**Appendix A** 

# Strategic Delivery Plan

2018-2020



**Champs** Public Health Collaborative CHAMPS STRATEGIC PLAN 2018-2020

Working together to improve health and wellbeing in Cheshire and Merseyside.

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We are delighted to bring you the Champs Strategic Delivery Plan for 2018-2020

# New partnerships bring a year of success

This last year has been one of significant progress with some fantastic achievements on our key priorities and £367,000 of new external income. It has also seen the formation of new partnerships and initiatives that have been instrumental in helping us improve health and wellbeing across Cheshire & Merseyside.



#### Margaret Carney Lead Chief Executive of Champs Public Health

Collaborative Lead Chief Executive for health and wellbeing in Liverpool City Region and Chief Executive of Sefton Council



#### Sandra Davies

Chair of Cheshire & Merseyside Directors of Public Health Executive Board and Director of Public Health for Liverpool City Council



#### Kath O'Dwyer

Acting Lead Chief Executive for Health and Wellbeing in Cheshire & Warrington and Acting Chief Executive of Cheshire East Council One of these innovative programmes is the British Heart Foundation (BHF) high blood pressure detection project.

We were delighted to be awarded £100,000 of funding from the BHF last year and since then, we have seen the roll out of **blood pressure testing** across various new settings, including a partnership with our two fire and rescue services who are now out in the community taking blood pressure readings for vulnerable people who may well not have been identified by health services. A state of the art health kiosk to take blood pressure readings was also piloted in community settings in Warrington with excellent results.

Our work on **preventing suicide** saw an update to the NO MORE suicide strategy last September along with an excellent stakeholder event that saw expert speakers, such as Professor Rory O'Connor of the University of Glasgow and Professor Louis Appleby of the University of Manchester, present the latest evidence. The key actions agreed from this event are progressing well, overseen by the Cheshire & Merseyside Suicide Prevention Board and we continue to be an example of best practice in Cheshire & Merseyside.

In the area of **mental health and wellbeing**, we have worked with the Directors of Children's Services across all our local authorities to take action on self-harm which is a rising issue for children and young people. An evidence report



was commissioned and a new group is looking at what can be put in place across the system to help children and young people who may be vulnerable.

Our **alcohol harm** workstream has gathered pace and campaigns such as Drink Less, Enjoy More have enabled everyone in public health, licensing and community safety to work closely together to ensure alcohol is served appropriately by bar staff.

Working with the **Cheshire & Merseyside Health** & Care Partnership (formerly Five Year Forward View) has ensured our prevention priorities of high blood pressure, alcohol harm and anti-microbial resistance are embedded into future plans and our lead Director of Public Health is working with the Health & Care Partnership lead on the "Population health/Prevention" workstream.

Our profile nationally continues to remain high and we are proud to have been asked to present our collaborative approach at key conferences on topics such as Sector Led Improvement (SLI), resilient communities and suicide prevention. A case study on our approach to SLI will be featured in a new LGA publication to be released shortly.

We are also excited to announce that Champs have been invited by Sir Eric Pickles to be part of a 2018/19 Parliamentary Review sharing best practice as a learning tool to individuals within the public and private sector.

#### Looking forward

In 2018 we are celebrating our 15th year of successful collaboration as Champs Public Health Collaborative. This year, as always, we will continue to deliver strong system leadership by collective strategic action and work together with our talented public health teams and partners to improve population health and wellbeing.

Our key priorities will remain to allow further impact on outcomes but new programmes of work, such as our Making Every Contact Count programme, have evolved. Despite remaining flexible to system change, what will not change is our commitment to doing the right things to ensure everyone has a fair chance to be healthy and able to achieve their full potential. We hope you find this strategic delivery plan informative and look forward to working with you all to achieve good health and wellbeing for our population.

# Celebrating our top 10 achievements together...

We have so many achievements to celebrate together thanks to the expertise and commitment of everyone involved in our Collaborative. Public health teams, partners and providers have all played a major role in our success. Here are our top ten key achievements from last year...

# £367,000



# of external income boosts programmes.

Champs has generated external income to the value of £367,000 in 2017-18 which will be used for new programmes such as a practitioner public health learning programme and to accelerate work in local areas on blood pressure.



#### Supporting those bereaved by suicide

### - Heidi's story.

Our suicide prevention work has resulted in no deaths of those supported by Amparo, our suicide liaison service and cost savings of £2.1m. One Amparo client, Heidi Moulton, spoke of how Amparo made such a difference when she lost her son Stefan to suicide. Heidi said:

"Without Amparo I don't think I would have been able to carry on. I miss my son every day, but the grief is manageable and I cope with it most of the time. I also know this is because of the amazing support I had from family, friends and colleagues, but significantly from Amparo".



# Fire & rescue



# staff to measure blood pressure.

A British Heart Foundation (BHF) funded project to increase detection of high blood pressure has seen 174 out of 400 fire and rescue staff across Cheshire & Merseyside trained to take blood pressure measurements as part of their safe and well home safety assessment visits. Staff in 120 Healthy Living Pharmacies in Cheshire & Merseyside have also been trained as part of the project.





#### 12,000 blood pressure checks.

Approximately 12,000 people across C&M had a blood pressure check last year in various settings as part of the delivery of the 'Saving lives: Reducing the pressure' blood pressure strategy and the BHF project. The strategy aims to achieve gold standard by reaching 66% identification which could save 183 strokes, 118 heart attacks, 256 cases of heart failure and 96 deaths at a cost to services of £8 million.

# 1500

5

# ij

# trained in basic suicide prevention.

Basic Suicide Prevention training for "community gatekeepers" developed by Warrington and commissioned by Champs across C&M has trained nearly 1500 people frequently in contact with vulnerable groups such as drugs and alcohol services, benefits and debt advisors.

# 750,000

8

# reached raising awareness of suicide.

World Suicide Prevention Day 2017 was a great success with the Champs Collaborative Thunderclap reaching 750,000 people to raise awareness of its theme "Take a minute, change a life".

