AGENDA ITEM:

COMMITTEE: HEALTH SCRUTINY COMMITTEE

DATE: 10TH OCTOBER

REPORT OF: THE ASSISTANT CHIEF EXECUTIVE (STRATEGY,

PERFORMANCE & GOVERNANCE)

REPORT TITLE: RESPONSES TO THE SCRUTINY REVIEW "HEALTH

INEQUALITIES IN BRINNINGTON

1.0 **Purpose**

1.1 This reports sets out responses to the Scrutiny Review of Health Inequalities in Brinnington carried out by the Social Care and Health Scrutiny Committee in 2005/06. Reponses have been made by the Council's Executive, Stockport PCT and the Stockport Health Improvement Partnership (SHIP).

2.0 Information

- 2.1 The three responses are set out accordingly:
 - The Council's Executive's response agreed in June: Appendix A.
 - Stockport PCT's response, made in July: Appendix B.
 - The report agreed by SHIP at its September meeting: Appendix C.
- 2.2 It was agreed to postpone reporting these responses until all three were produced. Due to the postponing of a SHIP meeting, it has not been possible to report this information until now.

3.0 Recommendation

3.1 The Committee is invited to comment on the responses.

Further information

To discuss this report or for further information please contact Andrew Burridge, by telephone on 0161 474 3183 or by e-mail on andrew.burridge@stockport.gov.uk.

APPENDIX A - COUNCIL EXECUTIVE RESPONSE

Report to: Executive Date: 5th June 2006

Report of: Executive Councillor (Adults)

Response to Scrutiny Review – Health Inequalities

1.0 BACKGROUND

1.1 The Final Report of the Social Care and Health Scrutiny Committee's review of health inequalities in Brinnington was presented to the Council's Executive on April 24th. The report made recommendations to the Executive, the Primary Care Trust (PCT) and the Stockport Health Improvement Partnership (SHIP). This report contains the proposed response of the Executive Councillor (Adults and Health), to the recommendations contained within the Scrutiny Review of Health Inequalities in Brinnington.

2.0 INTRODUCTION

- 2.1 The Scrutiny Committee has undertaken a thorough, innovative and thought provoking review. In addition to the findings of the review a great deal can be gained from its process as a means of involving communities in generating and delivering solutions to complex problems. The Executive is pleased that Stockport's Scrutiny Committees continue to sustain their position as a leading reference point for other local authorities and that the learning from the review can spread beyond the Council's boundaries.
- 2.2 The review has been particularly timely and has benefited from, and been of benefit to, two complementary developments,
 - The drafting of Stockport's Local Area Agreement which provided the opportunity to develop a coherent plan to tackle the issue of polarity in Stockport; and
 - The establishment of a health group in Brinnington as part of the Neighbourhood Renewal Local Area Action Plan which provides a sustainable vehicle for the further development and delivery of many of the elements of the review.
- 2.3 Having said that, a sense of the review developing its own momentum, generating enthusiasm across organisations to develop joint solutions to reverse recent health trends has been palpable. It is hoped that this momentum can be sustained in the ongoing work of the Health Theme Group in Brinnington and by partners developing a borough-wide response through the SHIP.
- 2.4 The Committee is to be commended in taking full account of the wider determinants of ill health and the Executive is aware of the Council's role as an engine of health improvement and committed to playing its full part in addressing those economic, social and environmental factors which affect people's health.

- 2.5 The review contains an important analysis of trends in the health of the people of Stockport. The evidence describes an effect in which both increases in life expectancy in Stockport's most affluent areas has slowed compared to the England average, and the gap between the most deprived areas and the Stockport average has widened. The Executive would wish to confirm its wish to see,
 - The health of all the people in Stockport improve in relation to the national average; and
 - The health of the people in our most deprived areas improve in relation to the Stockport average.
- 2.6 The Executive fully intends that its response to this review will make a sustained contribution to the achievement of those aims. In particular, the Executive looks forward to the development of a strategic approach to tackling health inequalities, and to the reporting of this approach to the Health Scrutiny Committee in one year's time.

