organisations include lower sickness absence among frontline staff with positive impacts on business continuity.</p> <p>Public Health outcome indicators:</p> <ul style="list-style-type: none"> <li>1.09 Working days lost due to sickness absence</li> <li>4.07 Under-75 mortality rate from respiratory disease considered preventable</li> <li>4.13 Health related quality of life for older people</li> <li>4.15 Excess winter deaths</li> </ul>
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<p>Repairing and Preventing Harm in Children Affected by Domestic Abuse (CADA)</p>	<p>115,000</p>	<p>130,000</p>	<p>The government's consultation on the Domestic Abuse Bill 2018 emphasised the severe, long lasting harm of domestic abuse on children. This proposal will provide support for children and young people affected by domestic abuse through:</p> <ol style="list-style-type: none"> <li>1. Connections Toolkit: training for professionals on this locally developed innovative toolkit which enables them to mainstream 1:1 prevention into their work with young people affected by domestic abuse who are displaying harmful and concerning behaviours.</li> <li>2. Horizons: a preventative programme with children, young people and their families where children display harmful and concerning behaviours with their parents, family or carers.</li> <li>3. Young Person's Violence Advisor (YPVA) to support children and young people going through the family courts, with full County coverage.</li> <li>4. Independent evaluation to identify learning and best practice.</li> </ol> <p>The proposal wil help to meet recommendation 9 in the Domestic Abuse JSNA 2019 and recommendations from the 2019 DPH Annual Report for Nottinghamshire.</p>	<p>These programmes will address the recommendation in the DPH report to improve early intervention and prevention of domestic abuse by addressing young peoples' values and beliefs before they are hardened and also addressing adolescent to parent/carers violence and abuse. 120-160 professionals will be trained through the Connections programme. 8 children per year and their families will benefit from the Horizon programme. Outcomes for children and young people include improved understanding of domestic abuse and of respectful relationships, management of behaviour. Outcomes for adults include improved understanding by teen relationship dynamics and improved ability to manage children's behaviour. Children can be re-traumatised as part of the family court process and perpetrators can use these proceedings to continue their controlling behaviour. YPVAs will support, safeguard and work with the child to avoid further DVA, improve emotional wellbeing, school attendance and future life chances. 54 children benefited from the YPVA provision in the north of Nottinghamshire in 2019.</p>
<p>Health protection - communications and training</p>	<p>30,000</p>	<p>30,000</p>	<p>Support work to raise awareness through active promotion and communication activities around elements of health protection: a) immunisation/screening; b) infection prevention &amp; control; and c) TB. Topics of focus may include vaccine uptake (esp. MMR, flu and shingles), variability in cancer screening uptake, dehydration, UTI prevention, hygiene, sepsis prevention, e-coli/MRSA/C-diff/CPE control measures, and practitioner awareness of TB - exact subjects / campaigns and scope to be determined and overseen by corresponding network groups and programme boards.</p> <p>Health protection awareness raising activity will help to prevent infection and disease, promote earlier diagnosis of</p>	<p>Increased uptake of immunisation and screening programmes, including targeted work to reduce inequalities; fewer hospital admissions and re-admissions for viral and bacterial infections; better practice among practitioners, including care home staff.</p>

Healthy Start - increasing vitamin offer	20,000	40,000	<p>Healthy Start is a government scheme for pregnant women and children under 4 years available to families in receipt of benefits or pregnant women under 18. There are two elements: Pregnant women and children over one and under four years old receive weekly monetary vouchers that can be spent on milk, fresh fruit and vegetables at local retailers across the county. The uptake of this element of the scheme is good and opportunities to strengthen this are currently being explored linked to the trailblazer work, and by working to increase the number of retailers offering the scheme. Women and children also receive vitamin coupons which can be exchanged for vitamins at local children centres. If not eligible for the scheme, women are able to purchase vitamins at cost price from their local children centre. Uptake of the vitamin element of the scheme is extremely low. To encourage take up, it is proposed to give a universal Healthy Start 'starter pack' of one free dose of women's vitamins at all antenatal booking appointments and one free dose of the children's vitamins at all 6-8-week reviews, alongside promotional information, and to undertake additional activities to create additional distribution points, increase awareness amongst families and professionals, and embed Healthy Start vitamins in the universal offer.