

Introduction from the
Director of Public Health



WHO WE
WORK WITH

BARNNSLEY

A Public Health Council



PUBLIC
HEALTH
STRATEGY

BARNNSLEY
COUNCIL
DISTRIBUTED MODEL
of Public Health

CORE
PUBLIC
HEALTH

COMMUNITIES
DIRECTORATE

PLACE
DIRECTORATE

MY LOCAL AREA

PEOPLE
DIRECTORATE

BARNNSLEY'S POPULATION

RECOMMENDATIONS

HOW TO USE
THIS DOCUMENT



How to Use This Document...

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To go to the **Home Page**
click this button

To navigate **Left & Right**
click these buttons

To go to the **Contents Page**
click this button

Message from the **Director of Public Health**

“ Welcome to Barnsley Council’s 2015-16 report from the Director of Public Health (DPH)

This is my first report as a DPH, having taken up the post a year ago. In the past, our Annual Reports have been long printed documents. This year we decided to produce an interactive PDF so the report can be read online more easily and to reach a wider audience. Our aim is to present a lot of useful information in a more engaging way so readers can easily pick out the areas they’re interested in and find out more.

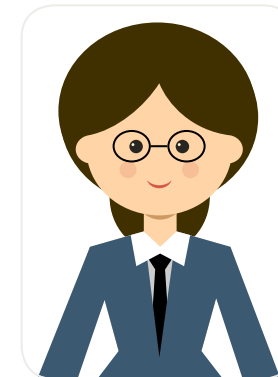
We have structured the report around our new **‘distributed model’** of public health. You will find information on the varied work of the council that relates to public health, based around four directorates: **Communities, People, Place and Core Public Health**. If you would like to read about local health data, this can be found through the **‘Barnsley’s population’** and **‘My local area’** pages.

The report shows there are many health challenges in Barnsley. Local government funding is under pressure like never before and we have seen significant cuts to our public health budget. This makes the challenge of preventing ill health all the harder given the well-established impact of wider determinants (income, employment, housing, education) on health.

However, public health should also give a message of hope. Our report highlights some of the great things we are doing and can do to improve people’s health and wellbeing, and shows how we are working across the council and our partners for a healthier and happier Barnsley. Some of the work we describe is at an early stage of development, but hopefully shows we are moving in the right direction. While the financial environment feels as bad as it could be, the people and organisations working in Barnsley couldn’t be more committed to making a difference. Each section of the report ends with specific commitments from each area of the council that will contribute to improving health and wellbeing in Barnsley. By implementing our distributed model of public health, the council has shown its commitment at every level to creating a ‘public health council’.

We recently published our public health strategy: **‘A Happier, Healthier Barnsley’** which sets out our plans for the next three years, and this strategy forms the basis for our key **recommendations**.

I hope you enjoy reading the report. ”



Julia Burrows
Director of Public Health

A Healthier Happier Barnsley is our three-year Public Health Strategy for the borough.

- OUR VISION -
WORKING TOGETHER FOR
A BRIGHTER FUTURE
A BETTER BARNSLEY

PUBLIC HEALTH STRATEGY

- OUR VISION -
WORKING TOGETHER FOR
A BRIGHTER FUTURE
A BETTER BARNSLEY

THE PUBLIC HEALTH STRATEGY WILL CONTRIBUTE TO ACHIEVING A BRIGHTER FUTURE AND A BETTER BARNSLEY BY ENSURING CHILDREN HAVE THE BEST START IN LIFE AND EVERYONE ENJOYS A HAPPY HEALTHY LIFE WHEREVER THEY LIVE AND WHOEVER THEY ARE.

THE THREE BARNSLEY COUNCIL PRIORITIES WHICH WILL HELP US ACHIEVE THE VISION ARE:

**THRIVING &
VIBRANT ECONOMY**

PEOPLE ACHIEVING THEIR
POTENTIAL

**STRONG & RESILIENT
COMMUNITIES**

WE WILL CONTRIBUTE TO THE THREE PRIORITIES THROUGH OUR FOUR LONG TERM PUBLIC HEALTH OUTCOMES:

Our residents will start life healthy and stay healthy

Our residents will live longer healthier lives

We narrow the gap in life expectancy and health between the most and least healthy

We protect our communities from harm, health incidents and other preventable health threats

TO DEMONSTRATE WE ARE MAKING A DIFFERENCE IN A SHORTER TIMESCALE WE WILL FOCUS ON THREE PUBLIC HEALTH PRIORITIES:

Improving oral health of children

Creating a smokefree generation

Increasing levels of physical activity

The strategy demonstrates the commitment of the council to work with partners to actively improve the health of all people living in Barnsley. It outlines our public health vision: 'Children have the best start in life and everyone enjoys a happy healthy life wherever they live and whoever they are'.

Who we work with

Barnsley Council works with many different organisations across Barnsley and the wider area. There are too many organisations to name them all on this page, but our partners include:

- **Barnsley Clinical Commissioning Group (CCG)** - a group which plans and buys healthcare services, representing 38 GP practices across Barnsley. Public health staff provide advice to the CCG on a wide range of topics.
- **Barnsley Hospital NHS Foundation Trust** - a 350+ bed hospital which provides a full range of district hospital services. One example of the council's work with the hospital is the link with the infant feeding service.
- **South West Yorkshire Partnership NHS Foundation Trust** - a specialist NHS trust which provides community, mental health and learning disability services.
- **Public Health England** - an organisation which aims to protect and improve the nation's health and wellbeing, for example through vaccination and immunisation.
- **South Yorkshire Police** - the local police force, which works with the council on areas such as antisocial behaviour, troubled families and suicide prevention.
- **South Yorkshire Fire and Rescue** - the local fire brigade. One example of the council's involvement with the fire service is work on suicide prevention.
- **Healthwatch Barnsley** - an organisation which makes sure residents' views on local health and social care services are heard.
- **Barnsley Health and Wellbeing Board** - a committee bringing together organisations aiming to improve the health and wellbeing of communities and people in Barnsley.

*We also work with local **schools, businesses and voluntary organisations.***

Through working together with our partners, we hope to address population-level challenges that no single agency can address on its own, such as joint approaches to preventing and managing childhood obesity and increasing physical activity.

Barnsley Council's

Distributed Model of Public Health

In 2015, Barnsley Council decided to change the organisation of public health within the council from one central public health team to a model where public health staff are based in different directorates and business units. In this model, different directorates are responsible for making progress against specific **Public Health Outcomes Framework** indicators.

The distributed model allows us to address the borough's public health challenges as a public health council. We recognise that we need to **work collectively** to build a sustainable public health system in Barnsley. This means that the council, the

NHS, police, fire, probation service, schools, employers, businesses, voluntary and community agencies and others across the borough, all have a role to play. No single agency has the answer, and we must all work together, playing our parts and playing to each others' strengths.

Through creating a public health council we hope that all council staff and elected members will consider health and wellbeing to be part of their responsibility, so that any council contact with the public can be seen as an opportunity to promote health and wellbeing ('making every contact count').



Barnsley's population

Although the health of residents in Barnsley is improving, too many people are dying prematurely from diseases that are avoidable.

The table below shows the differences in life expectancy for Barnsley compared to regional and national figures. Life expectancy is a measure of the number of years someone from a particular area is expected to live, whereas healthy life expectancy is a measure of the number of years someone would be expected to live in good to fairly good health.