Recommendations:

The Executive is asked to:

(i) Accept the actions set out in the Response Table.

Scrutiny Review - Executive Response Template

Scrutiny Committee: Social Care & Health

Review title: Health Inequalities in Brinnington

Date completed: 24th April 2006

Officer responsible for response: Warren Heppolette
Date response(s) agreed: 5th June 2006

This is the agreed response of the Executive to this Scrutiny Committee review.

Original Recommendation	Agreed response	Timescale
Rec 1a – The Council's Corporate Consultation Team note the successful use of Appreciative Inquiry and amend the Consultation Handbook to include information about this methodology	The Executive notes the successful use of Appreciative Inquiry techniques throughout the review. Acknowledging the comments made by the Committee, guidance should be offered as to the most appropriate applications of the technique as well as key factors for success. The Executive will, therefore, make appropriate amendments to the Consultation Handbook on the Consultation pages of the Council's intranet site during future revisions.	April 2007
Rec 1b - The Scrutiny Team report on the success of the Appreciative Inquiry to the Centre for Public Scrutiny and other Overview and Scrutiny Committees and officers supporting Scrutiny.	 Agreed. Funding for the review was provided by the Centre for Public Scrutiny on the basis that good practice and action learning developed by the review is widely shared. In the short term the Scrutiny Officer: Has been approached to facilitate a seminar at the Centre for Public Scrutiny Annual Conference on Scrutiny and Neighbourhoods. Will provide a presentation about Appreciative Inquiry at the North West Scrutiny Officers Network. Has approached academics with expertise in AI, and who produce an AI journal to provide a copy of the Final Report and offer further case study information. Over the following year the Scrutiny Team will continue to pursue opportunities to share the learning. 	Ongoing

Rec 2a - The full findings and eventual evaluation report are reported to the Neighbourhood Renewal Local Area Action Plan (NRLAAP) Theme Groups who will lead the delivery of actions identified by the AI (The NRLAAP Theme Groups are discussed at paragraph 4.28).	The findings will be reported to the Brinnington Partnership Board on May 24th. Following the Partnership Board meeting the report will be circulated to each Theme Group member by the end of May. The report will be added as an item for discussion on each of the next Theme Group agendas.	Ongoing
Rec 2b - Further analysis of stories be carried and reported to the NRLAAP Theme Groups, the local community and the workforce as part of formal feedback.	Agreed. The Centre for Health Promotion has carried out analysis of the stories gathered by the Al. This work will be circulated to appropriate Theme Group members. The analysis will also be used to inform a special edition of Brinnington Community First newsletter which will feedback to all Brinnington residents about the Make Brinnington Healthier Starting in September this year, it has been agreed that two of the Brinnington Local Area Action Plan Themes will be discussed in each issue of Brinnington Community First's Newsletter. Extracts of the positive stories will be anonymized and included within the newsletter in line with the topic areas being discussed in each of these quarterly newsletters that are delivered to each household in Brinnington. Appropriate stories will also be included on the next Local Area Action Team (LAT) Agenda for discussion by LAT members.	Sept 2006
Rec 2c – That the Scrutiny Team carry out an evaluation of the Al with participants and in doing so make invitations to contribute to the ongoing work of the NRLAAP Theme Groups.	Agreed. A questionnaire has been produced which has been sent to every participant in the Appreciative Inquiry (over 120 people). This questionnaire, and the Action Learning report will be used to evaluate the AI. This evaluation will be used to report back to the Centre for Public Scrutiny, and be provided to the Corporate Consultation Team and NRLAAP Health Theme Group to inform future practice.	Underway