</p>	<p>Increased nutritional intake for pregnant women and children</p> <p>Reduced risk of neural tube defects in pregnancy</p> <p>Reduced risk of vitamin D deficiency e.g. rickets and hypocalcaemic fits among children</p> <p>Reduced health inequalities e.g. families in lower-income groups tend to have less vitamin C in their diet</p> <p>Supports delivery of Nottinghamshire's infant feeding framework for action.</p>
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<p>Corporate Programme - Health Work &amp; Inclusive Growth</p>	<p>100,000</p>		<p>1. Audit of Nottinghamshire County Council employment support policy and practice as compared to known best practice - to evaluate the organisation's current corporate policy and practice. Specifically the Council's support to NCC employees, and Nottinghamshire residents experiencing barriers to employment, due to disability, long term health conditions or complex health and social care needs. (£35,000)</p> <p>2. Consultant support to facilitate the implementation of audit within NCC and use audit findings to develop a strategic plan to improve employment and reduce inequalities in access to work. (£65,000)</p>	<p>Understanding and benchmarking of existing NCC employment support including</p> <ul style="list-style-type: none"> <li>• Local vision and values</li> <li>• Promotion of health and wellbeing of NCC employees.</li> <li>• NCC as a provider of employment support</li> <li>• NCC as an inclusive employer – disability, mental health and healthy aging.</li> </ul> <p>This will enable development of a strategic plan for NCC to</p> <ul style="list-style-type: none"> <li>• Be an exemplar employer in promoting positive health and well-being of employees</li> <li>• Increase the number of people with Learning Disability and Mental Health problems with employment</li> <li>• Ensure pathways to work through robust preparing for Adulthood planning and processes</li> <li>• Improve the access to employment for those post 16 with SEND.</li> <li>• Support people with eligible social care needs with work and work readiness.</li> </ul> <p>Public Health outcome indicators: Sickness absence rate; adults with learning disabilities in employment; gap in the employment rate between those with a LTC and the overall employment rate</p>
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Academic Resilience extension	125,000	125,000	<p>Extension of two academic resilience programmes currently commissioned to provide for 30 schools in Nottinghamshire, to roll out to a further 30 schools, to be targeted in areas of greatest need. The existing service model is to embed sustainability by building a whole school approach which can be maintained after completion of the programme with the school. Provider performance is good and current activity is valued by schools. Current requests for activity from county schools outstrips capacity to deliver. Additional funding would allow continuation until March 2021, enabling the service to be offered to more Nottinghamshire children. An evaluation to examine local outcomes and sustainability (due to report in 2020) will be extended to include the additional 30 schools receiving the intervention.</p> <p>Delivery of academic resilience programmes is part of the national and local CYP mental health transformation programme, consistent with the Green Paper 'Transforming Children and Young People's Mental Health Provision (DH/DFE 2017) and the NHS Long Term Plan, both of which place schools at the centre of early intervention and prevention around young people's mental and emotional well-being. Nationally, evidence to support the impact that schools can have on building resilience and maintaining good mental health is identified in the Green Paper. In addition, the LGA is supportive of resilience building approaches, recognising the important role that</p>	<p>Extension of programme to another 30 schools. Increases in reported resilience, improved school attendance, increased numbers of young people willing to seek support.</p> <p>Contribution to improving Public Health Outcomes:</p> <ul style="list-style-type: none"> <li>• pupil absence</li> <li>• first time entrants to youth justice system</li> <li>• 16-18 year olds not in education, employment, training</li> <li>• under 18 conceptions</li> <li>• emotional well-being of looked after children</li> <li>• smoking prevalence at age 15</li> <li>• self-harm</li> </ul>
<b>Total</b>	<b>4,999,167</b>	<b>2,473,811</b>		<b>7,472,978</b>