### Campaign

6



# to reduce alcohol harm delivered across C&M.

The Drink less, enjoy more campaign, developed by Liverpool, was rolled out across C&M thanks to funding from Champs. A training video was made to inform bar staff of the penalties of serving people who are already drunk. Wirral rolled out the campaign in their area and found a reduction in test purchases by drunk actors from 90% to 36%.





### Improving

# workplace health with sector led improvement.

SLI underpins all of our collaborative work and a recent presentation at the Yorkshire & Humber SLI conference summarised our approach. One example is our reports on workplace health and health related worklessness which outline the evidence base, benchmark a number of national and local indicators and contains a series of recommendations for local authorities.

### 800

9



#### delegates connect and learn.

Our CPD and events programme has had a fantastic year with over 800 delegates attending 14 events. Providing a shared learning programme achieves significant cost savings for local authorities. 94% of delegates rated our events as "good" or "very good" with 81% agreeing they would change their current practice as a result of attending.





# parents trained in building resilience.

Youth Connect 5, the emotional wellbeing and resilience training programme for parents and carers trained 700 individuals over 99 courses. The evaluation report shows that respondents felt changes would be long lasting for some and that parents engaged well with the sessions. One parent commented:

"It's gone from everybody fighting to working as a family more because we've shared everything with them and used the techniques"

# 15 years of delivery at scale in Cheshire & Merseyside

Champs Public Health Collaborative (Champs) has developed a comprehensive and systematic approach to improving public health priorities by large scale action and working together as system leaders across Cheshire and Merseyside (C&M).

Champs is a long-standing collaborative of eight Directors of Public Health (DsPH) and their teams serving 2.5 million people in C&M, who also have a strategic influencing role within the Liverpool City Region combined authority and the Cheshire & Warrington sub-region.

Working to the ethos of 'collaborative action, local impact', Champs tackles a number of priorities, agreed with Public Health England and NHS England, that are common to every area and where progress can be best made through collective action.

The role of the Collaborative is to energise the whole system and influence strategic partnerships to focus on prevention, health inequalities and use of the best data and evidence. DsPH have adopted lead roles working on behalf of each other across the sub-region. The Collaborative includes members of local teams who offer a unique and essential contribution as system leaders working with strategic partners, facilitated by a small support team. The Champs support team leads, facilitates and enables delivery of the priorities and programmes of work with DsPH, local teams and partners.

Together we have achieved measurable improvements in tackling high blood pressure, suicide prevention, mental health and wellbeing and collaborative commissioning.

The Collaborative also provides a learning programme for public health teams, wider local authority colleagues and partners plus sector led improvement which underpins all of the collaborative work.



### The purpose of Champs

is to improve local health and wellbeing outcomes taking a whole system approach



leadership



**INTELLIGENCE** 

COMMISSIONING



COMMUNICATIONS

# A whole system approach to health and wellbeing

The scale of the challenge means no one part of the system can make sustained progress on its own; a whole system approach is needed.

The Directors of Public Health work together as system leaders, influencing and enabling key organisations to focus upstream and use the best evidence available.

At a recent Liverpool City Region Chief Executives meeting, Knowsley Chief Executive, Mike Harden said "Champs Public Health Collaborative provides a great example of system leadership and collaborative working around health and wellbeing issues across Merseyside, Cheshire and beyond." Cheshire & Merseyside's population of 2.5 million is served by...

nine local authorities

12 Clinical Commissioning Groups

19 hospital trusts

# two

fire and police authorities

# Enabling strategic partnership delivery across Cheshire & Merseyside

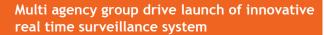
Champs Collaborative has enabled multi-agency working across Cheshire & Merseyside, providing public health expertise to key strategic groups and delivering innovative projects to improve health and wellbeing. Some examples of these projects are shown below.

#### Fire Service deliver safe and well checks

The Fire Services in Cheshire & Merseyside are key partners and prevention focused organisations, delivering Safe and Well checks which now incorporate public health messages such as bowel cancer screening and advice on reducing falls. Champs Collaborative has provided public health expertise into planning the checks and also commissioned an evaluation of the programme. The Fire Services also contribute as partners to both the Champs Collaborative Blood Pressure and Suicide Prevention Partnership Boards.



Dr Muna Abdel Aziz, DPH Warrington and Mark Cashin, Chief Fire Officer, Cheshire Fire & Rescue Service sign agreement for Safe & Well visits



As part of the C&M NO MORE Suicide Strategy, a Real Time Surveillance system has been established across C&M with key partners including Fire & Rescue Services, police and travel colleagues. This helps identify potential clusters and trends much more quickly than has been possible before and enables public health teams to develop community response plans. The group are also working together to identify potential 'hot spots' where preventative measures can be implemented.

#### Joint working with Directors of Children's Services led by David Parr

The DsPH and their teams have worked together with the Directors of Children's Services creating children's profiles for Cheshire & Warrington and Liverpool City Region and facilitating a joint prioritisation event. A follow-on report reviewed in more detail the key theme, self-harm in children and young people and the evidence of what works. A joint workshop identified key next steps including taking a sector led improvement approach and benchmarking local areas.



#### Prevention at scale in the C&M Health and Care Partnership

The Partnership is an NHS led collaboration aiming to improve population health. Champs DsPH recommended three key prevention priorities that were incorporated within the strategic plan: high blood pressure, alcohol harm and anti-microbial resistance. Eileen O'Meara is DPH lead and cochairs the Health & Care Partnership Prevention Board with Jon Develing, Population Health Lead. The Board is overseeing the implementation of the action plans and a prevention framework underpinning the strategic themes of the Partnership. The aim is for prevention to be embedded strategically and operationally in all pathways. Making Every Contact Count has been adopted as a new priority for 2018 following

a successful Champs multi-agency visioning workshop. C&M Health and Care Partnership is the North Region lead STP for the PHE CVD Prevention programme. A "Happy Hearts" branded public facing CVD prevention website will launch in September, led by the Champs Collaborative.



Jon Develing, Population Health Lead for the Cheshire & Merseyside Health & Care Partnership

# Supporting strategic partnership delivery across Cheshire & Warrington

Cheshire and Warrington (C&W) has a multi-agency Chief Executive Management and Leaders Board supported by the Public Service Transformation (PST) Board. C&W DsPH have a place on the PST Board and provide regular updates and also to the Chief Executive Management and Leaders Board, advising on key public health issues.





