Sunderland East Area Committee

8 March 2010

Report of the Chief Executive

Sunderland East a Healthy Area Summary

1.0 Why has it come to committee?

1.1 At it's meeting in June, the committee agreed it's work plan for the 2009/10 municipal year and the Healthy theme is the fourth to come to committee for discussion and consideration. The priority being focus on is to provide more opportunities for people to take part in sport and exercise by subsidise access to sport and exercise and improve methods of engagement to tackle the highly complex matter of obesity.

2.0 Description of Decision (Recommendation)

- 2.1 Area Committee are asked to agree the actions identified:-
 - Lead: Area Committee
 Committee to suggest appropriate locations for the Sunderland Active Bus, to deliver a 12 week timetable within Sunderland East to engage the community and support those who are not sufficiently active and signpost them to activities or support services, if required.
 - ii) Lead: Sunderland City Council, Wellness Services
 A number of projects to be delivered engaging with individuals within this geographic area ensuring opportunities are effectively communicated to them and where appropriate provision is created. Develop and deliver a core offer which connects communities with sport and physical activity opportunities which includes wellness, swimming, play and sport.
 - iii) Lead: Teaching Primary Care Trust Providers (TPCT)
 Gather more information regarding healthy lifestyle activities commissioned by the TPCT and how the Area Committee can provide support.
 - iv) Lead: Area Committee Refresh priorities in light of the health profile for the area shown 8.0 of this report.
 - v) Lead: Joint Strategic Need Assessment (JSNA) Investigate and feedback on the new and ongoing commissioning intentions and interventions to improve health and social care in the City, covering Sunderland East for 2009-10.

3.0 Sunderland City Council, Wellness Services

- 3.1 Sunderland's unique Wellness Service has developed within the City with the primary aim to improve individual's health and well-being through the provision of physical activity opportunities, lifestyle advice and education within Wellness Centres and in the local community.
- 3.2 The key principles of the Wellness Service is to shift the balance from treatment services to preventative measures and provide Wellness opportunities either as an alternative or support for treatment. As a result of a fully engaged scenario with a range of key partners the services reaches and impacts on the individuals that are most in need and subsequently is contributing to reducing the inequalities that are so prevalent within Sunderland. Further information on the services delivered is available in Annex 1.

4.0 Joint Strategic Needs Assessment (JSNA)

- 4.1 The JSNA is the process by which TPCT and Councils, work in collaboration to identify health and well being needs of the City. It does this is two main ways:
 - i) Provides an insight into the current and future health, wellbeing and daily living needs of local people by studying intelligence and perceptions on inequalities across neighbourhoods and local communities. In this way it informs both the Local Area Agreements, and longer term future strategic planning.
 - ii) Informs the commissioning services and interventions aimed at improving the health and well being outcomes of local people and help reduce any unfairness within existing services or interventions.
- 4.2 Running parallel to East Area Committee identifying the need to improve access to sport and leisure and tackle obesity as it's priority under Healthy theme during 2008-09, the JSNA also identified a similar need and developed a range of targeted services across three age groups, children and young people, adults and older people. Further information on the JSNA is available in Annex 1 or by logging onto http://www.sunderlandtpct.nhs.uk/sunderlandhome.aspx.

5.0 Sunderland City Council, Children Services - Letsgo card

- 5.1 Letsgo card was one of nine pilots funded by Department for Children, Schools and Families (DCSF) to test a hypothesis that 'Empowering individual disadvantaged young people to take part in positive activities of their choice through access to spending power increases their participation in such activities and contributes to educational engagement and other beneficial outcomes. Letsgo card was live from April 2008 to May 2009. In the 14 months, 2001 young people used their Letsgo card spending power making a difference to some of the most vulnerable young people in Sunderland, the average young person spent £203. Disability, age and ethnicity were not barriers to using Letsgo. This proved the DCSF hypothesis that having access to spending power does increase engagement in positive activities.
- 5.2 The achievements were considered to be a success in the 14 months that Letsgo card was live. This was a brand new concept involving internet technology and decisions about taking part in events had to be made in advance, young people were not used to having access to spending power in this way and some had not previously participated in activities.
- 5.3 ICT colleagues broke new ground with the innovative technical solution developed in conjunction with national and international organisations. ICT are working other parts of the Council to re-use some of the technology developed. Further information is available by logging onto www.letsgosunderland.com

6.0 Sunderland East a Healthy Area Snap Shot

6.1 The table below provides a Sunderland East snap shot, at a ward level, on key health measures. It identifies several areas of need.