		Barnsley	Yorkshire & Humber	England
Life expectancy (years) 2012-14	Male	78.4	78.7	79.5
	Female	81.8	82.4	83.2
Healthy Life expectancy (years) 2012-14	Male	57.5	61.4	63.4
	Female	56.3	61.8	64.0

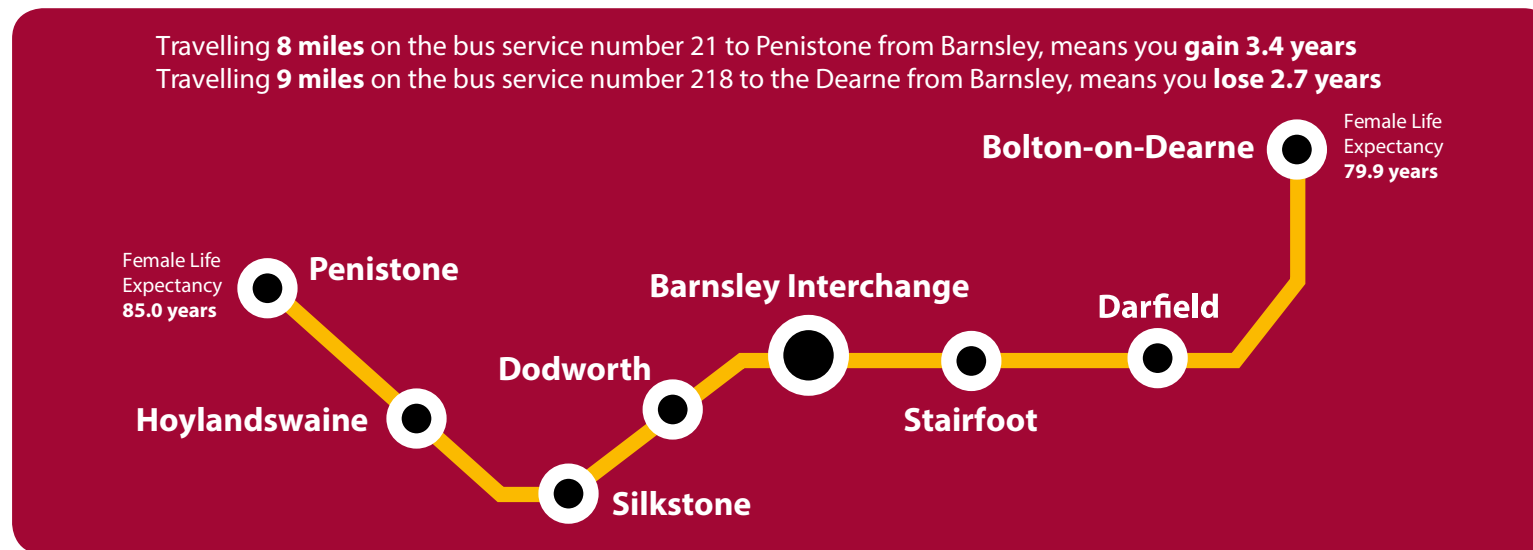
Source: Public Health Outcomes Framework (Feb 2016)

Although life expectancy is increasing in Barnsley, it is still lower than the national average. Healthy life expectancy is much lower than the national average and Barnsley has the lowest rate of healthy life expectancy when compared to all statistical neighbours.

Barnsley's population

The picture below shows how life expectancy in Barnsley varies along two bus routes through the borough:

Differences in Female Life Expectancy within Barnsley (2009-2013): The bus journey of inequality



There are a number of reasons for this significant local variation:

- Too many people have avoidable disabilities caused by lifestyle choices such as: smoking, obesity, poor diet, low levels of physical activity and excess alcohol consumption.
- Too many people die early from preventable diseases such as cancer, heart disease and stroke.
- Smoking remains our biggest cause of avoidable death.
- Being overweight or obese is reducing the life expectancy of too many of our young people and adults.
- A high number of people have preventable mental ill-health conditions.

My local area

Detailed information about the health of the Barnsley population can be found in the following documents:

- Public Health England's **Health Profile** provides an picture of health in Barnsley in 2015
- The **Joint Strategic Needs Assessment (JSNA)** assesses the current and future health and social care needs of the local community. The current JSNA is from 2013 and a new JSNA will be available at the end of 2016.

Health Inequality profiles for Barnsley and areas within Barnsley can be accessed by [clicking on the map below](#)



Recommendations

OUR VISION: Children have the best start in life and everyone enjoys a happy healthy life wherever they live and whoever they are.

Barnsley Council will focus on four long term public health outcomes:

- 1.** Our residents will start life healthy and stay healthy
 - 2.** Our residents will live longer healthier lives
 - 3.** We narrow the gap in life expectancy and health between the most and least healthy
 - 4.** We protect our communities from harm, health incidents and other preventable health threats
- 1.** Improving the oral health of children by increasing the percentage of Barnsley children getting fluoride, using a targeted approach by 2017
 - 2.** Creating a smokefree generation by reducing smoking prevalence in Barnsley by 2017
 - 3.** Increasing levels of physical activity by reducing the percentage of Barnsley residents who are physically inactive by 2017

The responsibility for delivering these outcomes lies not only with Barnsley Council's public health distributed model but also with collective working across many organisations within Barnsley.

We recognise that we must focus our resources in order to achieve the biggest impact on public health and wellbeing. Therefore, in the shorter term, Barnsley Council will **concentrate on three areas:**

Barnsley Council's Public Health Strategy contains more detail on how these recommendations will be achieved.

More detailed recommendations are described throughout this report in the 'Our commitments for the future' boxes which can be found at the bottom of most pages.

COMMUNITIES

DIRECTORATE

The following pages contain information on areas of work within the Communities Directorate of Barnsley Council, which encompasses areas of public health intended to make our communities safer, stronger and healthier.

This directorate is involved with many different areas related to public health such as housing, infant feeding, supporting troubled families, policing, volunteering and planning health services.

Safer Communities

Stronger Communities

Healthier Communities



We all want to live in a community that is safe and welcoming, where people get along together and our shared efforts on crime prevention are making a difference.

A fear of crime, anti-social behaviour and environmental blight has a detrimental impact on people's wellbeing and the fear of crime increases a person's feeling of worry, stress and anxiety. Additionally, places with high crime and poor environments do not attract developments.

WHY IS THIS IMPORTANT IN BARNSELEY?

- Reducing incidences of anti-social behaviour, environmental blight and domestic violence are priorities for Barnsley Council.
- As fear of crime and anti-social behaviour is reduced, victims will be more able to recover from their experiences with positive changes to their physical and mental health.

WHAT ARE WE DOING IN BARNSELEY?

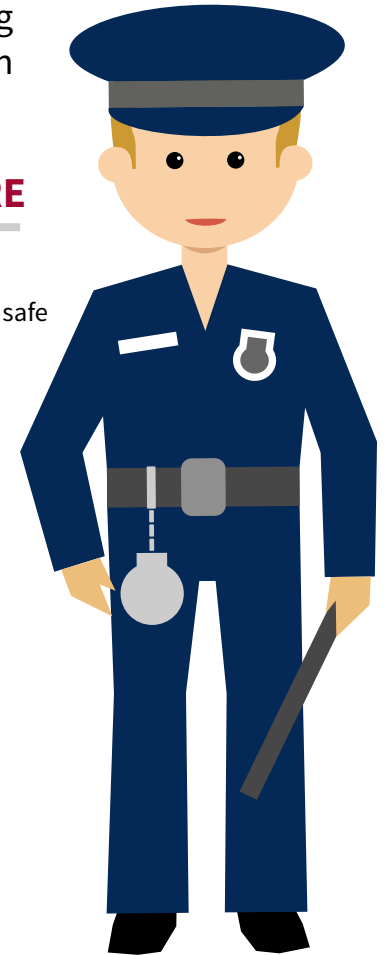
BARNSELEY COUNCIL IS:

- Working together with partners and the community to make sure the right people and resources are in place to make our neighbourhoods safe and welcoming places to live.
- Developing a new plan for Community Safety.
- Working proactively with a range of partners to improve safety and the quality of life in our neighbourhoods with a focus on early intervention and prevention. This work aims to make our communities safer, more cohesive and resilient places to live.
- Continuing to offer free and accessible information and advice to individuals, families and communities.
- Working harder to understand the root causes of crime and preventing them from happening in the first place.

OUR COMMITMENTS FOR THE FUTURE

BARNSELEY COUNCIL WILL:

- Work on a "whole system approach" to build and maintain safe and resilient communities.
- Have a stronger focus on preventing crime.
- Make it easier for people to report crime.
- Utilise campaigns to raise awareness.



We all want to live in a thriving community where everyone feels valued and can make a positive contribution to their local area, regardless of who they are or how old they are. We want to build communities where everyone feels that their views are important and heard.

The strength of every community lies in the commitment of the people who live there and their passion to make it a special place that everyone feels proud of and can be part of. If we can unlock the capacity within our communities and support the willingness of people to help each other, our communities will become stronger, better places to live.

WHY IS THIS IMPORTANT IN BARNSELEY?