# Enabling public sector transformation in Cheshire and Warrington

14

The Public Sector Transformation Plan was informed by a case for change report, commissioned by DsPH.

The Champs Collaborative contributes to the delivery of the plan that aims to deliver improved outcomes in relation to work, poor mental health, reoffending and domestic abuse.

#### Warrington host state of the art health kiosk

Thanks to funding from The British Heart Foundation, Champs Collaborative have worked together with Warrington Borough Council's Public Health team to introduce the Wellpoint Health Kiosk which offers users the ability to check their blood pressure (BP), find out their heart age, BMI and body fat composition. The project aims to shift the detection of raised BP into the community so that people can be managed in alternative venues, freeing clinical space for higher risk patients.



Dr Ahmed Farag, Consultant Interventional Cardiologist at Warrington and Halton Hospitals NHS Foundation Trust assists user of the health kiosk

#### **The Prospectus**

The prospectus for inclusive growth outlines how Cheshire & Warrington aim to double the size of their economy by 2040. It highlights the assets and captures the ambition of the sub-region.



In these dynamic times of devolution and health and care partnership plans, local authorities increasingly need to work with health partners across wider areas; having an organisation like Champs to support us to develop prevention and early intervention across Cheshire and Merseyside has proved extremely helpful.



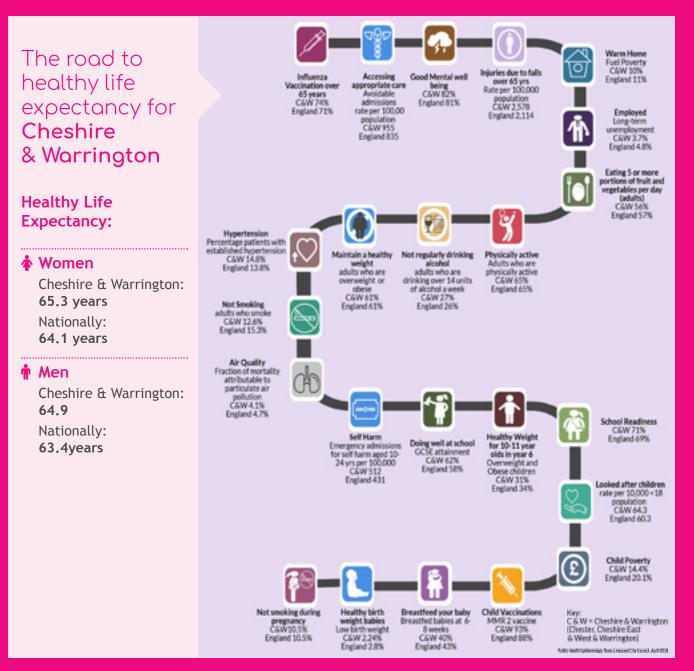
Councillor Janet Clowes, Cheshire East Cabinet Member, Health and Adult Social Care; Co-Chair of Cheshire & Merseyside Blood Pressure Partnership Board

# Our health today – why we must improve

Overall health is similar or slightly better across Cheshire & Warrington compared to England.

This can be seen in higher healthy life expectancy as well as lifestyle factors such as smoking, physical activity, alcohol misuse and healthy eating. Despite this, hypertension (high blood pressure) levels are higher. As this is doctor diagnosed prevalence this may reflect better case finding as much as overall population prevalence. Child health is generally similar to the England average apart from breast feeding continuation (measured at 6-8 week checks) which is lower than the England level.

Although lifestyles and wider determinants are similar/better than England, Cheshire & Warrington face challenges around self-harm in young people, injuries due to falls amongst older people (aged 65+) and avoidable hospital admissions.



# Supporting strategic partnership delivery across Liverpool City Region

Liverpool City Region (LCR) has an established Combined Authority to provide strategic governance and support economic growth. LCR DsPH meet regularly with the lead Chief Executive, Margaret Carney to discuss progress and strategic opportunities for collaboration.





LIVERPOOL **CITY REGION** 

#### Creating a vibrant economy through improved health and wellbeing

The first LCR Metro Mayor, Steve Rotheram, was elected in 2017 following a Devolution Agreement. The DsPH provided the initial case for change to support the Devolution submission and inform joint working with Directors of Adult Social Care.



#### LCR Portfolio Holders

The portfolio holders meet regularly and have formed a Health and Wellbeing Forum following two successful summits.

Matt Ashton, DPH for Sefton and Knowsley, presented the latest evidence from a DPH collaboratively commissioned report on building resilient communities at the last Summit.

annual Champs Suicide Prevention Summit in September 2017 that welcomed over 170 delegates from all sectors. National experts highlighted the latest research on suicidal and self-harm behaviour and delegates were able to share good practice.



#### **Metro Mayor presents** Champs work at PHE conference

Steve Rotheram and Councillor Andy Moorhead presented on the Champs work and the ambition for improving health and



wellbeing across LCR at the PHE conference in September 2017. Councillor Moorhead thanked DsPH and their teams and described them as 'talented leaders'.

#### PHE LCR Wellbeing and Wealth Plan

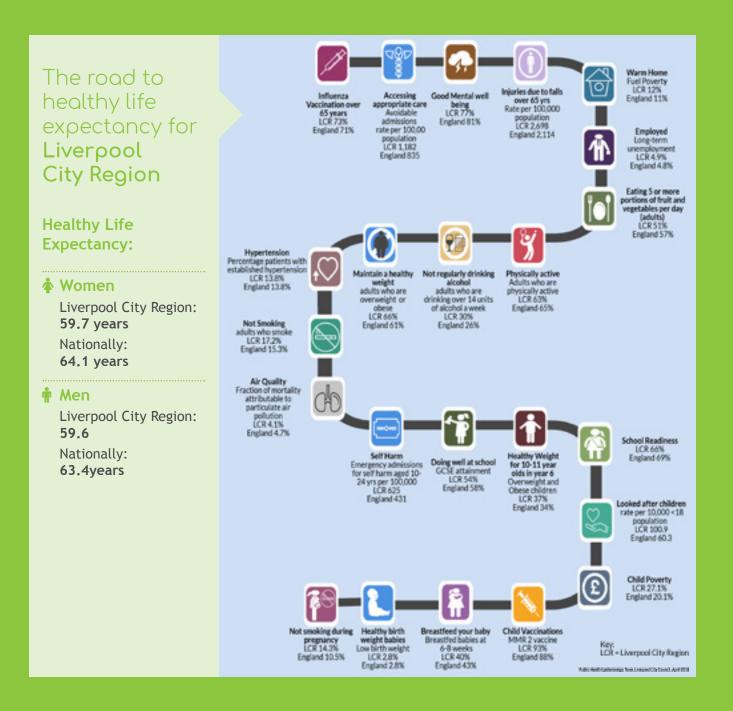
Public Health England is leading a programme of work to support the Mayor and Combined Authority. The Wellbeing and Wealth Plan will support the LCR economic growth strategy.