Red = unhealthy (above City average)

Green = Healthy (below City average)

Measure	City average	Doxford Ward	Hendon Ward	Millfield Ward	St Michaels Ward	Ryhope Ward
Life expectancy	76.4 yrs	78.9	72.2	75.2	76.8	76.1
Mortality rates from circulatory disease	108 per 100,000 pop.	102.39	170.48	74.68	62.19	91.11
Mortality rates from cancer	136.15 per	138.50	181.01	141.13	105.96	118.31

	100,000					
	pop.					
% of residents smoking	25%	19%	28%	28%	23%	29%
Residents self reporting	18%	15%-	19.5%-	19.5%-	11.5%-	15%-
obesity BMI 30+		18%	24.5%	24.5%	15%	18%
Hospital admission due to	610-1180	0-300	610-	610-	300-410	480-610
alcohol related harm	per		1180	1180		
	100,000					
	pop.					
Children in Need	4.1%	2.4%	8.8%	6.3%	2.9%	3.1%

7.0 Issues for Consideration

- 7.1 There is evidence that poor planning around transport and the provision of leisure services will increase the likelihood of obesity.
- 7.2 To deliver sustainable health improvement, strategically we need to focus on those core causes of poor health and maximise local people's opportunities to benefit.
- 7.3 Healthcare market analysis has also been carried out as obesity is already a strategic priority for the TPCT and within the Community Strategy. This market analysis shows that whilst adult services are meeting current demand, that as demand increases, additional capacity and a larger menu of choices will be required. Children's services require further development and clearer pathways. The desired state is that 2010-11 the TPCT will have developed a fact-based understanding of what services deliver results and to prioritise services for patients in need of services most. A common set of performance metrics by which obesity services can be measured is being implemented, recognising that it may take up to 18 months to evaluate the services as the programmes are 12 months long. Providers will be encouraged to develop more targeted adult services in order to increase capacity to meet demand, and finally, the TPCT will need to ensure providers can invest in key specialist role services and offer patients more choice by developing these in a community setting.
- 7.4 The Fitness Friday and Saturday night scheme, currently delivered at Raich Carter, which provides sporting activity alongside youth based work has had a significant impact on the number of youth related ASB incidents in the area and attitudinal surveys have shown a change in young people's attitudes, including reductions in substance misuse, drinking and risk taking behaviour. The project engages with approximately 150 young people per evening and made a significant contribution to the development of joint thinking between agencies. The project is currently funded by Back on the Map NDC, however, this will eventually be exhausted so partners are currently looking at ways to sustain this activity. The annual costs of the Raich/Hendon model, is circa £80,000 for two sessions per week, with the relevant staff delivery and indeed relevant partner agencies playing their role to support and signpost.
- 7.5 The Letsgo card was considered by young people, activity providers, staff supporting young people and the project team found this to be extremely beneficial. It did prove the DCSF hypothesis that having access to spending power does increase engagement in positive activities. Access to information and support were contributing factors. All of the processes used were documented so that a similar scheme could be re-introduced in the future if funding became available.

8.0 Refreshing priorities

8.1 It is evident that levels of deprivation, including child poverty, remain high, particularly in certain parts of the City. Lower than average educational attainment, the affordability of

housing, standard of private sector housing, and levels of worklessness, are all key themes identified in the JSNA and further consideration also needs to be given in future years to the links between health and poor planning. The shifting demographic of increasingly older population, and a decline in the number of people aged 18-64 also provides key challenges.

8.2 In being strategic about health improvement and knowing what we do with regard to the Sunderland East Area Profile from the snap shot provide above, there is a need to refresh and expand the priorities to include tackling smoking and alcohol, as this will directly increase life expectancy. We also have evidence that confirms that sexual health and teenage conception rates are high in the area, principally for people aged under 25 years.

9.0 Background papers

- Sunderland East Local Area Plan
- Joint Strategic Needs Assessment (JSNA), Sunderland 2009 Refresh
- Project Evaluation Report for Letsgo Card/ Empowering Young People Pilot

10.0 List of Appendices

• Annex 1: Background information

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Annex 1 – Background information

Sunderland City Council, Wellness Services:

Preventative - Active Bus

The Sunderland Active Bus has been developed in partnership with Sunderland's Active Board, SAFC Foundation, Sport England and Sunderland Teaching Primary Care Trust. The Active Bus is equipped to carry out health and fitness checks for anyone who jumps aboard. A team of 'activators' will then take time to explain the results of the health checks, and identify sports and physical activity opportunities which could benefit the customer. This could be directing them to a local walking club, yoga class or a sports club.

Preventative - Wellness Centre

One component of the Wellness Service is the city wide network of co-located facilities and programmes. These Wellness Centres, equipped with the latest Technogym equipment, offer opportunities for all residents to participate in programmes of physical activity, as well as receive support specifically designed around their needs. Two exist in Sunderland East: Ryhope Community Association, in Ryhope, and Hudson Road Primary School, in Hendon.

Preventative - Community classes for those over 50's

Exercise classes for people over 50 began in September 2008. Classes are tailored to the needs of individuals and include both seated and standing exercise. The classes improve mobility, balance and co-ordination which decrease the likelihood of falls and increase ability to continue to live independently into old age.

Preventative - Mums on the move (MOTM)

The Mums on the move programme is designed to provide safe, suitable exercise for new mothers. An appropriately qualified instructor leads a session in which new mothers attend, complete with their pushchairs and child. Sessions take place outdoors and promote improved social and mental well-being for the mother, and also physical activity suitable to the participant's physical condition.

