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Dear Colleagues,

PHE Health and Wellbeing monthly update

IssueNo 34, September 2018

Welcome to the Yorkshire and Humber Health and Wellbeing monthly update. Thank you for subscribing to the monthly update. This monthly update is our way of sharing any good and emerging practice, new developments, updates and guidance. The update is circulated at the beginning of each month with previous month’s updates. If you have anything that needs to be shared urgently, we will circulate as soon as possible.

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| Ensuring Every Child has the Best Start in Life (H&WB Team Lead: Gemma Mann) |
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| Children’s public health of 0 to 5 year oldsNew data from the interim national reporting process for the universal health visiting service was published on 25 July, including data for quarter 4 in 2017 to 2018 for [breastfeeding](https://www.gov.uk/government/statistics/breastfeeding-at-6-to-8-weeks-after-birth-2017-to-2018-quarterly-data) at 6 to 8 weeks after birth, [health visitor service delivery metrics](https://www.gov.uk/government/publications/health-visitor-service-delivery-metrics-2017-to-2018), and [child development outcomes](https://www.gov.uk/government/publications/child-development-outcomes-at-2-to-2-and-a-half-years-metrics-2017-to-2018) at 2 – 2½ years.Child obesity slide setPHE have released an update of the [national child obesity slide set](https://app.box.com/s/og3q86aqejc99okxe9xyvpfvo21xai21/file/311350142247). The set now includes 7 updated/new slides as listed on the title slide. The updates cover severe obesity and trend in the slope index of inequality. These PowerPoint slides present key data and information on patterns and trends in child obesity in clear, easy to understand charts and graphics. The slides can be [downloaded](https://www.gov.uk/guidance/phe-data-and-analysis-tools#obesity-diet-and-physical-activity) and used freely with acknowledgement to Public Health England. Notes accompany each of the slides and are available in the downloaded versions.  |
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| Living Well  |
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| Tackling Obesity (H&WB Team Lead: Nicola Corrigan)Physical Activity e-BulletinPlease see below august edition of physical activity e-bulletin. If you would like to be added to the mailing list, please email PhysicalActivity@phe.gov.uk Article on PA environment and change in BMIPlease see link below for a recent article published on PA environment and change in BMI: longitudinal study.Key result is that the relationship between the recreational physical activity environment and how this related to change in BMI and obesity differs by age. It was actually those younger who benefited most from having a higher number of parks and PA facilities in their home neighbourhood. Therefore, when considering environmental interventions it may help policy to consider the impact on PA environmental interventions across the life course.Link to article: <https://www.sciencedirect.com/science/article/pii/S0277953618303356>Ending the sale of energy drinks to childrenPlease see link below to a consultation which seeks views on a proposed ban on selling energy drinks to children.It also asks for views on:* what products should be included in any restrictions
* what age limit a ban should apply to
* whether sales of energy drinks from vending machines should be restricted
* whether there are any changes that would be more appropriate than a ban on sales to children or that could be applied as well as a ban

Link: <https://www.gov.uk/government/consultations/ending-the-sale-of-energy-drinks-to-children>Everybody Active Every Day **(**H&WB Team Lead: Nicola Corrigan)Activity Alliance releases updated inclusive communications resource Activity Alliance is adding to its bank of resources with a series of new factsheets that support providers to be more accessible and inclusive in their communications. Written in partnership with Big Voice Communications and Sport England, each factsheet is bursting with bitesize tips and better practice guidance. If applied effectively, the resource can help providers to reach a wider audience, including more disabled people.   Since the first Inclusive Communications Guide launched in 2014, Activity Alliance is proud to be considered a leader in sport and active recreation on this important topic. As well as producing the Guide and its complementary film, Activity Alliance regularly advises partners and delivers workshops to raise awareness of the key principles. The impact has been notable with many local and national partners, leading to changes in their communication processes and promotions.Updated with the latest insight, these new ten factsheets aim to address the main communication barriers that many people experience when accessing opportunities. They provide clear guidance and practical tips on effective planning, design and delivery of accessible and inclusive marketing communications. The factsheets cover a range of subjects, channels, tools and platforms, including: 1.      Social media 2.      Promoting your events 3.      Digital communications 4.      Language and terminology 5.      Accessible communications on a budget 6.      Marketing campaigns 7.      Accessible design 8.      Photography 9.      Writing news stories 10.  Inclusive communications checklistTo access the new series of inclusive communications factsheets in accessible PDF format, please visit the [inclusive communications page](http://www.activityalliance.org.uk/how-we-help/programmes/1817-inclusive-marketing-and-communications) on our website.    