# Our health today – why we must improve

Health across LCR is overall worse than the England average. This can be seen in the gap in healthy life expectancy between LCR and England of around 4 years.

Although vaccination and immunisation rates are better, lifestyle factors are worse (things like smoking, alcohol misuse and healthy eating). Child poverty is much higher than England and this affects many of the child health experiences, with most of the indicators being worse than England. Of note is the lower level of children who are 'school ready' at age 5.

The poorer health seen in childhood continues in to adulthood both in terms of lifestyles as well as poorer mental wellbeing and higher avoidable hospital admissions and injuries due to falls amongst older people (aged 65+).



# Delivering the plan

Supporting this strategic delivery plan is a detailed operational delivery plan which sets out the aims and objectives for the public health collaborative.

Some of these are highlighted below...

# By 2020 the Champs Collaborative will:

- **Provide strong public health leadership and support** to the Liverpool City Region, Cheshire and Warrington Transformation Plan and the Health and Care Partnership NHS Population Health Plan
- Implement the Youth Connect 5 emotional wellbeing and resilience programme and achieve Royal Society of Public Health accreditation ahead of potential national roll out through Public Health England
- Lead implementation of the Cheshire & Merseyside NO MORE Suicide Strategy, achieving Cheshire & Merseyside Suicide Safer Community accreditation
- Provide leadership in enabling reductions in harm to health through alcohol
- Lead implementation of the Five Year Cross Sector Blood Pressure Strategy and increase the number of opportunities for community blood pressure testing achieving a minimum of 10,000 new blood pressure checks
- **Produce a Cheshire and Merseyside Sexual Health Specification** and deliver a Cheshire and Merseyside Cross Charging Policy
- **Deliver an effective CPD programme** that builds the skills of the public health and wider local authority workforce reaching a minimum of 450 delegates per annum
- Provide strong public health leadership in delivering Making Every Contact Count at scale across C&M
- Provide collaborative strategic public health intelligence across Cheshire & Merseyside
- Establish the North West Public Health Practitioner workforce programme in collaboration with Health Education England and Public Health England

# Effective governance

Leadership and decision making is facilitated through the eight Directors of Public Health, who make up an Executive Board. The Executive Board is supported by a Leadership Group, which oversees the business functions of the Collaborative.

The Executive Board meet twice a year for Board meetings and meet for monthly system leadership meetings in between. Mel Sirotkin, Centre Director for Public Health England North West and Julie Kelly, Head of Public Health for NHS England in Cheshire & Merseyside are also in attendance.

# Performance monitoring

Champs Collaborative work is monitored and reports through a robust performance and monitoring framework.

This encompasses work directly undertaken by the local public health teams, the Champs support team and through contracts managed by Champs. The Directors of Public Health also report progress to the Cheshire & Merseyside Chief Executives.

# Organisation & structure

### **Cheshire & Merseyside Directors of Public Health**



WARKINGTON



Champs Collaborative Lead DPH for Blood Pressure & Health Care Public Health

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CHESHIRE EAST

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WIRRAL

Julie Webster



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#### CHESHIRE WEST & CHESTER

#### Ian Ashworth

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#### LIVERPOOL

### Sandra Davies



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# Systems leadership roles

In addition to their lead roles on various Collaborative priorities and workstreams, the Directors of Public Health act as system leaders for public health, taking lead roles on behalf of each other, working with partners such as Public Health England, NHS England and North West Coast Strategic Clinical Network.

#### **DPH LEAD:**

- Alcohol Harm (including licensing) and HCPV Prevention Board rep\*
- C&M HCP Working group/ Prevention Board\*
- Deancer Alliance
- 🚸 Commissioning
- Communications & Social Marketing\*
- FR CPD\*
- 😰 Employment and Skills\*
- HCP Mental Health Programme Board
- Health and Fire Working Group
- Health Protection\*
- Improving Maternity Experiences Board
- LCR Child Poverty Commission
- Mental Wellbeing focus children and young people\*
- Merseyside DCS Board for Children
- Public Health Healthcare/ High Blood Pressure\*
- Public Health Intelligence & Strategic Partnerships\*
- 👍 Sexual health pilot
- Suicide Prevention\*
- Workforce and L&D\*

#### DPH REPRESENTIVE

- C&W Youth Justice Services health sub group
- Cheshire & Merseyside Local Workforce Action Board (LWAB)
- Cheshire Protecting Vulnerable People Forum
- Cheshire Public Service Transformation Board
- Cheshire and Warrington Into Work Board
- H&CP C&M Strategic Workforce Group
- W HCP Prevention Board
- Merseyside Community Safety Partnerships Board
- NHS Cheshire Joint Commissioning Committee (Joint)
- NHS Cheshire Joint Commissioning Committee (Joint)
- Strategic Integrated Offender Management Group



#### CHAIR:

- C&M DsPH Executive Board (Chair to Sept 2018)
- C&M Screening and Immunisation Programme Board (Co-Chair)
- Cheshire and Merseyside TB Strategic Group (Chair)
- Cheshire & Warrington Local Health Resilience Partnership (Co-Chair)
- Cheshire & Warrington Local Health Resilience Partnership (Co-Chair)
- Public Health Collaborative
   System Leadership Group (Co-Chair)
- Merseyside Local Health Resilience Partnership (Co-Chair)
- Merseyside Local Health Resilience Partnership (LCR Joint Chair)
- NO MORE Suicide Partnership Board (Chair)
- Public Health Collaborative System Leadership Group\* (Co-Chair)

#### NORTH WEST:

- 💩 ADPH NW (Chair)
- NoE Health Equity North group
- 🔊 NW TB Board

#### NATIONAL:

National CVD Systems Leadership Forum

# Programme Objectives 2018/19

The following information provides an overview of the objectives, key actions and outcomes for each programme of work.