- Barnsley Council needs to enable and empower communities to achieve great things by coordinating activity at a local level to meet the needs of the local community.
- We need to work together to build resilience by supporting communities to help themselves and by building strong neighbourhood networks and increasing community engagement.
- Volunteering builds social connections and is a great way of meeting new people and reducing social isolation. It is also recognised as a potential route to gaining employment through 'hands on' volunteering by developing new skills and experience. Volunteering is a great way to get people involved in their local communities.
- Public sector resources are reducing so working together to ensure our communities remain strong is essential.

WHAT ARE WE DOING IN BARNSELEY?

BARNSELEY COUNCIL ARE:

- Continuing to build on the 'Love Where You Live' campaign to encourage people to volunteer and to find ways to make their local community a better, stronger and healthier place.

- Developing more community groups.
- Improving our relationships with businesses so that they contribute more to local communities.
- Working much harder at designing services around our communities' needs.
- Developing the voluntary, community and social enterprise sector to be strong.
- Increasing the external funding that comes into the borough. Area Councils and Ward Alliances are working in partnership with their local communities to identify a range of projects that could increase physical and mental wellbeing.

OUR COMMITMENTS FOR THE FUTURE:

BARNSELEY COUNCIL WILL:

- Continue working with communities to find local solutions to local issues.
- Work together with partners and communities to make Barnsley a better place to live and work.
- Celebrate the progress made every day in our communities.
- Work to increase the external funding that comes into the borough.

We all want to live in a thriving community where people live long, healthy, happy and fulfilled lives, free of illness and disease regardless of who we are or how old we are.

Supporting people to lead a healthier life, free of illness and disease is everyone's business. Giving every child in Barnsley the best start in life is Barnsley Council's commitment to investing in tomorrow. The health and wellbeing of people in Barnsley is generally worse than the England average, with life expectancy for both men and women lower than the England average.

WHY IS THIS IMPORTANT IN BARNSELEY?

- Nationally and locally, due to changes in welfare benefits, the cost of living and the employment market there has been an increase in the number of people who are struggling to keep a roof over their head.
- The most deprived people in society experience the worst physical and mental health, a problem known as health inequality. It is therefore important to consider health inequalities when commissioning services so that everyone can benefit from improved health.

WHAT ARE WE DOING IN BARNSELEY?

THE HEALTHIER COMMUNITIES TEAM:

- Are responsible for commissioning a range of prevention and treatment services to support people with multiple, complex and diverse needs.
- Lead on welfare advice and homeless prevention, the Troubled Families Programme and support anti-poverty and early help across the council.
- Empower people and communities to do more for themselves.
- Commission services that incorporate early intervention, prevention and self-help.

- Make sure services are driven by the needs of people in Barnsley and represent value for money.
- Ensure we deliver inclusive and accessible services for all.

In 2015, a total of 371 Barnsley families had been supported by the Troubled Families Programme and there were 2,095 contacts to the Housing Options Team seeking advice about housing and support.

Our Infant Feeding Service provides support to mothers and their families. Barnsley Hospital and Community are UNICEF UK Baby Friendly Initiative accredited, which ensures all staff are trained to support all mothers in their feeding choices.

OUR COMMITMENTS FOR THE FUTURE:

BARNSELEY COUNCIL WILL:

- Commission evidence based and high performing prevention and treatment services that are responsive to customers' needs now and in the future.
- Commission services that promote positive physical and mental health, provide early help and self-help options.
- Ensure money is spent well to achieve the right outcomes for local people.

PEOPLE DIRECTORATE

The following pages contain information on areas of work within the People Directorate of Barnsley Council. The Health and Wellbeing Team within this directorate work on areas of public health ranging from children to older people, including:

Early Help for Children and Young People

Emotional Health and Wellbeing of Children and Young People

Public Mental Health

Preventing Falls and Improving Bone Health in Older People

Preventing Dementia



Vulnerable Children and Young People (Early Help)

Giving every child the best start in life is crucial for sustaining health throughout life and into older age.

Vulnerable children and young people are those who fall into several groups which have a greater risk of developing a variety of health issues, including those:

- Who have special educational needs (SEN)
- With physical disabilities
- Who are in care or looked after
- Committing offending behaviour and accessing Youth Offending Services
- Involved in Substance Misuse including drugs and alcohol
- Accessing mental health services
- Living with domestic violence at home

WHY IS THIS IMPORTANT IN BARNSELEY?

- Children and young people under the age of 20 make up 23% of the population of Barnsley. Although infant and child death rates are similar to the England average, the health and wellbeing of children in Barnsley is generally worse than the England average.
- Early help is about identifying the need for help for children and families as soon as problems start to emerge, or when there is a strong likelihood that problems will emerge in the future. The Early Help Assessment (EHA) is a new assessment designed to help professionals from various agencies, such as teachers, family support workers and GPs to make an accurate record of the needs of a child, young person or family.

WHAT ARE WE DOING IN BARNSELEY?

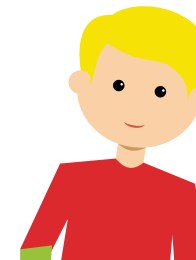
PUBLIC HEALTH STAFF IN BARNSELEY HAVE:

- Started to map out the help available to vulnerable children and young people.
- Provided expertise to the Early Help Delivery Group under the Stronger Communities Partnership.
- Made links with schools, and contributed to the Closing the Gap work programme under the Schools Alliance Board.
- Identified opportunities to support Safeguarding and Looked After Children work programmes.
- Contributed to the development of the Children and Young People's Plan.
- Provided expertise for the commissioning of a Substance Misuse Service for children and young people.

OUR COMMITMENTS FOR THE FUTURE:

BARNSELEY COUNCIL WILL:

- Prevent mental health problems from arising by taking early action with those at greater risk.
- Identify need early, to prevent more serious problems developing wherever possible.
- Review work in this area to identify best practice and areas for improvement.



Emotional Health and Wellbeing of Children and Young People

Emotional health and well-being is important because it can impact on a child or young person's day to day functioning at home and at school, their relationships with others, and their physical health.

Sometimes when a child or young person is worried or has a problem it can be difficult to know what to do. They may find it hard to know why they feel upset, worried or confused, or to know where to turn to.

WHY IS THIS IMPORTANT IN BARNSELY?

Giving every child the best start in life is crucial for sustaining health throughout life and into older age and this is a key priority for Public Health in Barnsley. We know from our surveys of young people that some children in Barnsley experience emotional health and wellbeing issues and concerns, for example:

- Nearly 10% of respondents felt anxious due to bullying either 'often or daily'
- Over 20% felt anxious about how they look either 'often or daily'
- Nearly 10% had been worried about eating problems either 'often or daily'
- Nearly 12% said they 'never' felt happy at school
- Over 12% said that they didn't have anybody to talk to about their problems

WHAT ARE WE DOING IN BARNSELY?

All partners in the borough have welcomed NHS England's 'Future in Mind' report, which promotes early help and prevention across education, social care and health. In response to this report, a local detailed transformation plan has been developed and investment will be allocated towards local services for children and young people with mental health needs.

The public health team has made a significant contribution to our Barnsley local transformation plan which outlines a shared determination to transform emotional health and wellbeing services to make a difference to the lives of children and young people.

OUR COMMITMENTS FOR THE FUTURE:

Public Health continues to work collaboratively, leading on the following within Barnsley's local transformation plan:

- Working with schools and early years settings to improve the emotional health and wellbeing and resilience of children and young people.
- Promoting a whole school approach to emotional health and wellbeing resilience, by supporting children and young people and their families to adopt and maintain behaviours that support good mental health.

Further recommendations can be found in the **Future in Mind report.**

Public Mental Health

The UK government has said that mental health must have equal priority with physical health, discrimination associated with mental health problems must end and everyone who needs mental health care should get the right support, at the right time.

Currently, people with serious mental illnesses die on average 15-20 years earlier than the general population.

Loneliness and social isolation are harmful to health and are associated with depression and suicide. We know that being in control of our own lives and having good relationships, purposeful activities and participation in our communities improves our mental and physical health.

WHY IS THIS IMPORTANT IN BARNSELEY?

The percentage of adults with a diagnosis of depression is higher in Barnsley at 16% compared with an England average of 12%. There are clear links between levels of deprivation and levels of depression / anxiety.