Find more information on Activity Alliance on [www.activityalliance.org.uk](http://www.activityalliance.org.uk) Activity Alliance releases Ten Principles filmActivity Alliance, supported by Sport England, in June release the Ten Principles film to guide providers to deliver more appealing and inclusive opportunities. If embedded within planning and delivery, the principles can be the vital ingredient for delivering activities that will sipper disabled people to be and stay active for life.Find out more here: <http://www.activityalliance.org.uk/news/4074-activity-alliance-releases-ten-principles-film>New film collection highlights ways to apply Ten PrinciplesIn August Activity Alliance, supported by Sports England, released five Ten Principles in action films. Following on from the first film released in June that introduces the Principles, viewers meet Shay, TP, Tony, Anthony and Hannah. The latest collection guides providers on how they too could apply the principles in their own activities. Followed further videos that under pin each action.Find out more here: <http://www.activityalliance.org.uk/news/4279-new-film-collection-highlights-ways-to-apply-ten-principles>Healthy Places (H&WB Team Lead: Nicola Corrigan)ONS Publication: UK air pollution removal: how much pollution does vegetation remove in your area?Air pollution removed by woodlands, plants and grasslands across the UK saved around £1 billion in health costs in 2015, at an average of £15 per person.[Use our interactive map](http://links.govdelivery.com/track?type=click&enid=ZWFzPTEmbXNpZD0mYXVpZD0mbWFpbGluZ2lkPTIwMTgwNzMxLjkzMTU1MjcxJm1lc3NhZ2VpZD1NREItUFJELUJVTC0yMDE4MDczMS45MzE1NTI3MSZkYXRhYmFzZWlkPTEwMDEmc2VyaWFsPTE3MDI3NTc1JmVtYWlsaWQ9bWlrZS5nZW50QHBoZS5nb3YudWsmdXNlcmlkPW1pa2UuZ2VudEBwaGUuZ292LnVrJnRhcmdldGlkPSZmbD0mZXh0cmE9TXVsdGl2YXJpYXRlSWQ9JiYm&&&103&&&https://www.ons.gov.uk/economy/environmentalaccounts/articles/ukairpollutionremovalhowmuchpollutiondoesvegetationremoveinyourarea/2018-07-30?utm_source=govdelivery&utm_medium=email) to find out how much air pollution is removed by green space in your area, and how much is saved in health costs.Research: What is the Effect of Reduced Street Lighting on Crime and Road Traffic Accidents at Night? A Mixed Methods StudyAn estimated £300m is spent every year on street lights in the UK. This research aimed to answer the question of whether reducing night-time streetlight for environmental and energy reasons, has any impact on road traffic crashes and crime. Researchers analysed 14 years of data from 62 local authorities across England and Wales who had implemented a range of reduced street light strategies, including switching lights off permanently, reducing the number of hours that lamps are switched on at night, dimming lights, and replacing traditional orange lamps with energy efficient white light LED lamps.[The report](https://www.journalslibrary.nihr.ac.uk/phr/phr03110#/abstract) looked at all roads in participating authorities, examining what type of street lighting was used and the number of traffic collisions that happened at night relative to the day during 2000-13. There was no evidence of an association between reduced street lighting and night-time collisions across England and Wales. Regarding crime, the research looked at offences more likely to occur at night, including burglary, theft of or from a vehicle, robbery, violence and sexual assault. Overall, there was no evidence of an association between reduced street lighting and increased crime across England and Wales.In summary the research suggests that local authorities can safely reduce street lighting at night, saving energy costs and reducing carbon emissions. However, the public were also concerned about other health outcomes.Department for Transport Publication: The Road to Zero: Next steps towards cleaner road transport and delivering our Industrial StrategyThe government has now published their [strategy on tackling transport](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/724391/road-to-zero.pdf). Actions include: - Increasing the grant level of the Workplace Charging scheme from £300 per socket to 75% of the purchase and installation costs of a charge point (capped at maximum of £500 per socket) - Continuing to offer grants for plug-in cars, vans, taxis and motorcycles until at least 2020.Healthy workplace standardsPlease see below Healthy workplace standards - Letter from Prof John Newton, Public Health EnglandCOMEAP publications on long-term average concentrations of NO2 and PM2.5 and mortalityAttached is a press release regarding a newly published report from the Committee on the Medical Effects of Air Pollutants (COMEAP) on [*Associations of long-term average concentrations of nitrogen dioxide with mortality*](https://www.gov.uk/government/publications/nitrogen-dioxide-effects-on-mortality)*.* COMEAP has also published a [statement](https://www.gov.uk/government/publications/particulate-air-pollution-effects-on-mortality) updating its recommendations for quantifying mortality associated with particulate air pollution.  Developing an indicator on access to parks and recreation spacesPHE is developing a local authority level indicator (with LSOA supporting data), based on the Ordnance Survey Greenspace data for use in the Wider Determinants of Health web tool. The indicator originally aimed to be an objective measure of access to greenspace (this has previously been requested by users of the wider determinants of health fingertips tool), but the data only measures limited types of greenspace. We have tried to add data from other sources to increase the coverage of greenspace types, but no suitable combination of additional data has been suitable which produce a robust and coherent indicator. Using only the original data from the OS Greenspace data set, we have instead created an indicator with a working title of ‘*Access to parks and recreation spaces*’, which includes the following types of greenspace which are conducive to physical activity:* public parks or gardens
* play spaces
* playing fields
* tennis courts.