Champs Collaborative is committed to driving improvements in performance and in outcomes and as basis for this, a sector led improvement (SLI) approach underpins implementation of the strategic delivery plan.

The **highlighted** objectives, actions and outcomes indicate a specific SLI approach.

#### Alcohol Harm Reduction

Director of Public Health: Julie Webster Responsible Officer: Adam Major

#### **OBJECTIVE:**

Support the delivery of key priorities of the Health and Care Partnership Prevention at Scale Work programme

ACTIONS:	OUTCOMES:
<ul> <li>Plans from each acute trust outlining actions to achieve the Commissioning for Quality and Innovation (CQUINs) target</li> </ul>	<ul> <li>Greater identification of harmful and hazardous drinkers and the resulting reduction in this risky behaviour due to IBA delivered</li> </ul>
<ul> <li>Develop a Cheshire and Merseyside Alcohol Pathway</li> </ul>	<ul> <li>Greater consistency of care for vulnerable drinkers enabling earlier intervention and prevention of alcohol related harm</li> </ul>
<ul> <li>Develop an alcohol dashboard which highlight areas' needs in terms of alcohol and acute care</li> </ul>	<ul> <li>More specific/targeted commissioning of services to meet those needs resulting in greater reduction of alcohol harm</li> </ul>
<ul> <li>Develop a common training and competency programme</li> </ul>	<ul> <li>Greater consistency of care for vulnerable drinkers enabling more effective intervention and prevention of alcohol related harm</li> </ul>
<ul> <li>Develop a Cheshire and Merseyside alcohol care team service specification</li> </ul>	<ul> <li>Alcohol care teams adequately funded and providing greater consistency of care enabling more effective intervention and prevention of alcohol related harm</li> </ul>

#### **OBJECTIVE:**

Licensing. To enable reductions in harm to health via the existing licensing process

ACTIONS:	OUTCOMES:
<ul> <li>Develop a community resource to support licensing involvement</li> </ul>	<ul> <li>More people make licensing representations</li> </ul>
<ul> <li>Develop a joint framework to include licensing strategy and Statement of Licensing Policy (SOLP)</li> </ul>	<ul> <li>Local SOLPs include more health related measures resulting in reduction of related harm</li> </ul>
<ul> <li>Develop best practice guidance documents that outline essential training for responsible authorities and licensing committees</li> </ul>	<ul> <li>Reduction in harm-causing licensing practices</li> </ul>

#### **OBJECTIVE:**

Reduce alcohol harm to those most at risk (dependent drinkers)

ACTIONS:	OUTCOMES:
<ul> <li>Support Sheffield University Minimum Unit Pricing National Institute for Health Research (NIHR) project</li> </ul>	<ul> <li>Reduction of harm to those most at risk (dependent drinkers)</li> </ul>
<ul> <li>Develop key facts summary produced for C&amp;M and individual local areas</li> </ul>	

### Children and Young People's Mental Health

Director of Public Health: **Dr Sandra Davies** Responsible Officer: **Pat Nicholl** 

#### **OBJECTIVE:**

Improve emotional wellbeing and resilience in children and young people

ACTIONS:	OUTCOMES:
<ul> <li>Lead the implementation of Youth Connect 5</li> </ul>	<ul> <li>Families provided with the tools to build positive emotional health for their children and young people</li> </ul>
	<ul> <li>Schools and Youth organisations have preventative programme that reaches out to families and complements Child Adolescent Mental Health Service's/ Future In Mind interventions</li> </ul>
<ul> <li>To oversee the development and co-ordination of a self-harm sector-led improvement</li> </ul>	<ul> <li>Reduced levels of self-harming in Cheshire and Merseyside</li> </ul>
programme	<ul> <li>Reduction in suicides and suicide attempts</li> </ul>
	<ul> <li>Increased knowledge and understanding of self- harm across partners, families and young people</li> </ul>
• To pilot a trauma informed recovery toolkit, developed by Rockpool, for practitioners working	<ul> <li>Parents have tools to mitigate negative impact of ACEs</li> </ul>
with families impacted by Adverse Childhood Experiences (ACEs)	<ul> <li>Roll out of intervention</li> </ul>

# Programme Objectives 2018/19

### Commissioning

Director of Public Health: **Julie Webster** Responsible Officer: **Adam Major** 

#### **OBJECTIVE:**

To improve the quality, efficiency and cost effectiveness of jointly commissioned public health services

.....

ACTIONS:	OUTCOMES:
Collective Investments	• Prevention of imitative suicides in an at risk group
<ul> <li>Contract manage and performance monitor the C&amp;M DsPH collective commissioned contracts for:</li> <li>Commissioned Intelligence</li> <li>Suicide Liaison Service - Amparo</li> <li>Medicines Management</li> <li>Review current intelligence contract and make recommendations for future collaborative commissioning for 1st April 2019 onwards</li> </ul>	• Economic savings to the C&M region
<ul> <li>Develop a Cheshire &amp; Merseyside integrated sexual health service specification</li> </ul>	<ul> <li>Potential process and cash savings</li> </ul>
<ul> <li>Develop a Cheshire and Merseyside Sexual Health Cross Charging Policy</li> </ul>	<ul> <li>Procurement savings and streamlined clinical services</li> </ul>