Many lifestyle factors that lead to mental health problems are common within Barnsley, such as smoking, poor diet, a lack of exercise and high levels of alcohol consumption.

WHAT ARE WE DOING IN BARNSELEY?

Working together with other partners such as South West Yorkshire Partnership NHS Foundation Trust, the public health team have:

- Supported the development of the Barnsley All Age Mental Health Strategy 2015-19.
- Secured additional funding through the Local Transformation Fund to deliver an emotional health and wellbeing programme in local schools.
- Raised the profile of Mental Health Champions and now have support of an elected member of Barnsley Council.
- Supported the Autism Strategy by helping to create and promote Safe Places in Barnsley.

OUR COMMITMENTS FOR THE FUTURE:

The public health team will continue to work collaboratively to:

- Lead a health needs assessment to assess local need.
- Review prevention support available to Barnsley residents, assess whether this meets people's needs and identify opportunities for new ways to prevent mental health issues.
- Develop a work programme to support prevention of social isolation.
- Identify opportunities to reduce health inequalities.
- Actively contribute to the improvement programme for Children and Adolescent Mental Health Services.



Preventing Falls and Improving Bone Health in Older People

Falls are common in older people - approximately a third of all people over 65 in the UK will fall each year.

Falls are a major cause of disability and death resulting from injury in over 75s. 50% of women and 20% of men over the age of 50 will suffer a fracture as a result of a fall. 648,000 attendances at Accident and Emergency Departments each year are falls related and the cost of injuries from falls to the NHS is over £900 million each year.

WHY IS THIS IMPORTANT IN BARNSLEY?

Barnsley has the same pattern of falling as the rest of the UK. Barnsley's 'at risk' population aged over 65 years is estimated to be 44,700 in 2015. This is predicted to rise to 60,800 by 2030.

We want to reduce the number of Barnsley people who fall, so making people more aware of their risk and promoting steps that can reduce the chance of falling is vital.

Risk factors for falling include:

- Changes in mobility, strength, flexibility and eyesight
- Stroke, heart disease, arthritis, dementia, and dehydration
- Medication, alcohol and illicit drugs
- Poor lighting, wet floors, loose carpets and rugs, cables, steps, ill fitting shoes or slippers

When an older person falls it can affect their confidence and some will subsequently lose their independence, due to the fear of falling. Often a fall for which older people receive treatment will result in them being admitted into residential or nursing care or becoming more isolated at home.

WHAT ARE WE DOING IN BARNSLEY?

Falls Prevention and Bone Health are key areas of work for public health in Barnsley. A Falls Prevention and Bone Health Strategy was published prior to the distributed model, by Joint Commissioning colleagues, with a plan to implement a number of key recommendations. Work is also underway to assess what happens to people who are treated by the health and care services as a result of a fall and to agree key priorities going forward.

OUR COMMITMENTS FOR THE FUTURE:

Public Health will continue to work collaboratively, leading on the following within the Barnsley Falls and Bone Health Strategy Implementation Plan:

- Increasing the potential for falls prevention and management within care homes.
- Expanding the availability of bone health classes and community based exercise classes.



Preventing Dementia

Some cases of dementia can be prevented.

To reduce the risk of developing dementia and other serious health conditions, it's recommended that people:

- Eat a healthy diet
- Maintain a healthy weight
- Exercise regularly
- Don't drink too much alcohol
- Stop smoking (if a smoker)
- Keep blood pressure at a healthy level

WHY IS THIS IMPORTANT IN BARNSELEY?

We know that the population of Barnsley will increase in the future.

The population aged 65 and older is predicted to increase by 38% by 2030, similar to the predicted increase for England of 39%. It is also predicted there will be an additional 1,810 people suffering from dementia in Barnsley by 2030.

A timely dementia diagnosis provides immediate treatment and care, which can slow the progression of the disease and provide support as needed. It also enables people with dementia and their carers to live well with dementia by the provision of good-quality care. In mid-January 2016, 2079 Barnsley residents were recorded as having a diagnosis of dementia.

People with dementia are more likely to be socially isolated, have more falls than the general population and need more health and social care support. In Barnsley over the last 5 years the average length of hospital stay for a person with dementia was 75.3 days.

WHAT ARE WE DOING IN BARNSELEY?

Dementia prevention is a key area of work for public health in Barnsley. A Multi-agency Dementia Strategy Group chaired and led by Joint Commissioning in Barnsley Council has been meeting every month for over 3 years to take this agenda forward.

An assessment of the needs of local people with dementia (known as a health needs assessment) is currently being undertaken by Public Health.



OUR COMMITMENTS FOR THE FUTURE:

Public Health will lead on the following within the Barnsley Multi-Agency Dementia Strategy Group:

- Reviewing public health recommendations from the dementia health needs assessment.
- Promoting dementia friendly communities and training uptake.
- Raising awareness in Barnsley of how the local population can reduce their risk of developing dementia through healthy lifestyle choices, with council colleagues and partners.

PLACE DIRECTORATE

The following pages contain information on areas of work within the Place Directorate of Barnsley Council. This directorate comprises teams working on employment, physical activity, housing and regulation:

Wider Factors Influencing Health

Workplace Health

Helping People with Health Issues into Work

Physical Activity and Sport

Fuel Poverty and Excess Winter Deaths

Food Hygiene and Standards

Pollution Control



Wider factors influencing health

There are many factors that have an impact on our health.

These include:

- Social factors such as affordable, safe and warm housing.
- Economic factors, such as having a good quality job and a decent income.
- Environmental factors such as transport, road safety and air pollution.

Tackling these issues, along with improving our lifestyle, can mean living a longer and better quality of life.

WHY IS THIS IMPORTANT IN BARNSELEY?

- Barnsley is ranked in the bottom five local authorities in England for both males (146th/ 150) and females (149th/150) for healthy life expectancy at birth.
- 9.2% of all households in Barnsley are estimated to be in fuel poverty, which is worse in the east of the borough.
- 22% of working age adults in Barnsley are not in work. 38% (12,600) of this group are on long term sick-compared to 22% of people in Great Britain (Oct 2014 - Sept 2015 data).
- Air pollution has been recognised as a major public health issue. Fine respirable particles (referred to as PM2.5 particles) have an impact equivalent to nearly 29,000 deaths in the UK.

WHAT ARE WE DOING IN BARNSELEY?

Over the past year we have:

- Developed key strategies and action plans to tackle wider factors of health. This has been through working with partners to commission new services e.g. fuel poverty and health.
- Provided public health advice to ensure that improving health & wellbeing is included in council plans to tackle wider factors e.g. Local Plan for housing developments.

OUR COMMITMENTS FOR THE FUTURE:

Barnsley Council will work together with key partners to:

- Ensure public health is considered as part of planning for new housing developments.
- Develop better routes to employment; including access to the right service, skills development and getting work ready.
- Develop workplace health programmes working with managers and staff to reduce levels of sickness and keep staff in work.
- Take forward action plans to tackle excess winter deaths and fuel poverty in Barnsley.

Workplace Health

Good employers who look after their employees' health and wellbeing will achieve many benefits such as happier staff, reduced levels of sickness absence, increased morale and productivity and increased business growth.

Improving workplace health keeps people in work, supporting the sustainable employment of our residents. The most common causes of long term sickness in the workplace are mental health issues and musculoskeletal conditions.

WHY IS THIS IMPORTANT IN BARNSELEY?

The three main causes of lower life expectancy in Barnsley are cancer, circulatory disease and respiratory disease. Lifestyle factors associated with these diseases include smoking, poor diet, alcohol, high blood pressure and physical inactivity. Businesses can help to address the causes of lower life expectancy and long term sickness in the workplace by undertaking opportunities for health promotion in the workplace.

WHAT ARE WE DOING IN BARNSELEY?

We have been working with employers across Barnsley to increase their knowledge on workplace health issues, effective interventions and why they need to take action.

We offer help and support to businesses to improve workplace health. This could be to encourage businesses to make small changes such as supporting health campaigns or gaining accreditation for a national award in workplace health. We provide a range of training and workshops to increase the knowledge of employers on workplace health issues and how they can better support and educate their staff.