Access is measured by calculating distances from each postcode centroid along footpaths or road networks to the nearest greenspace access point. Postcodes are matched to LSOAs and an average is taken to get an LSOA level value. The LSOA level data will be available, mapped, for detailed exploration by users. For the local authority indicator the definition at present is ‘*Percentage of the population living in LSOAs with an average distance of <=300m to parks or public gardens, play spaces, playing fields or tennis courts.*’The main issue in developing the indicator has been whether this has value for rural areas. The types of greenspace in the data set do not capture the broader range of greenspace available in rural areas that are suitable for physical activity. Two opposing views have been expressed:1. Rural areas will find no value in this indicator because these types of greenspace are not as important and people will have other opportunities for outdoor physical activities.
2. The indicator will be useful to rural areas because it will highlight where there is a lack of rural amenities of this type.

If the indicator is not useful in rural areas, it can be recalculated, using only urban LSOAs to calculate the LA level value (based on the ONS classification of rural and urban LSOAs). The indicator would then be ‘*Percentage of the urban population living in LSOAs with an average distance of <=300m to parks or public gardens, play spaces, playing fields or tennis courts.*’We would like to hear views on the following questions from colleagues who work in more rural areas. * Would the indicator based on all LSOAs be useful in more rural areas (i.e. LAs with higher than average rural populations), or not?
* Should the indicator be based only on urban LSOAs (All LAs except the Ilse of Scilly have some urban LSOAs from which the indicator can be generated)?

The LSOA level data using *all* LSOAsis mapped here for you to view: <https://gdsl.carto.com/u/kbot/builder/35d1595f-7ff4-4348-844e-d30052f31622/embed>Note: The data of interest is labelled ‘Green Spaces – Active indicator’, please untick the other two indicators. The map contains test data and is not finalised. It is meant only for exploratory purposes. **Any feedback would be gratefully received. Please return comments to** **david.bayliss@phe.gov.uk**Reducing Smoking (H&WB Team Lead: Scott Crosby)Tobacco and smoking resources • [Adult Smoking Habits in the UK, 2017](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthandlifeexpectancies/bulletins/adultsmokinghabitsingreatbritain/2017) - reports on cigarette smoking among adults, including the proportion of people who smoke, their demographic breakdown, changes over time, and use of e-cigarettes • [Statistics on Smoking in England, 2018](https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-smoking/statistics-on-smoking-england-2018/content) - presents a broad picture of health issues relating to smoking in England, and covers topics such as smoking prevalence, behaviours and attitudes among adults and school children, smoking-related ill health and mortality, and smoking-related costs. In addition, there was an update to the [Local Tobacco Control Profiles](https://fingertips.phe.org.uk/profile/tobacco-control), as follows: • More recent data added for 10 indicators, including 6 smoking prevalence in adults indicators calculated from the Annual Population Survey • New indicator for measuring the gap in smoking prevalence between routine and manual and other populations • Inequalities in smoking prevalence added at Upper Tier Local Authority level • New indicator for oesophageal cancer registrations. NHS Digital updated [‘Turning the tide on tobacco: a Public Health Matters blog’](https://publichealthmatters.blog.gov.uk/2018/07/03/turning-the-tide-on-tobacco-smoking-in-england-hits-a-new-low/) which incorporated the latest results and trends from the women’s [smoking at time of delivery](https://digital.nhs.uk/data-and-information/publications/statistical/statistics-on-women-s-smoking-status-at-time-of-delivery-england/statistics-on-womens-smoking-status-at-time-of-delivery-england---quarter-4-october-2017-to-december-2017) data collection in England.Stop smoking options: guidance for conversations with patientsPHE has published [Stop smoking options: guidance for conversations with patients](https://www.gov.uk/government/publications/stop-smoking-options-guidance-for-conversations-with-patients). This guidance supports clinicians in their conversations with patients on the different options available for stopping smoking and their effectiveness. The following options are covered in the guidance: unassisted quitting; self-managed quitting; quitting with expert support; temporarily quitting; cutting down. The guidance was originally developed by PHE for [NHS RightCare](https://www.england.nhs.uk/rightcare/).  Reducing Harmful DrinkingAct Local, Think local - advice for PH teams inputting in SLP reviewThe Act local, Think local advice for public health teams engaging in the review of  local Statements of Licensing Policy  has now been published  <https://www.gov.uk/government/publications/reviewing-a-licensing-policy-think-local-act-local>The aim is to provide general advice on what PH teams should consider when inputting into the review of their local SLP as well as providing links to support materials and case studies.Local Alcohol Profiles for England (LAPE): licenced premises indicator update[Click here](https://www.gov.uk/government/statistics/announcements/local-alcohol-profiles-for-england-lape-licenced-premises-indicator-update) for update for one indicator in LAPE 'number of licensed premises per square kilometre'. Local Alcohol Profiles for England (LAPE) provide information to monitor the services and initiatives that have been put in place to prevent and reduce the harmful impact of alcohol.The Bottle Bank: An Alcohol Symposium**Tuesday 16th October 2018 , 10:00–15:00****Venue: Crowne Plaza Hotel, Leeds**With a new national alcohol strategy expected next year, it’s a good time to reflect on our situation locally and what’s needed to make a difference. Join us for the first in a shot season of events exploring the current extent and nature of damage to our communities fuelled by alcohol, what’s already happening to reduce harm and opportunities for joint action.   