### Communications and Social Marketing

Director of Public Health: Fiona Reynolds Responsible Officer: Tracey Lambert

#### **OBJECTIVE:**

Lead and deliver communications for the Collaborative and its priorities

ACTIONS:	OUTCOMES:
<ul> <li>Build awareness and understanding of the vision and purpose of the Collaborative with all key stakeholders to increase engagement, focusing on the high priority targets</li> </ul>	<ul> <li>Stakeholders well informed of role of Champs and its priorities</li> </ul>
<ul> <li>Ensure all local teams are kept up to date on progress on the key priorities</li> </ul>	<ul> <li>Local teams well informed of Board decisions and work on key priorities</li> </ul>
<ul> <li>Continue to communicate examples of effective collaborative working within priorities and acknowledge the contribution of individual areas</li> </ul>	<ul> <li>Stakeholders are aware of successful projects and individuals that have contributed</li> </ul>
<ul> <li>Highlight improvements in health outcomes, quality and cost savings within priorities</li> </ul>	<ul> <li>Stakeholders are aware of improvements made by the Collaborative</li> </ul>
<ul> <li>Maintain the profile of the Cheshire &amp; Merseyside Directors of Public Health as effective system leaders in their regional and national roles</li> </ul>	<ul> <li>Stakeholders aware of DPH role in leading the PH system in C&amp;M</li> </ul>
<ul> <li>Build upon and maximise the excellent national reputation of the Cheshire &amp; Merseyside Public Health Collaborative</li> </ul>	<ul> <li>Stakeholders aware of innovative work of the collaborative and its way of working</li> </ul>
<ul> <li>To pilot a trauma informed recovery toolkit, developed by Rockpool, for practitioners working with families impacted by Adverse Childhood Experiences (ACEs)</li> </ul>	<ul> <li>Parents have tools to mitigate negative impact of ACEs</li> <li>Roll out of intervention</li> </ul>

#### **OBJECTIVE:**

Maximise national and regional campaigns / facilitate C&M social marketing leads group

ACTIONS:	OUTCOMES:
• Promote and support priority awareness campaigns for blood pressure, suicide prevention and children's mental health, share best practice via social marketing leads group meetings	<ul> <li>Campaigns are amplified and greater public awareness raised, information shared across local authority teams and partners</li> </ul>

## Programme Objectives 2018/19

### CPD

Director of Public Health: Fiona Reynolds Responsible Officer: Tracey Lambert

#### **OBJECTIVE:**

Support local authorities with their statutory requirements to provide professional public health learning and development ensuring local authorities have a highly trained and competent workforce

ACTIONS:	OUTCOMES:
<ul> <li>Develop and deliver a maximum of 6 half day</li></ul>	<ul> <li>Increased knowledge and understanding of public</li></ul>
learning events based on learning needs and	health and competency of staff working in or with
around key priorities, blood pressure, suicide	public health teams <li>Contribution towards statutory requirement for</li>
prevention and mental wellbeing for children	public health professionals to maintain their CPD
and young people	learning <li>Contribution towards personal development plans</li>

### Health Protection

Director of Public Health: Eileen O'Meara

#### **OBJECTIVE:**

Work collaboratively with key stakeholders to achieve reductions in air pollution

ACTIONS:	OUTCOMES:
<ul> <li>Establish Task and Finish Group for Air Quality</li> </ul>	<ul> <li>Raised public awareness on Air Quality</li> </ul>
key partners	<ul> <li>Enhanced engagement of local community on Air Quality and making it a local issue</li> <li>Empowered local community to take action on AQ</li> </ul>

#### **OBJECTIVE:**

Anti-microbial resistance. Lead the delivery of the Health and Care Partnership Anti-Microbial Resistance (AMR) Strategy

ACTIONS:	OUTCOMES:
<ul> <li>Lead the implementation of the AMR Strategy for Cheshire and Merseyside through the AMR Board by:</li> <li>Strengthening AMR stewardship in Primary Care</li> <li>Developing dedicated community microbiologist functions</li> <li>Strengthening monitoring, audit and assurance of appropriate prescribing for AMR</li> </ul>	<ul> <li>Reduction in inappropriate antibiotic prescribing in all relevant healthcare settings across C&amp;M</li> <li>Reduction in infections caused by antimicrobial resistant microorganisms and improve infection prevention control practices across C&amp;M</li> </ul>

### High Blood Pressure

Director of Public Health: **Dr. Muna Abdel Aziz** Responsible Officer: **Dr. Melanie Roche** 

#### **OBJECTIVE:**

Continue to implement, monitor and evaluate the five year Cheshire and Merseyside Cross Sector Blood Pressure Strategy " Reducing the Pressure"

ACTIONS:	OUTCOMES:
<ul> <li>Deliver and evaluate the following externally funded projects:</li> <li>British Heart Foundation Innovation Award Programme - Round One</li> <li>British Heart Foundation Innovation Award Programme - Round two with a focus on "wellbeing at work" across nine local authority areas (subject to being successful)</li> <li>General Practice Quality Improvement Programme</li> </ul>	<ul> <li>Contribution towards:</li> <li>Health Care Partnership Key Performance Indicator 3. A reduction in Observed/Expected high blood pressure (BP) prevalence gap (equivalent to ~ an additional 11,000 on Quality and Outcome hypertension registers across C&amp;M per annum)</li> <li>Health and Care Partnership Key Performance Indicator 4 (HCP KPI4)</li> <li>For participating practices aim: 1% increase p.a. in patients treated to &lt;150/90mmHg</li> <li>C&amp;M Baseline 307, 484 treated to target, aim 2021/11= 322,736</li> <li>HCP KPI 4. 10% reduction per annum. in practice- level variation</li> </ul>
<ul> <li>Optimise levers for change by:</li> <li>Supporting cross-sector delivery of high BP priority deliverables as agreed by the Health and Care Partnership Prevention Board (STP) with a key focus on: <ul> <li>Making every contact count (MECC)</li> <li>BP testing in community pharmacies</li> <li>Quality improvement in general practice</li> </ul> </li> </ul>	<ul> <li>Cross-sector system partners aligned and taking action to progress the BP agenda in a focused and coordinated way</li> <li>Greater BP awareness and empowerment to selfcare</li> <li>Increased no. Healthy Living Pharmacies</li> <li>Increased Know Your Numbers campaign activity by HLPs</li> <li>Increase in BP checks undertaken in community pharmacies</li> <li>Increase in the uptake of New Medicines Service for BP medicines</li> <li>Increase in uptake of Medicines Use Reviews for CVD medicines</li> <li>Local evidence base for the role of community pharmacies in tackling high BP strengthened</li> </ul>