We have developed partnership working across South Yorkshire and are working together to develop model policies and procedures to help businesses. We have developed a number of good practice case studies that show real benefits from introducing workplace health programmes.

OUR COMMITMENTS FOR THE FUTURE:

BARNSELEY COUNCIL WILL:

- Continue engagement with employers to increase the number of workplace health improvements.
- Develop workplace health programmes to reduce levels of sickness absence and increase numbers of staff staying in work.
- Increase the number of businesses working towards and achieving the Workplace Wellbeing Charter National Award for England.



Helping people with health issues into work

Being in work is generally beneficial to people's physical and mental health and well-being, although this is dependent on the nature and quality of the work being undertaken.

There is a strong link between unemployment and deterioration in physical and mental health and well-being. Being in work is shown to be beneficial to those with ongoing health conditions. Work can help people recover from sickness and reduces the risk of long-term incapacity. The positive health effects of work mean that sick and disabled people should be supported to return to, or remain in work if their health condition permits it.

WHY IS THIS IMPORTANT IN BARNSELY?

The latest figures (from September 2015) show that 6% of working age adults in Barnsley are unemployed, compared to 5% in Yorkshire as a whole and 5% in Great Britain. This has improved greatly in recent years from a peak of 11% in June 2013. 38% of working adults in Barnsley who are economically inactive are classed as long term sick (compared to 22% of people in Great Britain). 30% of these people want a job, compared to 24% in Yorkshire and the Humber and 24% in Great Britain. People with health issues who are out of work tend to live in the poorest areas of Barnsley and experience the poorest health.



WHAT ARE WE DOING IN BARNSELY?

The Barnsley Employment and Skills Strategy – More and Better Jobs (2016-2020) has been written to look at raising the ambition of Barnsley businesses, improving education and skills, supporting people back into work and helping people to progress in work.

We are working to support people with health issues into work including:

- Understanding the employment, skills and support services available in Barnsley to help vulnerable people into work. This is so people can have the best support.
- Planning has started to develop pathways into employment for people with long term health conditions and vulnerable adults.

OUR COMMITMENTS FOR THE FUTURE:

BARNSELY COUNCIL WILL IMPROVE ACCESS TO:

- Good or better jobs - working with businesses to encourage them to offer work experience, apprenticeships, flexible working and support in the workplace.
- Better routes to employment - including access to the right services, skills development and getting work-ready.
- Support getting into work – providing personalised support, getting people work-ready for a job they want to do.



Physical Activity and Sport

Being physically active can help us to lead healthier and happier lives, to maintain a healthy weight and to prevent conditions such as mental health issues and cancer.

Physical activity includes all forms of activity, such as cycling to work, active play, work-related activity, active recreation (such as working out in a gym), dancing or gardening as well as sport.

WHY IS THIS IMPORTANT IN BARNSELEY?

In Barnsley there are a large number of people who would benefit from being more physically active. Physical activity levels and sports participation are significantly lower in Barnsley than the regional and national averages for both adults and children. 38% of adults (16+) are inactive i.e. perform less than 30 minutes of activity a week.

We have a clear east-west divide in terms of participation with those living in the eastern part of the borough being less physically active than those living in the west of the borough.

Increasing levels of physical activity is a priority area in the Barnsley Public Health Strategy and in the Sport and Active Lifestyle Strategy (2015 -2018) for the borough.

WHAT ARE WE DOING IN BARNSELEY?

To support Barnsley residents to be more active we are delivering a variety of opportunities:

Walk Well Barnsley: short guide-led walks to suit people of all ages and abilities, particularly welcoming people who are currently inactive and/or living with long-term conditions.

Bikeability: cycle training for children and adults - over 1700 year 5-6 children trained each year.

Sky Ride: cycle rides designed to get people back into cycling and to help others to cycle more.

Back to Netball: gentle, coach-led introduction to netball for women

Barnsley Leisure Card: allows eligible residents to access discounted sport and leisure activities.

OUR COMMITMENTS FOR THE FUTURE:

BARNSELEY COUNCIL WILL:

- Work to encourage Barnsley residents to lead an active lifestyle through delivering our new multiagency Sport and Active Lifestyle Action Plan.
- Work with schools and early years settings to ensure that children and young people take part in moderate to vigorous intensity physical activity for at least 60 minutes a day.
- Encourage adults to be active every day and to minimise the time spent sitting down.



Fuel Poverty and Excess Winter Deaths

Fuel poverty is a measure of a household's ability to pay for energy to heat the home to a satisfactory level of warmth (18°C-21°C).

Excess winter death rates are largely due to predictable and preventable causes. Risk can be reduced by:

- Keeping warm and active
- Wearing adequate clothing
- Receiving relevant immunisations
- Having a good social network

WHY IS THIS IMPORTANT IN BARNSELEY?

We know that under-heating of houses can contribute to poor health outcomes, particularly in terms of illness and death from heart and breathing conditions.

In Barnsley there is an average of 133 excess winter deaths per year ([data from August 2010 to July 2013](#)).

In comparison with the rest of England this is not significantly different, however in a European context, the UK does not perform as well as it should considering the cold weather that better performing countries experience.



WHAT ARE WE DOING IN BARNSELEY?

To help improve home efficiency and fuel poverty, Barnsley Council and its partners are delivering the following programmes:

Warm Homes Campaign: energy efficiency and fuel poverty awareness training for frontline staff in contact with vulnerable people to help support residents to take action.

Central Heating Fund: enables vulnerable residents to access full gas central heating system completely free of charge through the Better Homes Yorkshire programme.

Barnsley Council services also refer residents to:

The Green Doctors: energy advice and guidance for saving money on energy bills
Citizens Advice: advice to get the best deal from suppliers and help tenants manage their money.

Barnsley Council also ensures that excess winter deaths are considered in a variety of strategic plans.

OUR COMMITMENTS FOR THE FUTURE:

The health problems associated with cold homes are experienced during 'normal' winter temperatures, not just during extremely cold weather. Year-round action is needed to combat these problems.

Barnsley Council will take into account National Institute of Clinical Excellence (NICE) recommendations by:

- Prioritising which homes are tackled first.
- Shaping and influencing the decisions about how homes are improved.
- Raising awareness amongst practitioners and developing training for health & social care practitioners.
- Developing the research agenda.

Food Hygiene and Standards

Food for humans and feed for farm animals should be safe to eat to prevent illnesses such as food poisoning.

The labelling on food should be accurate so that consumers can make informed choices about what to buy so they can make healthy choices. This is particularly important for people with allergies who need to avoid certain foods.

WHY IS THIS IMPORTANT IN BARNSELEY?

- Barnsley has 2077 food premises and 312 feed premises supplying food to humans and farm animals.
- 312 cases of food related illness in Barnsley have been reported between April 2015-January 2016 and there are many more cases that are not reported.

WHAT ARE WE DOING IN BARNSELEY?

We help, support and advise new businesses when they set up to ensure legal compliance and we take legal action against traders relating to illicit alcohol, meat substitution and unhygienic premises. 80% of food premises have a hygiene rating of good or very good.

A list of our responsibilities and further information can be found on the **Barnsley Council website**.

Barnsley Council is also working with takeaway providers through the 'Tastier Takeaways' project to reduce fat, salt and sugar in menus, explore calorie labelling options and to promote healthy choices.

OUR COMMITMENTS FOR THE FUTURE:

BARNSELEY COUNCIL WILL:

- Support the compulsory display of Food Hygiene Ratings by food businesses.
- Continue to target higher risk premises for inspections & sampling.
- Seek any available funding from the Food Standards Agency for project work.
- Support legal action against traders who do not comply with the law.
- Promote the Tastier Takeaways pilot project and consider options for extending this to other areas.



Poor air quality is estimated to be attributable to more than 50,000 deaths in the UK each year.

Excessive noise exposure can cause annoyance and fatigue, reduce efficiency and impact on health. Reducing exposure to pollution for populations is vital as people often have very little control over their individual exposure.



WHY IS THIS IMPORTANT IN BARNESLEY?

- The impact from poor air quality due to fine inhalable particles alone in Barnsley is estimated to be the equivalent of 124 deaths each year.
- Pressure to provide new housing often means sites are located next to sources of current or historical pollution.
- Air pollution levels are known to be higher near busy or congested roads, and Barnsley has several air quality management areas in these locations, where levels do not meet standards.
- In 2015, Regulatory Services investigated 1278 complaints about excessive noise from sources such as barking dogs, music, burglar alarms and building sites.