Confirmed speakers include: Colin Angus, University of Sheffield School of Health and Related Research, Clive Henn, from PHE, Colin Shevills, from Balance**Who should attend:*** local authorities -  members and officers with an interest in public health, licensing, community safety, domestic violence, children and young people
* emergency services – police services, office of  police and crime commissioners
* health services – commissioners, acute trusts
* community organisations – domestic violence, family support, mental health, addictions

Please register your interest via Eventbrite page. Link: <https://www.eventbrite.co.uk/e/the-bottle-bank-an-alcohol-symposium-tickets-49327230073?ref=estw>For more information email Victoria.Musialek@phe.gov.ukMental Health (H&WB Team Lead: Corinne Harvey)Common Mental Health Disorders Profiling ToolIt has been developed to support an intelligence driven approach to understanding and meeting need. It collates and analyses a wide range of publically available data on prevalence, risk, prevention, early intervention, assessment, treatment, outcomes and service costs.[Click here](https://fingertips.phe.org.uk/profile-group/mental-health/profile/common-mental-disorders) for tool. The Mental Health and Wellbeing Joint Strategic Needs Assessment (JSNA) The Mental Health and Wellbeing Joint Strategic Needs Assessment (JSNA) profile is an important component of the Mental Health and Wellbeing [JSNA toolkit.](https://fingertips.phe.org.uk/profile-group/mental-health/profile/mh-jsna)Severe Mental Illness Profiling toolIt has been developed to support an intelligence driven approach to understanding and meeting need. It collates and analyses a wide range of publically available data on prevalence, risk, prevention, early intervention, assessment, treatment, outcomes and service costs.[Click here](https://fingertips.phe.org.uk/profile-group/mental-health/profile/severe-mental-illness) for tool. Sexual Health (H&WB Team Lead: Sharron Ainslie)HPV vaccine to be given to boys in EnglandThe government has announced that adolescent boys aged between 12 and 13 in England will be offered the HPV vaccine to protect them against HPV-related cancers:<https://www.gov.uk/government/news/hpv-vaccine-to-be-given-to-boys-in-england>The decision follows [new scientific evidence and advice from an independent panel of experts](https://www.gov.uk/government/publications/jcvi-statement-extending-the-hpv-vaccination-programme-conclusions). Updated evidence from the Joint Committee on Vaccination and Immunisation (JCVI) recommends that the existing HPV vaccination programme for girls should be extended to boys as well.The vaccine not only protects men from HPV-related diseases – such as oral, throat and anal cancer – but also helps reduce the overall number of cervical cancers in women, though a process known as ‘herd immunity’.The extension of the vaccine to boys follows the success of England’s HPV vaccination programme for girls and the recent introduction of one for men who have sex with men. The programme is expected to vaccinate thousands of boys in England each year.England will now be one of a small number of countries to offer HPV vaccination for both girls and boys. The extension of the programme builds on the government’s commitment to achieving the best cancer outcomes in the world.Hepatitis A: preventing infection in men who have sex with menThe government has issued leaflet and poster gives advice on how to prevent hepatitis A infection in men who have sex with men (MSM) [Click here](https://www.gov.uk/government/publications/hepatitis-a-preventing-infection-in-men-who-have-sex-with-men?utm_source=d0ab3416-0433-4fd8-a783-79f26a794234&utm_medium=email&utm_campaign=govuk-notifications&utm_content=immediate)Government RSE announcements and guidance consultationHere is an update from the Sex Education Forum on the recent RSE announcement and ways in which SEF can support schools and LAsIn an [announcement](https://www.gov.uk/government/news/new-relationships-and-health-education-in-schools)which confirms a phased start date for RSE to be mandatory in all schools, the Government has introduced a new subject, Health Education, which will be mandatory alongside RSE and Relationships Education. Details of the [updated RSE guidance](https://consult.education.gov.uk/pshe/relationships-education-rse-health-education/) have also been revealed, and will be the first changes to the Secretary of State's guidance since 2000. A consultation has begun on the draft guidance and will run until 7 November 2018. Schools that are ready to provide high quality RSE by September 2019 are being strongly encouraged to do so, but the extension to 2020 for the statutory requirement aims to give schools needing more support the time to get their provision right. Given this staggered approach it is essential that momentum is not lost. The Sex Education Forum are supporting schools, local authorities and other partners in a number of ways:* Hosting a new autumn conference on Friday 30th November 2018: [‘Countdown to RSE’](http://www.sexeducationforum.org.uk/training/calendar/conference-countdown-statutory-rse) designed for both experienced educators and teachers new to RSE, and sponsored by the National Education Union.