# Programme Objectives 2018/19

Engage with and empower communities by:	Contribution towards:-
<ul> <li>Amplifying awareness-raising campaigns including Blood Pressure UK's Know Your Numbers awareness raising campaign</li> </ul>	<ul> <li>Increased Quality and Outcome Framework (QoF) hypertension registers and reduced Observed/ Expected prevalence gap</li> <li>Increased public ' BP awareness'</li> <li>Patients and public perspective informs developments to ensure it meets the needs of target audience</li> </ul>
<ul> <li>Scale up local successes by:</li> <li>Accelerating achievements in outcomes using a Sector Led Improvement approach by sharing best practice and learning</li> <li>Supporting an application to NHS England/ Innovate UK Test Bed Round 2 to develop and scale up the use of digital innovations to tackle high BP</li> </ul>	<ul> <li>Peer to peer learning supports the wider adoption of successful initiatives. The BP strategy indicator dashboard demonstrates an increase in activity across C&amp;M from baseline</li> <li>Additional investment to support the development and scaling up of digital innovations and BP pathways across C&amp;M</li> <li>Increase in digital solutions to tackle high BP being utilised</li> </ul>
<ul> <li>Demonstrate impact by:</li> <li>Updating strategy indicator dashboard annually</li> <li>Producing an Annual report 2018</li> <li>Progress report of 4 KPIS to Health and Care Partnership Prevention Board</li> </ul>	• Progress against key strategic objectives available

### Making Every Contact Count

Director of Public Health: **Eileen O'Meara** Responsible Officer: **Louise Vernon** 

#### **OBJECTIVE:**

Delivery of "Making Every Contact Count" (MECC) at Scale in Cheshire and Merseyside

ACTIONS:	OUTCOMES:
<ul> <li>System leadership and influence</li> <li>Establish a C&amp;M MECC Partnership Board to oversee and drive implementation of the MECC programme</li> </ul>	<ul> <li>Cross sector partnership approach to embedding MECC</li> <li>Increase in number of new staff inductions that include mandatory MECC training at a basic competency level</li> </ul>
<ul> <li>Changing organisational culture</li> <li>Embed MECC into organisational strategies as part of a wider focus on prevention and enabling sustainable delivery by: <ul> <li>Identifying a Champion to lead in every organisation</li> <li>Raising the profile of prevention</li> <li>Maximising NHS as health improvement organisation through Commissioning for Quality and Innovation (CQUIN)</li> </ul> </li> </ul>	<ul> <li>Increase in senior leadership commitment and in number of designated MECC leads or behaviour change leads within the organisation</li> <li>Increase in the number of staff who have received accredited and consistent training</li> <li>Increase in the number of trained staff delivering a brief intervention and increase in number of patient referrals to specialist services</li> <li>Increased knowledge and understanding of self- care e.g. healthy lifestyle messages</li> </ul>
<ul> <li>Training</li> <li>Implement effective consistent high quality accredited MECC training, creating a network of accredited/leaders and champions</li> </ul>	<ul> <li>Increase in understanding of behaviour change</li> <li>Increase in confidence to undertake a very brief/ brief intervention</li> </ul>
<ul> <li>Comprehensive Communications and Engagement</li> <li>Create a consistent approach to branding across Cheshire and Merseyside which staff embrace and signpost the public to healthy lifestyle advice</li> <li>Develop a MECC Communications and Engagement Campaign aimed at frontline professionals in health, local authority and third contern</li> </ul>	
<ul> <li>third sectors</li> <li>Develop a communications tool kit for local communications teams to utilise to ensure understanding and engagement of MECC with access to resources</li> <li>Development of a branded web based learning</li> </ul>	
<ul> <li>hub to host shared resources</li> <li>Evaluation</li> <li>Develop and implement an evaluation framework with a consistent approach to measure impact</li> </ul>	

### North West Practitioner Registration Scheme

Director of Public Health: **Martin Smith** - Consultant in Public Health – Liverpool City Council (on behalf of CM DsPH) Responsible Officer: **Helen Cartwright** 

#### **OBJECTIVE:**

#### As host organisation for the North West Practitioner Registration Scheme, support Public Health England and Health Education England in the implementation of the public health practitioner registration programme

ACTIONS:	OUTCOMES:
<ul> <li>Recruit Programme Coordinator</li> </ul>	Increased number of professionals achieving
• Establish North West Practitioner Scheme Working	public health practitioner accreditation
Group	<ul> <li>Competent and quality assured workforce</li> </ul>
<ul> <li>Develop Communications Plan</li> </ul>	
<ul> <li>Recruit assessors and verifier</li> </ul>	
<ul> <li>Formulate Risk Register</li> </ul>	
<ul> <li>Provide appropriate training for assessors</li> </ul>	
Recruit mentors	
<ul> <li>Provide appropriate training for mentors</li> </ul>	
<ul> <li>Deliver Learning sets</li> </ul>	
<ul> <li>Obtain E-Portfolio Licenses</li> </ul>	
Recruit practitioners from across North West	
Workforce	

### Strategic Intelligence and Partnership

Director of Public Health: **Matthew Ashton** Responsible Officer: **Helen Bromley/Sharon McAteer** 

#### **OBJECTIVE:**

Manage collaborative intelligence across Cheshire & Merseyside, and support priority work areas as identified by the Directors of Public Health, with particular support for the needs of the devolved areas

ACTIONS:	OUTCOMES:
Provide specialist intelligence support to PHC aligned to the key current and emerging priorities by:	Greater understanding across C&M to impact on the priority areas. Also devolved areas are better able to plan effective interventions and service
<ul> <li>Production of Cheshire and Merseyside suicide audit report</li> </ul>	provision.
<ul> <li>Continue to disseminate real time surveillance data and evaluate its usefulness</li> </ul>	
<ul> <li>Conduct quantitative and qualitative evaluation of High Blood Pressure Programme</li> </ul>	
<ul> <li>Provide support for other Champs priorities e.g. alcohol as required</li> </ul>	
To performance manage and plan the work of the Commissioned Intelligence Service until the end of current contract in March 2019	Better intelligence in relevant areas of public health and its determinants across Cheshire and Merseyside. Improved identification of health needs and inequalities, and therefore improved service commissioning.