WHAT ARE WE DOING IN BARNESLEY?

- We regulate pollution emissions from local industry and residential areas and we have an air quality action plan which contains measures designed to reduce air pollution.
- We liaise with developers on new developments to assess and reduce people's exposure from noise, air quality and contamination.
- We publicise and regularly update air quality information on the Barnsley Council website.
- We encourage cycling and walking, and work with bus companies and other fleet operators to reduce emissions.
- We also encourage lower polluting transport such as the use of electric vehicles.

OUR COMMITMENTS FOR THE FUTURE:

BARNESLEY COUNCIL WILL:

- Continue enforcing environmental legislation to ensure exposure standards are not breached.
- Continue to work with organisations both within and outside the Council to further reduce pollution emissions.
- Update the air quality action plan to take account of the latest evidence and most appropriate actions.
- Liaise with the Planning Department to ensure pollution exposure on new developments meets standards.

CORE PUBLIC HEALTH

The following pages contain information on areas of work within the Core Public Health Directorate of Barnsley Council. Staff in this team work on a wide variety of areas relating to health promotion, health services and health protection:

NHS Health Checks

Suicide Prevention

Vaccination and Immunisation

Children and Young People's Health

Sexual Health

Alcohol and Tobacco

National Child Measurement Programme

Public Health Specialist Advice to the CCG

Barnsley Child Death Overview Panel

Children's Oral Health



Every year in England, around 150,000 people die prematurely.
A quarter of those deaths are due to cardiovascular disease.
Two thirds of deaths could be avoided through improved prevention, earlier detection and better treatment.

The NHS Health Check is a great opportunity for Barnsley's residents to receive a free mid-life MOT to check that the body's most important systems are running smoothly and to be given information and support to reduce the risk of disease.

WHY IS THIS IMPORTANT IN BARNLSLEY?

NHS Health Checks in England could prevent 1,600 heart attacks and strokes and save at least 650 lives each year as well as preventing over 4,000 people a year from developing diabetes.

In Barnsley it is estimated that there are 27,218 people with undiagnosed high blood pressure, 1,952 people with undiagnosed heart problems and 650 people with undiagnosed diabetes.

WHAT ARE WE DOING IN BARNLSLEY?

All 36 GP practices in Barnsley provide eligible people (aged 40-74 years old) with a health check once every 5 years. Between April-September 2015, 80% of eligible people who were offered a health check actually received a health check.

Since April 2015, over 4,000 health checks have been carried out in Barnsley.

OUR COMMITMENTS FOR THE FUTURE:

Barnsley Council's NHS Health Checks contract with GP practices is due to expire in March 2017 and this presents an exciting opportunity to review the existing NHS Health Checks service provision in Barnsley. Options for the delivery of the service from 1st April 2017 will be explored with involvement of all relevant local organisations, taking into account the latest research evidence.



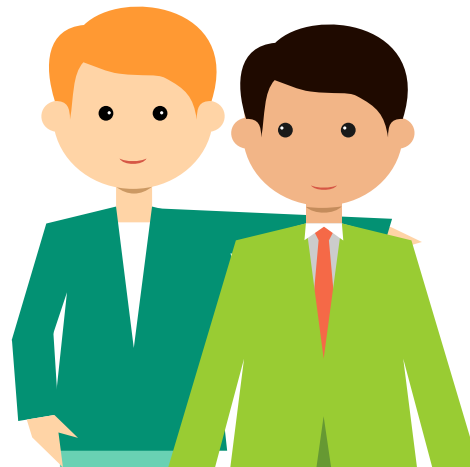
In England, one person dies every two hours as a result of suicide, and the impact on family, friends and local communities can be devastating. The factors that cause an individual to contemplate suicide are complex, but suicides are not inevitable.

Following the transfer of public health from the NHS to local government in April 2013, responsibility for co-ordination of suicide prevention lies with local authorities. Development of a local suicide prevention plan requires local authorities to work with other local organisations such as the police and the NHS.

WHY IS THIS IMPORTANT IN BARNSELY?

On average around 24 people died each year by suicide or injury of undetermined intent in Barnsley in the period between 2012 and 2014. The suicide and undetermined death rate for Barnsley is currently reported as 10.4 per 100,000 for the period 2012 – 2014. The England average for the same period was of 8.9 per 100,000. This is not significantly different. The vast majority (85%) of deaths from suicide and undetermined death in Barnsley are males.

Suicide prevention profiles have been produced by Public Health England. This tool presents data on suicide, risk factors and service contact among groups at increased risk. It provides planners with the means to profile their area and compare to similar populations.



WHAT ARE WE DOING IN BARNSELY?

Barnsley Suicide Prevention group has been established to develop and deliver a suicide prevention action plan with the aim of reducing the number of suicides and suicide attempts in Barnsley and to establish better support for people bereaved or affected by suicide. This group involves many different organisations such as the police, fire service, ambulance service and voluntary organisations.

A local suicide audit is being undertaken to better understand high risk groups and patterns of contact with services.

OUR COMMITMENTS FOR THE FUTURE:

The Barnsley Suicide Prevention Action Plan will be developed in 2016:

- Public health staff will review data, intelligence, evidence, guidelines and learning from other areas to ensure that the Action Plan is based on robust evidence.
- The Action Plan will be linked with all appropriate local strategies.
- The Action Plan will be put into practice and progress will be monitored.

The primary aim of vaccination is to protect the individual who receives the vaccine. Vaccinated people are also less likely to be a source of infection to others.

When vaccine coverage is high enough to induce high levels of population immunity, infections may even be eliminated from the country. But if high vaccination coverage were not maintained, it would be possible for the disease to return. Vaccination against smallpox enabled the infection to be declared eradicated from the world in 1980.

Getting a seasonal flu vaccination is one very important thing that individuals can do to keep themselves safe and healthy during the winter months. Reducing the number of people who get ill from flu reduces the pressure on health services at a time when they face great pressure. It also reduces the risk of getting complications or needing to take time off work. Uptake of the seasonal flu vaccination has been low both locally and nationally in 2015/16.



WHAT ARE WE DOING IN BARNSELEY?

Childhood vaccination uptake across Barnsley for all vaccinations has remained consistently high over a number of years.

This has been achieved through Barnsley Council working collaboratively with Public Health England, NHS England, Barnsley CCG and commissioned providers. Close working relationships have enabled all partners to act swiftly and positively to any changes to the vaccination schedule resulting in a programme of delivery which gives optimum protection to our

population ensuring that every child gets the best start in life.

In order to increase the uptake of all vaccinations and especially of seasonal flu vaccination, Barnsley Council work with Public Health England and partners to look at how we can reach those people across Barnsley who may need support in accessing vaccination services. One example is work being undertaken with people who are homeless. Information is given to this vulnerable group on where and how to get vaccinated.

Barnsley Council's communication team provide a coordinated plan for vaccination campaigns in liaison with other organisations to ensure consistent messages are delivered across the borough. **More information on vaccinations can be found here.**

OUR COMMITMENTS FOR THE FUTURE:

- We will work to understand in more detail which groups of people are least likely to access vaccination programmes so that work can be done with these groups to increase uptake.
- Barnsley Council will continue to work with other organisations to ensure that plans are developed and put into practice to increase the uptake of all vaccinations.
- Local Councillors will be encouraged to take up the opportunity to have a flu jab (if eligible) to promote uptake of the flu vaccination amongst their local communities.

The public health team at Barnsley Council are focusing efforts on children's public health services to give every child in Barnsley the best possible start in life through the Healthy Child Programme.

WHY IS THIS IMPORTANT IN BARN斯LEY?

A snapshot of children's health in Barnsley tells us that:

- The health and wellbeing of children in Barnsley is generally worse than the England average.
- The level of child poverty is worse than the England average with almost a fifth of children aged under 16 years living in poverty.
- Children in Barnsley have average levels of obesity: there are low levels of obesity among children aged 4-5 years but about one fifth of children aged 10-11 years are classed as obese.
- The MMR immunisation rate is better than the England average.
- The immunisation rate for diphtheria, tetanus, polio, pertussis and Hib in children aged two is better than the England average.