* One day training courses from September that support schools to [Get ready for statutory RSE’](http://www.sexeducationforum.org.uk/training/calendar/conference-countdown-statutory-rse): 13th (primary) and 14thSeptember (secondary) in London and available to commission locally
* Newly available training courses on gender and LGBT inclusive RSE – [see calendar](http://www.sexeducationforum.org.uk/training/calendar/conference-countdown-statutory-rse)
* [Sign up for free e-mail briefings](https://ncb.us9.list-manage.com/subscribe?u=93ca41ab24380caf57761bd37&id=453400bb80) on the new guidance plus resources and practical tips on meeting the statutory requirements – this free newsletter is open to anyone and will be particularly useful for teachers and school staff

 As a member or partner of the Sex Education Forum you can access further support. [Members](http://www.sexeducationforum.org.uk/membership) receive our in-depth monthly bulletin and discounts on training – at a cost of £45 per year. [Partners](http://www.sexeducationforum.org.uk/about/partners) have a more formal status and form the basis of the Sex Education Forum – we are a collaborative group working to influence policy, share good practice and ensure children and young people’ entitlement to high quality RSE. We have several local authority partners and always welcome new applicants. Do get in touch if you’d like to find out how you could get involved, by emailing the Director, Lucy Emmerson, lemmerson@ncb.org.uk**Sexwise (FPA) Videos** Sexwise have released the next batch of videos, below are links to the videos as well as suggested social media posts. They will also promote the videos on our social media channels [Facebook](facebook.com/sxwise), [Twitter](twitter.com/sxwise), [Instagram](instagram.com/sxwise) and Snapchat.**Pufferfish talk Condoms**<http://bit.ly/sexwisepufferfish>**Cows talk Contraceptive Implants**<http://bit.ly/sexwisecow>**Flamingos talk The Pill**<http://bit.ly/sexwiseflamingos>**Suggested social media posts**Pufferfish balloon up to protect themselves from predators but when this pufferfish got excited for different reasons, his protection got pronged <http://bit.ly/sexwisepufferfish>Condoms can be tricky. Especially for a spiky, overexcited pufferfish. Find out what to do when one breaks <http://bit.ly/sexwisepufferfish>Joel's condom knowledge could have landed him in deep water before he heard from @sxwise <http://bit.ly/sexwisepufferfish>How can you tell good contraception advice from pure bull? We helped this pair sort the truth from the udderly ridiculous <http://bit.ly/sexwisecows>Helen had some beef with the implant but then she got the lowdown from @sxwise <http://bit.ly/sexwisecow>Current MOOd finding out more about the #implant from @sxwise <http://bit.ly/sexwisecow> #MOOdSeeing flamingos everywhere? Maybe it's because they're not very informed about the pill, like the flamingos in this video <http://bit.ly/sexwiseflamingos> #contraceptionFlamingos may be on trend but their contraception knowledge isn't what it could be. Lucky for them we're here to help <http://bit.ly/sexwiseflamingos> #contraceptionBex the flamingo didn't have a leg to stand on when it came to facts about the pill <http://bit.ly/sexwiseflamingos> #contraceptionMisoprostolThe Welsh Government has announced changes to allow misoprostol to be taken at home for medical abortion treatment. This follows similar moves in Scotland.  In England misoprostol must still be administered as a two-step procedure within a licenced hospital or clinic.  