# Programme Objectives 2018/19

### Suicide Prevention

Director of Public Health: **Sue Forster** Responsible Officer: **Pat Nicholl** 

#### **OBJECTIVE:**

The Cheshire and Merseyside Suicide Prevention Board continues to implement the delivery of the NO MORE suicide strategy

ACTIONS:	OUTCOMES:
Leadership	An effective Suicide Prevention Partnership
<ul> <li>Implement a Sector Led Improvement programme to drive improvement against NO MORE Suicide Action Plan &amp; Public Health England Local Authority Guidance</li> <li>Deliver a summit to present latest evidence and best practice of suicide prevention</li> </ul>	<ul> <li>Strategic action and resources to create suicide safer communities and achieve suicide safer community accreditation</li> <li>Reduction in suicide rates and variation between the local authority areas</li> </ul>
<ul> <li>Prevention</li> <li>Improve community attitudes and public dialogue on suicide by:</li> <li>Implementation of the "Time to Talk" awareness campaign across C&amp;M</li> <li>Implementation of awareness campaigns on World Suicide Prevention Day (10th September) and World Mental Health Day (10th October)</li> <li>Implementation of Suicide Prevention Training that impacts on the ability to intervene and support those with suicidal experiences as follows:</li> <li>Implementation of Zero Suicide Alliance Prevention E learning Training in Public sector organisations</li> <li>Continued implementation of "Community Gatekeeper" training with the aim to increase learners' understanding and knowledge of practical suicide prevention techniques, to enable them to confidently make appropriate and timely interventions if they think someone is feeling suicidal</li> </ul>	<ul> <li>Increased awareness of suicide risks and suicide prevention</li> <li>Improved mental health, wellness, resilience and recovery</li> <li>Improved suicide prevention skills and knowledge</li> </ul>
Safer Care	• Accessible community choices for people in crisis
<ul> <li>Implementation of readily available community based care for people at risk of suicide</li> <li>Development of an offender Mental Health pathway post release into community</li> <li>Collaborate with strategic partners to implement safer care standards across C&amp;M</li> </ul>	<ul> <li>as an alternative to A&amp;E</li> <li>Improved support during transition period with reduced risk of suicide</li> <li>Reduced risk of suicide with 24 hour access to community crisis care &amp; improved access to psychological therapies</li> <li>Zero in-patient suicide</li> <li>Improved patient care and early detection of potential suicide risk &amp; intervention</li> </ul>

<ul> <li>Support After Suicide</li> <li>Resources and support are available to people bereaved and affected by suicide by:</li> <li>Recommissioning the Suicide Liaison Service for 7 Local Authorities</li> <li>Co-ordination of the C&amp;M support after suicide task group to regularly review activity and provide reports to the Board</li> <li>Ensuring a timely community response following potential suicide cluster/ risk of contagion by:</li> <li>Ensuring the nine Local Authorities have a Community Response Plan (CRP) procedure in place and is activated as necessary for clusters and potential contagion</li> <li>CRP activity reported to the C&amp;M support after suicide surveillance group</li> </ul>	<ul> <li>Alleviation of the distress of those exposed to or bereaved by suicide</li> <li>Reduced economic costs of suicide in Cheshire &amp; Merseyside</li> <li>Reduced risk of suicide contagion/ clusters occurring after a notable death by suicide</li> <li>Reduction in anxiety and potential for vicarious trauma</li> <li>Early detection of clusters</li> </ul>
<ul> <li>Intelligence</li> <li>Track progress across all interventions through systematic data collection and evaluation, system by:</li> <li>Establishing a multi-agency suicide surveillance group</li> <li>Developing an evaluation and monitoring system to track progress of the NO MORE Suicide Strategy</li> <li>Conducting a Cheshire and Merseyside Suicide Audit</li> <li>Maintaining Real Time Surveillance to provide an instant alert to each of the 9 Local Authorities</li> <li>Gathering multi-agency information on suspected suicide deaths or attempts in public places</li> </ul>	<ul> <li>The NO MORE Suicide Board have accurate and current information to drive strategic action planning</li> <li>Data collection and evaluation system to track strategy in place</li> <li>Better understanding of the needs of different populations at risk of suicide</li> <li>Reduction in access to means and respond effectively to suicide in public places utilising robust and current intelligence</li> </ul>

# Programme Objectives 2018/19

### System Leadership

Director of Public Health: **Dr Sandra Davies** Responsible Officer: **Dawn Leicester** 

#### **OBJECTIVE:**

Enabling and delivering strong public health leadership focusing on prevention, population need, a strong evidence base, good quality data and working across organisational boundaries

ACTIONS:	OUTCOMES:
<ul> <li>Maximise the profile of the C&amp;M Directors of Public Health and their teams as effective public health system leaders</li> </ul>	<ul> <li>Health and wellbeing outcomes improved by collective strategic action</li> <li>DsPH recognised as collaborative system leaders with a place at top level discussions and decision making</li> </ul>
<ul> <li>Maximise engagement and leadership of the public health system and key partners to deliver the priorities of the Collaborative</li> </ul>	
<ul> <li>Actively seek opportunities for external financial and human resources</li> </ul>	
• Influence Liverpool City Region devolution programme in matters relating to Public Health comm presenting regular updates at the portfolio holder meetings and new Health and Wellbeing Forum	
<ul> <li>Collaborate with PHE to develop Wellbeing and Health Programme</li> </ul>	
<ul> <li>Support the delivery of the Cheshire and Warrington Public Sector Transformation Programme and Board</li> </ul>	
<ul> <li>Support and influence the Health and Care Partnership to implement the "Prevention at Scale" work stream</li> </ul>	
<ul> <li>Influence and respond to national and regional policy development including minimising the impact of business rates retention and removal of the ring fenced grant</li> </ul>	



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Cheshire & Warrington Sub-Regional Leaders Board

LIVERPOOL CITY REGION