WHAT ARE WE DOING IN BARN斯LEY?

Children, young people and families can access the Healthy Child Programme through their Health Visitor and/or School Nurse. The programme aims to improve health outcomes for children and young people from before birth through to their 19th birthday.

Programmes to support children, young people, parents and carers to help them improve their health and well-being in Barnsley include:

- Information to enable children, young people and families to access the help they need.
- A focus on preventative support for breastfeeding, healthy eating, smoking cessation and alcohol misuse, targeted at our most vulnerable communities.
- An aim to increase the number of children and young people who are a healthy weight.

Local authorities are responsible for commissioning public health services for children aged 0-19; this presents new opportunities for a different approach to improving outcomes for children and young people across both health and local authority led services.

OUR COMMITMENTS FOR THE FUTURE:

Barnsley Council will protect and promote the health and wellbeing of children, young people and families with the biggest improvements for those in greatest need so that health inequalities are reduced.

The Healthy Child Programme, Health Visiting and School Nursing support will be available and accessible to all children, young people and families in Barnsley.



Most of the adult population of England are sexually active and access to quality sexual health services improves the health and wellbeing of both individuals and populations.

Sexual ill health is not equally distributed within the population. Strong links exist between deprivation and sexually transmitted infections (STIs), unwanted teenage conceptions and abortions. The highest rates of sexual ill health occur in women, men who have sex with men (MSM), young people aged under 25 and black and minority ethnic groups.

WHY IS THIS IMPORTANT IN BARNSELY?

It is estimated that nationally a third of all HIV in the community is undiagnosed.

Whilst Barnsley remains an area of low known prevalence, there has been a steady increase in new cases over recent years. Ensuring early diagnosis and access to treatment services remains paramount as this usually means fewer complications for the patient and reduces the risk of ongoing transmission.

Even though the under-18 conception rates have reduced in Barnsley since 1998, they remain significantly higher than regional and national averages. Barnsley has a significantly lower percentage of abortions performed under 10 weeks gestation when compared to the England average. This implies that there is scope for improving early access to terminations.

WHAT ARE WE DOING IN BARNSELY?

On the 1st April 2015, a new integrated sexual health service was launched in Barnsley, with a central location at Gateway Clinic and several satellite clinics ranging from Thurnscoe to Penistone. The service works closely with a number of partners such as GPs, Youth Services and Education to deliver contraception advice and sex and relationship education (SRE). 141 SRE sessions were delivered during September to December 2015, with 3,820 children and young people benefiting.

The new service has secured an increase in access to services throughout the borough and ensures that people who attend can get a range of services in one place, for example people who attend for contraception can also access STI testing and vice versa.

OUR COMMITMENTS FOR THE FUTURE:

- Further satellite clinics will be opened.
- Staff will continue to attend training sessions to ensure they can meet client needs.
- Work undertaken with Youth Services will be expanded.
- Promotional materials will be produced and distributed and promotional events will take place.



Smoking and alcohol are two of the leading causes of early deaths.

Alcohol is associated with problems such as liver disease, cancers and cardiovascular disease and smoking is associated with lung disease, cancers, and cardiovascular disease.

WHY IS THIS IMPORTANT IN BARNSELEY?

Smoking is the main risk factor for death in Barnsley; it contributed to 1 in 5 deaths in 2011-13. 22% of adults in Barnsley are smokers, much higher than the England average of 18%.

Smoking is the main contributor to health inequalities across the borough. There are large differences between wards in the percentage of people that smoke, ranging from 12% to 29%.

Smoking in pregnancy is also a major problem in Barnsley. Recently smoking in pregnancy has reduced to 20%, but this is still much higher than the England average of 11%.

Although alcohol related deaths have been falling slightly in Barnsley in recent years, alcohol is still a problem. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year.

WHAT ARE WE DOING IN BARNSELEY?

Barnsley has a strong Tobacco Control Alliance where organisations across the borough work together to tackle the problem of smoking. A new campaign called 'Breathe 2025' is being rolled out across Barnsley, working towards seeing the next generation of children being smoke-free.

The 'Be Well Barnsley' Service provides an evidence-based Stop Smoking Service and Barnsley Council's enforcement officers tackle the problem of cheap and illicit tobacco and alcohol.

Barnsley has an 'Alcohol Harm Reduction Strategy' and the Barnsley Drug and Alcohol Action Team (DAAT) help people with drug or alcohol issues. Barnsley Council works with other local organisations to influence areas such as domestic violence, safeguarding and other complex needs.

OUR COMMITMENTS FOR THE FUTURE:

Barnsley Council and partners will:

- Make it harder for children and young people to access and use tobacco and alcohol.
- Support current smokers to quit, especially routine/manual workers and pregnant women.
- Consider the effects of the affordability, acceptability and availability of alcohol in our local area.
- Strive to achieve the Purple Flag award for our town centre, to demonstrate excellence in managing the evening and night time economy.



Childhood obesity is one of the biggest public health challenges for the 21st century. Obese children have an increased risk of developing health problems and are more likely to become obese adults.

The NCMP measures the weight and height of children in Reception class and Year 6. The data is used to ensure there is the right support available, provides an opportunity to raise awareness of obesity and provides information on support available to families to make healthy lifestyle changes.

WHY IS THIS IMPORTANT IN BARNSELY?

For children in Reception (YR), levels of overweight and obesity have been similar to or better than the England average in recent years. In Year 6 (Y6) the percentage of overweight and obese children has remained steady in recent years even though nationally the levels have been increasing.

There is a large difference between levels of obesity in YR and Y6. The percentage of obese children in Y6 (21%) is more than double that of YR (9%). In YR the levels of overweight pupils are greater than the levels of obese pupils. The opposite is true of Y6.

Obesity rates are higher in the more deprived areas of the borough, in both YR and Y6.

WHAT ARE WE DOING IN BARNSELY?

In Barnsley the NCMP is delivered by the School Nursing Service. Individual results are sent out to the parents of children that took part, along with information on services available to help their child achieve and maintain a healthy weight.

A Healthy Weight in Children and Young People Expert Partnership Group has been set up which involves many different organisations within Barnsley.

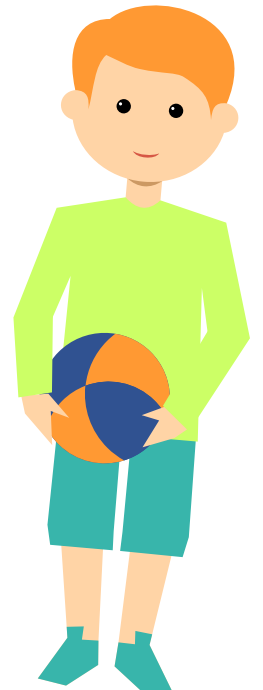
Overweight children can take part in the 'Be Well Families' Programme, which is part of 'Be Well Barnsley'. This service supports families to achieve a healthy weight through various activities either in 1:1 or group settings depending on the family's needs. Obese children can be referred to Barnsley Change4Life where they will be seen by a Specialist Dietician.

OUR COMMITMENTS FOR THE FUTURE:

BARNSELY COUNCIL WILL:

- Continue to deliver the NCMP so that children can be referred to the relevant services.
- Work to improve families' knowledge of diet and nutrition through the Be Well Barnsley scheme.
- Ensure schools/nurseries provide nutritionally balanced meals as part of the School Food Plan.

The NICE Guidelines for preventing excess weight gain contain a number of recommendations relevant to children and their families.



Public health teams moved from the NHS to local government in April 2013.

This means that responsibility for providing public health specialist advice to Clinical Commissioning Groups (CCGs) is now a requirement for all local authorities.

CCGs commission most of the hospital and community NHS services in their local area. Commissioning involves deciding which services are needed, and ensuring that they are provided.

WHAT ARE WE DOING IN BARNSELEY?