Rec 2d - Formal feedback to participants is provided by use of a special edition of the Brinnington Community First	A special edition of the Brinnington Community First Newsletter will be produced in August/September to update every Brinnington resident about the Make Brinnington Healthier AI.	September 2006
newsletter.	 This newsletter will draw upon: Analysis of over 70 stories which has been carried out by the Centre for Health Promotion (Stockport PCT). An update from the NRLAAP Theme Groups on progress against actions identified at the Design event. The Executive Response to the Scrutiny Review recommendations. The evaluation report. 	
Rec 3a i - Commission the Corporate Director (Environment and Economy Directorate) to develop an annual or bi-annual clean-up in Brinnington	The Executive is committed to an improvement in local environmental conditions. However, rather than have an annual / bi-annual clean up it is felt to be more effective to enhance routine cleaning with specific education and enforcement activity. The creation of Environmental Services in April 2007 will bring together the collection operations, Street Cleansing, Waste Management, District Centre Rangers and aspects of enforcement relating to fly-tipping, littering, fly-posting etc. Area Conditions Officers will be appointed in the summer of 2006 and will be responsible for enforcement within an area, one of whose remit will be Brinnington. The Council has committed to a 10% improvement in street cleansing in Brinnington as part of its Local Area Agreement.	2006-2009 (LAA)

Rec 3ii - Commission the Corporate Director (Environment and Economy Directorate) to take steps to encourage local people to report environment issues to Streetscene.	Further to Rec 3a i, Area Conditions Officers will be responsible for liaising with local residents and community groups to raise the profile of local environmental conditions within their areas. A review of contact arrangements is currently ongoing to enable all residents of the borough to report environmental issues to Streetsecene. One of our considerations is the governments push towards "101", the single non emergency number, across the country by 2008. 101 will be the number that citizens can ring when they want to report something that needs fixing, such as graffiti, fly-tipping or anti-social behaviour but that is not an emergency.	2006-2009 (LAA)
Rec 3b - Commission the Corporate Director (Environment and Economy Directorate) to organise an annual fun-run in Brinnington	The Council, through the sport development team, co-ordinates athletics activity throughout the borough by facilitating an Athletics Development Group. This Group consists of representatives of the three athletics providers in the borough (Manchester Harriers, Stockport Harriers and DASH), local schools, the Sport Development team and Greater Sport (the County Sports Partnership for Greater Manchester) / the AAA of England. The group has already established a positive dialogue with representatives from Brinnington Community First to explore the available options. Those discussions are seeking to scope, plan and cost such an event. Agreement has been reached to hold such an event, subject to approval of the Athletics Development Group and the resources needed for such an event being available.	Discussions underway

Rec 3c - Commission the Head of Community Safety to undertake work with the Police to encourage local people in Brinnington to report crime and anti-social behaviour.	The Safer Stockport Partnership is currently implementing the Safer Neighbourhoods initiative, which will increase local accountability and bring Policing, and the SSP's work to tackle community safety issues, closer to local communities. Specifically this will enable local community representatives to participate in monthly area Partnership meetings, where they will be able to raise issues that need a response from the Partnership. This initiative will be supported and complemented by the appointment of a Neighbourhood Coordinator, who will manage a team of 6 Rangers, dedicated to the Brinnington and Lancashire Hill areas. These will work closely with an expanded team of Police Community Support Officers covering these areas. This increased uniformed presence in the community will help encourage the reporting of crime and anti-social behaviour through increased public confidence and accessibility of the services.	Sept 2006
Rec 3d - Ensure that refugee and asylum seekers within Brinnington are provided with appropriate information about local facilities	The issue of supportive information at the beginning of a tenancy is something the services are acutely aware of. There is, of course, the need to take account of the volume of information clients could reasonably be expected to take in and ensure provision is proportionate and useful. Currently everyone is provided with a Welcome Pack offering advice on relevant support services, key contacts etc. In order to improve the quality of information provision we aim to introduce an interim customer satisfaction survey to identify useful additions/amendments to the welcome pack for the benefit of future clients.	Sept 2006