A cross-Party group of MPs have recently written to the new Health and Social Care Secretary calling on him to remove this requirement. In a recent BMJ Sexual and Reproductive Healthcare editorial, healthcare leaders also urged the UK Government to follow the example of their Scottish and Welsh counterparts, bringing medical practice into line with international standards.PrEP GuidelinesThe PrEP guidelines are now available on the BHIVA website:<http://www.bhiva.org/PrEP-guidelines.aspx>Health and Social Care Committee launches enquiry into Sexual HealthOn 1st August, the health and Social Care Committee launched an inquiry into sexual health. This has been driven by the increases in STIs, access/demand issues, funding and workforce issues. Submissions are requested by 1st October. <https://www.parliament.uk/business/committees/committees-a-z/commons-select/health-and-social-care-committee/inquiries/parliament-2017/sexual-health-inquiry-17-19/>Drugs Recovery Drug misuse: findings from the 2017 to 2018 Crime Survey for England and WalesThis report examines the extent and trends in illicit drug use among a sample of 16 to 59 year old residents in households in England and Wales. [Click here](https://www.gov.uk/government/statistics/drug-misuse-findings-from-the-2017-to-2018-csew) for full report. Continuity of care for prisoners who need substance misuse treatmentPHE has published [an audit toolkit and guidance on data recording](https://www.gov.uk/government/publications/continuity-of-care-for-prisoners-who-need-substance-misuse-treatment) aimed at both providers and commissioners of services which provide substance misuse treatment in prisons, other secure settings, and the community. It includes guidance on how to improve continuity of care, a guide to completing a continuity of care audit and tools to support an audit of the referral and treatment pathway.NHS Health Checks and CVD (H&WB Team Lead: Melanie Earlam)Invitation to submit an abstract for the Cardiovascular Disease Prevention Conference 2019: Saving Hearts and Minds TogetherThe Cardiovascular Disease Prevention Conference 2019: Saving Hearts and Minds Together, will take place on **Thursday 14 February 2019** in Manchester - [www.phe-events.org.uk/NHShealthcheck2019](https://www.phe-events.org.uk/hpa/frontend/reg/homepage.csp?pd=90558&msID=9308&eventID=799).It will be possible to book your place to attend the conference from late November and we will be in touch about this once bookings open.**In the meantime, you can now submit abstracts to be considered for poster or oral presentation at the conference.** We welcome submissions from all partners including local authorities, third sector, academics, NHS and service provider organisations to share knowledge, learning and innovation from a wide range of cardiovascular disease themes listed on the [conference website](https://www.phe-events.org.uk/hpa/frontend/reg/homepage.csp?pd=90558&msID=9308&eventID=799). Please visit the Abstract submission page of the [conference website](https://www.phe-events.org.uk/hpa/frontend/reg/homepage.csp?pd=90558&msID=9308&eventID=799) for full information.**The deadline for submissions is midnight on Friday 12 October 2018.**If you have any questions about the abstract submission processes please send an email to events@phe.gov.uk.**An update for the NHS Health Check digital exemplar project**The project is following the guidelines set out by **Government Digital Service (GDS)** for developing digital interventions. <https://www.gov.uk/government/organisations/government-digital-service>* This starts with a **discovery phase** to ensure that any solution is truly based on the evidence and the needs of the individual, this aims to understand the behaviours of, needs of, issues for, key stakeholder groups, in this case: service users (the eligible population), the service providers, the commissioners/local decision makers.
* Once the needs of these groups are understood the work stream moves into an **alpha phase,** this identifies solutions, including looking at the evidence and existing practice, prototype solutions are built and tested with recipients.
* The final stage before going live is the **beta phase**, this takes forward a solution to product development**.**
* **Live** is when the final product is rolled out.