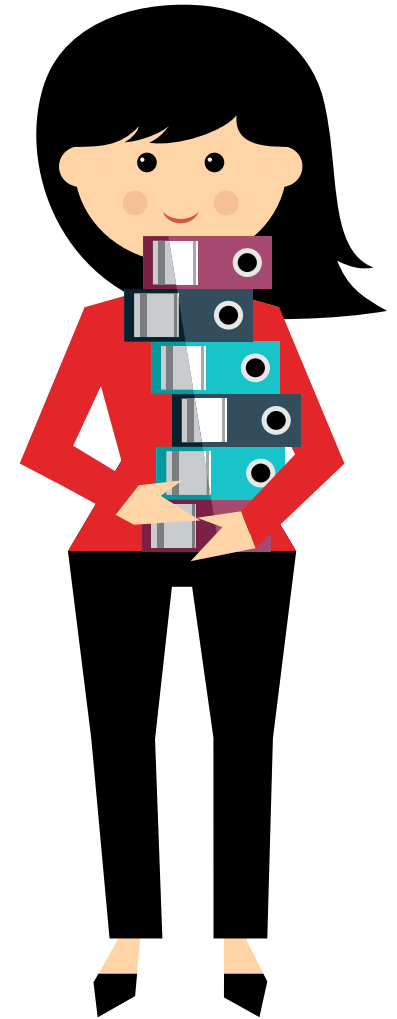
Key elements of Barnsley Council's Core Offer to Barnsley CCG include:

- Strategic planning such as: assessing need, reviewing service provision, supporting prioritisation.
- Advice on service design: the effectiveness/cost-effectiveness of interventions, patient and public engagement and development of evidence-based care pathways, service specifications and quality indicators.
- Public health advice on the design of monitoring and evaluation frameworks and establishing and evaluating indicators and benchmarks to map service performance.
- Working with clinicians to understand the relationship between patient needs, clinical performance and wider quality and financial outcomes.
- Provision of public health intelligence and data.

OUR COMMITMENTS FOR THE FUTURE

The public health team will:

- Support strategic commissioning and focus on health inequalities within the CCG.
- Support the development and implementation of the five year Sustainability and Transformation Plan.
- Develop a set of Shared Ambitions to Reduce Health Inequalities.
- Increase the contribution of the NHS to the implementation of the Public Health Strategy.
- Lead the CCG's new Health Inequalities Targeted Scheme for General Practice.
- Review how best the CCG can contribute to supporting people to adopt healthy lifestyles and access to non-medical forms of support for patients, such as a borough-wide social prescribing service.



Following the death of Victoria Climb  in 2000, national guidance was produced in the form of Working Together to Safeguard Children.

This guidance states that all agencies who have a responsibility towards children should work together to look at ways to keep children safe. This led to the formation of Child Death Overview Panels (CDOPs) who are accountable to Local Safeguarding Children Boards (SCBs).

The child death review process is not about apportioning blame but aims to learn lessons in order to improve the health, safety and wellbeing of children and to seek to reduce the number of deaths.

WHAT ARE WE DOING IN BARNSELEY

Compared to national data, Barnsley has relatively few child deaths.

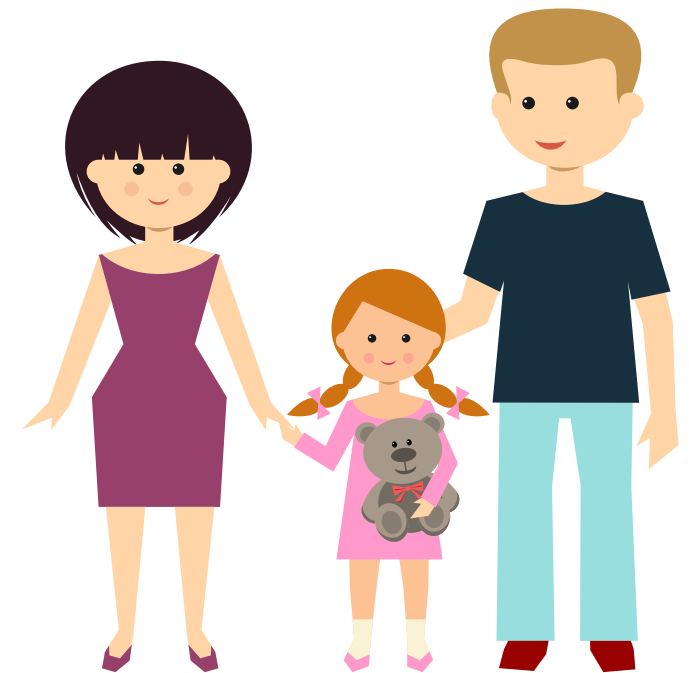
However, the circumstances surrounding the death of each child are considered on an individual basis in order that any changeable factors identified can form the basis of recommendations to the Barnsley Safeguarding Children Board (BSCB). The board considers how local services could be changed to prevent future harm and what action could be taken at a regional or national level. The findings from all child deaths inform local strategic planning, including the local Joint Strategic Needs Assessment, on how to best safeguard and promote the welfare of children in Barnsley.

An annual report for CDOP is produced and the information is included in the **BSCB's annual report**.

OUR COMMITMENTS FOR THE FUTURE:

BARNSELEY COUNCIL WILL:

- Review the effectiveness of a pilot scheme to convene an initial meeting within 48 hours after receiving notification of an unexpected death of a child.
- Take part in a review of decision making with other CDOPs in South Yorkshire.



We all want healthy teeth as adults and that starts with having healthy teeth as children.

It is important that everyone establishes good oral health habits such as toothbrushing, consuming tooth-friendly food and drinks, and receiving fluoride varnish.

WHY IS THIS IMPORTANT IN BARNSELEY?

Tooth decay is the main oral health problem affecting children in Barnsley and can have big impacts on the daily lives of children including pain, sleepless nights, time off school and low self-esteem.

In Barnsley, the average number of decayed, missing or filled baby teeth for 5-year-olds was 1.6, which was higher than the average for Yorkshire and The Humber and for England.

Within Barnsley there are wide differences in the distribution of tooth decay between wards. In 2011/12 the average number of decayed teeth in some wards was five times higher than in others.

WHAT ARE WE DOING IN BARNSELEY?

The main causes of tooth decay are diets high in sugar and lack of exposure to fluoride.

Programmes to reduce tooth decay in Barnsley include:

- A superhero dental campaign – ‘Brushing twice a day is the superhero way’ – has been well-received across Barnsley and has been taken up by other areas including York and the East Riding.
- Toothbrushing packs - Packs containing a toothbrush, fluoride toothpaste and a mouth health information leaflet have been distributed to children across the borough.

*Improving children's oral health is a **key priority for Barnsley Council** and the Council is now responsible for Oral Health Promotion.*

OUR COMMITMENTS FOR THE FUTURE:

Barnsley Council will follow Barnsley's Oral Health Strategy 2015-18 which recommends that:

- Tooth brushing packs should be distributed to the most vulnerable families in the borough via foodbanks.
- Tooth brushing clubs should be established in early years, nurseries and reception year settings across Barnsley.
- The increased use of fluoride varnish by dental practices in Barnsley should be supported and encouraged.



Closing Remarks

Thank you very much for reading this year's Barnsley Director of Public Health's Annual Report.

The editorial team would like to thank all the staff at Barnsley Council who have contributed to this report.

We would love to hear your views on this report.

If you have any comments or would like further information on our work, please contact the Public Health team via Anne Firth on:

annefirth@barnsley.gov.uk or **01226 773477**.



Contents Page

- Message from the Director of Public Health
- Our strategy for Public Health
- Who We Work with Barnsley Council's
- Distributed Model of Public Health
- Barnsley's Population
- My Local Area
- Recommendations

COMMUNITIES DIRECTORATE

- Safer Communities
- Stronger Communities
- Healthier Communities

PEOPLE DIRECTORATE

- Early Help for Children and Young People
- Emotional Health and Wellbeing of Children and Young People
- Public Mental Health
- Preventing Falls and Improving Bone Health in Older People
- Preventing Dementia

PLACE DIRECTORATE

- Wider Factors Influencing Health
- Workplace Health
- Helping People with Health Issues into Work
- Physical Activity and Sport
- Fuel Poverty and Excess Winter Deaths
- Food Hygiene and Standards
- Pollution Control

CORE PUBLIC HEALTH DIRECTORATE

- NHS Health Checks
- Suicide Prevention
- Vaccination and Immunisation
- Children and Young People's Health
- Sexual Health
- Alcohol and Tobacco
- National Child Measurement Programme
- Public Health Specialist Advice
- Barnsley Child Death Overview Panel
- Children's Oral Health