Rec 4a - Stockport Primary Care Trust is asked to review the current Alcohol Strategy focusing work in Brinnington.	See PCT response.	
Rec 4b – Stockport PCT is asked to further develop the Health Trainer role in Brinnington including a focus upon engaging men either as health trainers or as the focus of work by health trainers.	See PCT response.	
Rec 5a - Brinnington Community First is asked to co-ordinate a high profile event to be held in Brinnington during Summer 2006 comprising a fun-run, concert and clean-up.	The Brinnington Summer Fun day is planned for July 8 th , and will be held in Brinnington Park. In addition to this, a clean up day has been scheduled around Brinnington Allotments in support of promoting healthier eating on Saturday 27 th May. A programme of events in Brinnington throughout the coming year is currently being collated. It is however considered that the development of a concert this calendar year would not maximize its impact. The possibility of a concert will be considered during the planning of BCF activities for 2007/08 however whether or not it takes place will depend on the resources available and other priorities. Brinnington Community First have also been invited to respond separately to the Committee's Final Report.	July 2006
Rec 5b - Brinnington Community	BCF currently have a full workload and important work to do	
First is asked to explore the possibility of carrying out future	around ensuring the success of First House, the new building due for opening in Spring 2007. The organisation will not have the	
'appreciative inquiries' in	capacity to do any further AI work in the near future.	
Brinnington in partnership with		
the Council and Stockport PCT.	Al is just one of the many tools / methods that the NR team will	

	the first the consultance and colored to be first to some and the consultance of the	
	use in its work as and when it is felt it can add the most value.	
	The NR team however feels that AI does not particularly address	
	the issue of poor performing services and how they impact on	
A 1 124	residents lives.	
Additional comments -	The provision of activities to underpin the ethos that all young	Ongoing
Additionally, the following issues	people can reach their full potential is a central to the	
arose during the course of the	Neighbourhood Renewal Action Plan. In addition to actions	
reviews which the NRLAAP	required by Theme Groups such as Health, and Financial	
Theme Groups are asked give	Inclusion, the Education and Young People's Theme Group is	
priority in their work this year:	dedicated to this task. The work of the group will of course link	
 Identification and provision of activities for all children and 	closely with the Inclusive & Supportive Communities Programme.	
young people to ensure that	Again the need to provide easy access to fresh fruit and	
they reach their full potential.	vegetables is already included within the NRLAAP Action Plan.	
Ensuring access to fresh fruit	Funding proposals to the Big Lottery Wellbeing fund have recently	
and vegetables.	been submitted to continue and enhance Healthy Living Scheme	
The development of a	activities by Brinnington Community First , and the Centre for	
fortnightly or monthly locally	Health Promotion. An additional funding proposal to encourage	
held drop-in session to	greater levels of healthy eating has also been submitted by	
support information sharing	Loraine Gleave (Head of PSHE & Citizenship Services: SMBC).	
and networking for people	Results of the funding proposals are awaited.	
working in Brinnington.		
gg.co	In relation to the development of a local drop in session,	
	Brinnington Community First held a Spring Event earlier this	
	month. Analysis of the evaluation forms completed by those	
	attending is being undertaken to determine whether there is a	
	wider support for a drop in session, and if so, how to move the	
	proposals forward and what format it would take.	
Rec 6 - The Panel recommends	See SHIP response.	
that the Stockport Health		
Improvement Partnership (SHIP)		
carry out work towards the		
development of a Health		
Inequalities Strategy for		

Stockport.	
F	
The Panel strongly suggests the	
following points for consideration:	
To place a strong focus upon	
a) alcohol related illness	
including review of the	
Alcohol Strategy, and b)	
ensuring all children and	
young people are able to	
reach their potential.	
The continued development	
of information about health	
inequalities in Stockport	
including information about	
mortality, illness, transient	
populations and lifestyle.	
• To develop a more systematic	
approach to carrying out	
Health Impact Assessment of	
the Council's major strategies,	
and to use the Health Impact	
Toolkit as a more	
manageable screening tool as	
part of the policy development	
process. The Toolkit is	
attached at Appendix F.	
 That the role of the Public 	
Health Network focus upon a)	
mainstreaming understanding	
of health inequalities and the	
Council and its partners'	
commitment to reduce these	
and b) to survey the	

workforce to identify existing gaps between need and provision and to feed this into health inequalities strategy development work. The Public Health Network is discussed at paragraph 5.46. To set shared objectives to tackle health inequalities by key partners. Objectives may be framed under the following themes; targeted interventions; community empowerment; workforce development; addressing the social and economic causes of health inequalities; and public health leadership. To develop shared targets and indicators specifically	
public health leadership.To develop shared targets	
health inequalities to sit alongside the developing performance monitoring framework of the Public Health Strategy 28 goals.	
Rec 7 - The Panel recommends that progress on development of a strategic approach to tackle health inequalities is reported by the SHIP to the Health Scrutiny Committee in one year's time.	