Preventative - Wellness on 2 Wheels (WO2W)

The Wellness Service received funding from STPCT to increase physical activity opportunities for its employees over the summers of 2008 and 2009. We have offered employees the opportunity to take part in supervised, free of charge bike rides. The Wellness on 2 Wheels Summer Cycling Programme was viewed as a safe and fun way to introduce participation in physical activity. Bikes, helmets and equipment were provided for all employees who took part and staff also had the opportunity to take along their own bike if they preferred.

Preventative - Wellness.....its a walk in the park

The Wellness Service is in the process of developing, producing and marketing a citywide walking programme. The programme will involve developing a number of 'way marked' routes in 10 city parks, two in each of the city's five areas. Dependent on the size of the park, routes will typically be 1, 2 or 3 miles in distance and will be suitable for walkers, runners, wheelchair users and pushchairs. It is anticipated that these walks will be complete and promoted by Autumn 2009

Preventative - Free Swimming

Sport and Leisure provide an affordable pricing policy for Sunderland City Council leisure facilities ensuring affordable opportunities exist for all. Free swimming available at Raich Carter Centre for those under 16 and those over 60 at various times.

Targeted Intervention - Sunderland Exercise Referral and Weight Management Programme

In April 2008 Sunderland Wellness Service was successfully commissioned to review, recruit, re-launch, manage and deliver the new Sunderland Exercise Referral and Weight Management Programme. This programme is an innovative example of an exercise referral system that has evolved out of necessity to meet the health challenges of a diverse city, and ensures that people at risk are identified sooner, and referred onto the appropriate support pathway. These currently take place at the following venues in the East, Hudson Road School, Ryhope CA and the Raich Carter Sports Centre.

To enable expansion a further 10 dedicated staff were appointed into Sunderland Wellness Service as Wellness Exercise Referral Consultants. To ensure the appropriate teams of individuals were delivering the weight management strand of the programme, City Hospital Dietetic Department were also commissioned by STPCT to expand their team of Dieticians and Community Nutritionists to deliver the educational components. Success of this programme to date includes 100% compliance from all the cities GP practices, over 125 GP's and Practice Nurses refer patients.

Targeted Intervention – Maternity Lifestyle Programme

From September 2009, a maternity lifestyle exercise specialist will promote the benefits of physical activity, nutrition and assist with improved lifestyle choices for pre and post natal women and their families within Sunderland. The role of the post holder will be to address specific lifestyle factors with families of new born children which put them at risk of poorer health. The programme will target and offer support to families (mother, partner and siblings) who are pregnant and up to one year after delivery.

Other general work areas include Beacon for reducing health inequalities and Sunderland Wellness Guides

Joint Strategic Needs Assessment

Children and young people

In high levels of children who are overweight or obese, figures show that 15.6% of reception year (4 and 5 year olds) are overweight and 12.6% obese and 17% of year six (10 and 11 year olds) are overweight, 21.4% are obese.

Services were developed that promoted physical activity, healthy eating and psychological support for overweight pregnant women, babies and toddlers identified as becoming overweight, children and young people, children and their families identified as overweight and obese as part of the National Child Health Measurement Programme. A National Support Team visit has provided local recommendations. Successes included an increased focus on the development of play and urban games. The Food in Schools Team has been sustained beyond the initial phase based on evaluation. The Healthy Schools Programme has had additional support via a newly appointed co-ordinator. The outcome being local children, young people and their families should have access to a wider range of services across Sunderland. These services will provide for the prevention of obesity and well as targeted support for those children and young people who are already overweight or obese.

Adults

Predictive modelling was used to suggest to nearly 50,000 adults locally who could benefit from new services. Investment in comprehensive adult obesity services from community to bariatric surgery. The TPCT has commissioned a range of services across the City to support adults to increase physical activity and eat healthily and manage weight. These include slimming on referral via GP practices, community based exercise on referral and weight management delivered via the city's Wellness Centres, and specialist weight management delivered by City

Hospitals and Wellness as well as increased access to bariatric surgery. Services are all now in place. A joint approach with SAFC Foundation is underway and with Sunderland University to ensure services are in place. Local people are also being referred to obesity services via the NHS Health Check Programme. Further information is available in Annex 1. The outcome being people referred to the obesity services and some promising outcomes are being seen (slimming on referral). There are no adult LAA indicators for obesity; however improving adult obesity will have an impact on children. In addition this will have an impact on mortality rates, as well as reducing hypertension, cholesterol levels.

Older People

There are 9,458 people aged 60 years and over living in East Sunderland, and this population is set to rise by 30% in 20 years (with an even larger increase in the number aged 85 and over), as the population ages nationally, at the same time as the younger population is currently predicted to decline. The adults section highlighted the key health issues that face local people – heart disease, stroke, other long term conditions (including diabetes, chronic obstructive pulmonary disease) as well as lifestyle issues of tobacco, alcohol, obesity. For many of these conditions the prevalence is higher for older people and increasing the quality of life as well as length of life becomes increasingly important.