We are particularly keen to hear about any existing digital technology being used to support the delivery of NHS Health Check in your area, and your experiences of this, or if you are in the process of planning or developing any digital interventions please do also let us know. Please do email us with details at nhshealthchecks.mailbox@phe.gov.uk Our external provider will be consulting with stakeholders and we will advertise opportunities to be involved in this through PHE centre leads. These are likely to take place late summer/early autumn.**Does using point of care testing improve cost effectiveness?**New research published in the BMJ, shows that using POCT during an NHS Health Check is cheaper than lab based testing. Find out more [here](http://bmjopen.bmj.com/content/7/8/e015494).Familial Hypercholesterolaemia – Implementing a systems approach to detection and managementPHE in partnership with NICE, NHSE, BHF and HEART UK have developed a [guide](https://www.gov.uk/government/publications/familial-hypercholesterolaemia-implementation-guide) to support implementation of the Familial Hypercholesterolaemia (FH) NICE guidance. The guide provides practical support to commissioners in order to help them consider whether there are gaps in the provision of FH services in their local areas and how they can be supported through the updated guideline. It includes a joint foreword from Duncan Selbie, Professor Huon Gray, NHSE National Clinical Director for Heart Disease and Sir Andrew Dillon, Chief Executive of NICE. Reducing Health Inequalities (H&WB Team Lead: Alison Patey)Health Inequalities Conference **Venue:**         Holiday Inn, Doncaster**Date:**            17th September **Time:**         10:00am – 3:00pmHealth inequalities are differences in health status in our communities. The more deprived the community/group the higher risk of ill health and premature death. Health inequalities are preventable. One way they can be reduced is by multi-team targeted action on the wider determinants of health, such as local environment or access to housing.The aim of this workshop is to give an introduction to health inequality, and, using examples from practice, consider the impact of local action on the wider determinants of health. The training will aid to empower staff to understand how their own roles have wider impacts on the health agenda.**Who should attend the conference?**‘The conference has been designed to support the following audience: Elected Members, Chief Executives, DsPH, DsCS, DsASS, members of Health and Wellbeing Boards, Local Authority Managers and Officers (planners, environmental, education, transport, housing etc.) along with CCGs and other health professionals, colleagues from the voluntary and community sector and Local Enterprise Partnerships’To book <https://healthinequalitiesevent.eventbrite.co.uk/> |
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| Ageing Well (H&WB Team Lead: Alison Iliff, Dementia: Melanie Earlam) |
| Dementia ProfileThis profile has been developed to support the work of the Dementia Intelligence Network (DIN) in providing health intelligence with which to inform the provision of care of people in England who have dementia.This tool provides indicators arranged into six data domains:• Prevalence• Preventing well• Diagnosing well• Living well• Supporting well• Dying well[Click here](https://fingertips.phe.org.uk/profile-group/mental-health/profile/dementia) to access the profile. Dementia and OPMH Clinical NetworkBooking is now open for the next Dementia and OPMH Clinical Network Whole Systems meeting on Thursday 27th September, 9.30-4pm at Cedar Court Hotel, Wakefield, WF4 3QZ.The focus for the day is a Whole Systems Approach to Healthy Ageing. The day will provide a great opportunity to hear from local and national innovators in this area including:* Food For Life, Intergenerational work in Calderdale <https://www.youtube.com/watch?v=sDV7n20M24Y&feature=youtu.be>
* Ageing Better in Sheffield <http://www.agebettersheff.co.uk/>

The afternoon will be split into two parallel workshop sessions, one focused on the Clinical Aspects of Ageing Well and the other on Population-based approaches to Wellbeing for Older People. **To book your place, please visit:**[**https://wholesystemshealthyageing.eventbrite.co.uk**](https://wholesystemshealthyageing.eventbrite.co.uk/)Places are limited so please ensure you book promptly.Older People’s Mental Health Data CatalogueThe National Mental Health, Dementia & Neurology Intelligence Network are pleased to announce the launch, on 4th September, of an [Older People’s Mental Health Data Catalogue](https://fingertips.phe.org.uk/documents/FINAL_OPMH_Data%20catalogue_220818.xlsx). The key features of the data catalogue are:* a signposting guide for indicators, datasets and resources relevant to depression in older people at both a national and local level
* information organised into three main focus areas: prevention, identification and treatment
* cross-topics coverage, including risk factors, loneliness, social isolation, treatment (for example IAPT) and use of the Mental Health Act

Any feedback regarding this tool would be much appreciated. If you find any issues, would like more information, or would like to discuss future developments, please email mhdnin@phe.gov.ukData, Documents, Letters, Reports & General InformationDELPH standards update – call for volunteersThe regional Delivering Excellence in Local Public Health (DELPH) standards were originally developed in 2013 to support self-assessment and the regional peer review programme. The standards are now due to be reviewed and we are looking for local authority volunteers to support this process. You would work with one or two others to review the standards for one of the DELPH domains (Health improvement, Health protection, Healthcare, Capacity building and Governance and systems) and identify any revisions needed. We anticipate that this is a process of update and minor revision, not a complete rewrite, and therefore should not be especially labour intensive. If you would like to volunteer, please email Alison.iliff@phe.gov.uk by Friday **14th September** indicating which domain you would like to review. Advice on the General Data Protection Regulation and primary school health data collectionsThe attached letter provides advice on the lawful basis under the General Data Protection Regulation (GDPR) for children’s personal information to be used for height and weight measurements, dental surveys and vaccinations in primary schools. The key message is that **no change** is needed to the current ways in which children’s personal information is used and shared for these primary school health data collections to be lawful under the GDPR. Appendix B is a letter from the programme lead for dental public health at PHE to Directors of Public Health, asking them to support local involvement in the 2018/19 survey. PHE has dental epidemiology co-ordinators (consultants in dental public health) based in PHE centres across England who will advise during the whole process, including commissioning of these surveys. Sexual Health job vacancy **919-AP-12401249-EXT- Sexual Health Facilitator - East of England** To view this vacancy, please use following link:<https://www.jobs.nhs.uk/xi/vacancy/ae9a8ae70d6cf8cd5e47e42d7b7e3afe/?vac_ref=915228970>Please note that the closing date for the advert will be **11 September 2018.