Overall comment

The PCT commends Scrutiny on a comprehensive and innovative review. In particular, the PCT is pleased that the review:-

- Sought to develop a sound understanding of health inequalities based on a socio-economic model of health and also helped to clarify the council's key role in addressing these wider determinants of health inequalities.
- Identified the need for long-term sustained approaches and the development of a local strategy overseen by SHIP and engaging all key stakeholders.
- Made use of appreciative inquiry techniques to involve communities themselves in generating and delivering solutions. Community development is one of the main goals of the Stockport Public Health Strategy.

The PCT would wish to see the momentum gained continue by the council and other partners and the Appreciative inquiry proposals revisited so that a clear prioritised action plan can be developed in order to secure real change for Brinnington.

Rec 4a - Stockport Primary Care Trust is asked to review the current Alcohol Strategy focusing work in Brinnington. 4A Stockport PCT is currently reviewing its alcohol strategy. A revised strategy will be the subject of a section of the Annual Public Health Report to be presented to PCT Board in October.

Following the health inequalities Scrutiny report, further data collection and analysis has been undertaken to help inform development of the alcohol strategy to specifically target the issues identified in Brinnington. The next stage of this process will be to engage with local community organisations and service providers to identify what further work is required and how services may be provided/improved to more effectively tackle the inequalities. It is recognised that other deprived parts of the borough also suffer disproportionate alcohol related health impacts, and we will need to seek opportunities to use the work in Brinnington as a learning process that should be used to inform service development and improvement more broadly.

Rec 4b - Stockport PCT is asked
to further develop the Health
Trainer role in Brinnington
including a focus upon engaging
men either as health trainers or
as the focus of work by health
trainers.

Mainstream funding for health trainers is only available from 2007/08 as Stockport PCT is a non-spearhead PCT. However, the PCT has secured external funding from the EU interreg IIIB programme to develop public health capacity. Some of this work will be focused on pre-employment training for workless people to enable them to apply for health trainer posts when they become available. Brinnington will be one of two target areas for this project and it is anticipated men will be a focus for this work.

In addition, an overall strategy for development of this public health workforce role has been drafted, which ensures current and future health trainer resources are targeted at Brinnington residents, including a pilot scheme operational in 06/07 managed by the Foundation Trust, which will provide lifestyle behaviour change support as part of the pre-operative care pathway.

Rec 6 - The Panel recommends that the Stockport Health Improvement Partnership (SHIP) carry out work towards the development of a Health Inequalities Strategy for Stockport.

Work on inequalities is a key priority for the Public Health Network and is the major theme of the Stockport EU interreg III programme initiative. A number of events and meetings have already been held to develop a shared understanding and in December there is a specific event planned to disseminate the results of the review and engage network members in contributing to the strategy. In addition work is ongoing to use the network's website to share good practice re health inequalities and signpost people to relevant local reports and contacts.

APPENDIX B – STOCKPORT HEALTH IMPROVEMENT PARTNERSHIP RESPONSE

DATE 18TH SEPTEMBER 2006

REPORT TO STOCKPORT HEALTH IMPROVEMENT PARTNERSHIP

REPORT OF DIRECTOR OF PUBLIC HEALTH &

POLICY MANAGER (HEALTH)

SUBJECT RESPONSE TO THE SCRUTINY REVIEW OF HEALTH INEQUALITIES

IN BRINNINGTON

1.0 PURPOSE

1.1 The purpose of this report is to propose a response to the Social Care & Health Scrutiny Committee's review of health inequalities in Brinnington.

2.0 BACKGROUND

2.1 In its final report on Health Inequalities in Brinnington the Council's Social Care & Health Scrutiny Committee recommended that:

The Committee recommends that the Stockport Health Improvement Partnership (SHIP) carry out work towards the development of a Health Inequalities Strategy for Stockport.