**   **919-AP-13687952-EXT- Sexual Health Facilitator - Yorkshire and Humber**To view this vacancy, please use following link:<https://www.jobs.nhs.uk/xi/vacancy/baff098c832fc65e8a3e9493dd6f978b/?vac_ref=915228915>Please note that the closing date for the advert will be **11 September 2018.**    |
| Upcoming Meetings and Seminars |
| Fifth Annual North of England Inequalities Conference: Live Long and Prosper - People, Communities and Economies **Thursday 1 and Friday 2 November 2018** - what can devolution mean for the health and wellbeing of people and places across the North? This conference aims to bring together individuals from across the region to discuss, share and learn how we can all live long and prosper, closing the health gap between and within our communities. Hear from elected mayors, voluntary sector organisations, local enterprise partnerships, transport specialists, World Health Organization leads on healthy cities, NHS organisations, public health experts and leading academics. Speakers include Steve Rotheram, Metro Mayor of the Liverpool City Region, Duncan Selbie, Chief Executive of Public Health England and Professor Dame Margaret Whitehead, WH Duncan Chair of Public Health at the University of Liverpool. Bookings are now open. The conference will take place at Liverpool Football Club, Anfield Road, Liverpool L4 0TH. To see details about the programme and to book your place, please visit the [conference website](https://www.phe-events.org.uk/hpa/frontend/reg/homepage.csp?pd=54712&msID=9182&eventID=787). From data to decisions training workshopsDue to heavy demand, *From data to decisions: a foundation course in public health intelligence* will run twice in November – the first on 19 November is now full, but places are still available for the event in York on 26 November.This course will be useful for anyone new to public health or needing a refresher on public health intelligence. It will be particularly valuable to those working on health and its wider determinants within PHE or a local authority. However, it is also relevant to anyone else in the wider health system, including but not limited to those in partner organisations such as the third sector and blue-light services, and the wider CCG workforce.By the end of this course you will be able to:• Access and navigate key public health intelligence tools such as Fingertips, Health Profiles and Local Health• Communicate key messages derived from public health intelligence in an appropriate way to different audiencesThis course consists of two e-learning modules with accompanying workbook:• Introduction to public health intelligence• Measuring populationsfollowed by an interactive and hands-on workshop day.This course is free. You can register for the 26 November event via Eventbrite [here.](https://www.eventbrite.co.uk/e/from-data-to-decisions-a-foundation-course-in-public-health-intelligence-tickets-49135984051) Fuse Quarterly Research Meeting**Thursday 4 October 2018, 9.30am – 1.00pm****Durham County Cricket Club, Chester le Street, DH3 3QR**This QRM will offer an early opportunity to hear about, and engage with, the initial findings from an evaluation of Public Heath England’s (PHE) Prioritisation Framework (PF).  Launched in March 2018, the PF is intended to assist local authorities in making decisions about which areas of public health to invest and/or disinvest in.  Funded by the NIHR School for Public Health Research, the evaluation is being conducted by a team of researchers from Newcastle and Northumbria universities and seeks to assess the implementation and impact of the PF in three early adopter local authorities.  Commencing in January 2018, the evaluation is expected to be completed by December.  Insights will be presented into how the PF is being used in a political context, how PHE Centres are providing support and facilitation with using the new tool, and what changes or adaptations might be needed to assist with rolling out the PF nationally.  A draft programme and registration are available on the fuse [website](http://www.fuse.ac.uk/events/fusequarterlyresearchmeetings/toinvestornottoinvest.html) **Social Relations, Health and Well-being and the Case of the Missing Evidence**Leeds Beckett University are delighted to invite you to the Professorial Inaugural Lecture of Professor Anne-Marie Bagnall, Social Relations, Health and Well-being and the Case of the Missing Evidence to be held:**Wednesday 3 October 2018****18:00 - 19:00****Rose Bowl, City Campus, Leeds Beckett University, LS1 3HB**In 1948, the World Health Organisation defined health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”, as a resource for living a full life. Yet physical, mental and social well-being continue to be unequally distributed.In 1986, the Ottawa Charter for health promotion called for “empowerment of communities - their ownership and control of their own endeavours and destinies”, and in 2016 the Vienna Declaration for Public Health called for “information as a means to give voice to the weak and to make the invisible visible”.This lecture will draw on findings from Anne-Marie’s research in community engagement, community well-being, social isolation and loneliness, to explore what information is still missing from the evidence base, who and what is still ‘invisible’ and whose voices still need to be heard.[Click here to book.](https://www.eventbrite.co.uk/e/professorial-inaugural-lecture-by-professor-anne-marie-bagnall-tickets-43390154119)  |
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