The Panel strongly suggests the following points for consideration:

- To place a strong focus upon a) alcohol related illness including review of the Alcohol Strategy, and b) ensuring all children and young people are able to reach their potential.
- The continued development of information about health inequalities in Stockport including information about mortality, illness, transient populations and lifestyle.
- To develop a more systematic approach to carrying out Health Impact Assessment of the Council's major strategies, and to use the Health Impact Toolkit as a more manageable screening tool as part of the policy development process.
- That the role of the Public Health Network focus upon a) mainstreaming understanding of health inequalities and the Council and its partners' commitment to reduce these and b) to survey the workforce to identify existing gaps between need and provision and to feed this into health inequalities strategy development work.

- To set shared objectives to tackle health inequalities by key partners. Objectives may be framed under the following themes; targeted interventions; community empowerment; workforce development; addressing the social and economic causes of health inequalities; and public health leadership.
- To develop shared targets and indicators specifically measuring work to reduce health inequalities to sit alongside the developing performance monitoring framework of the Public Health Strategy 28 goals.
- 2.2 This report proposes a response to each element of the recommendation. That response is attached as Appendix A. Furthermore, early work to identify a process by which a Health Inequalities Strategy will be developed has been taken forward through the Public Health Partnership Board and is attached as Appendix B.

3.0 RECOMMENDATION

3.1 SHIP is asked to approve the response to the Committee.

APPENDIX A

RECOMMENDATION	RESPONSE	TIMESCALE	LEAD
That the Stockport	Agreed. SHIP considers the development of a Health	June 2006-	Associate
Health Improvement	Inequalities Strategy as its principal priority for the year.	March 2007	Director
Partnership (SHIP)			Public
carry out work towards	We agree that there are clear advantages to developing a		Health
the development of a	coherent strategy whilst recognising that many elements of		
Health Inequalities	targeted work in priority neighbourhoods are already place. A		
Strategy for Stockport.	consolidated effort to impact on inequalities will clearly be		
	supported by an intelligence led programme of interventions		
	and targets which will assist planning, effective leadership and effective performance management.		
	enective performance management.		
	A detailed programme of work to develop the strategy is		
	attached as Appendix B.		
To place a strong focus	Agreed.	2006-2009	Public
upon alcohol related	The Stockport Alcohol Strategy was launched in November last		Health –
illness including review	year. An action plan has now been developed identifying lead		Stockport
of the Alcohol Strategy	responsibilities for a broad range of activities under the themes:		PCT
	Communication and Communities		
	Treatment and Care		
	Crime and Disorder This is a second of the control of the co		
	This is complemented by the Young People's Substance misuse		
	Plan, which includes alcohol, and includes a set of Outcome		
	Performance Indicators for monitoring the impact of the strategy.		
	Strategy.		
	The Government has recently published the long-awaited		
	Models of Care for Alcohol Misusers (MoCAM), which sets out		
	guidance on the development of comprehensive and integrated		
	local multi-agency systems for identification and treatment of		
	alcohol misuse. This will inform a review of provision in		
	Stockport, which will seek to build on the good practice already		
	established and improve the way we identify and tackle alcohol		

misuse in a range of settings.

A key feature of MoCAM, and an issue that had already been identified in Stockport, is the need for improved identification and provision of lower level interventions in Primary Care. The Senior House Officer in Public Health is currently investigating options and best practice I relation to developing this kind of service.

The annual report of the Director of Public Health (see section 2b above) proposes that we should counter the misinformation in the traditional guidance about numbers of units in a drink. Instead, we should promote understanding of how to calculate how many units are in a drink, and use of resources such as the 'Drinkaware' unit calculator as well as general awareness of the real level of alcohol in modern drinks. The report welcomes the movement of Government and the drinks industry to provide unit information on labels and we would encourage people to look for this when buying alcohol.

A Dual Diagnosis Strategy is being developed to address the issues of related drug and/or alcohol misuse and mental health issues. The new Stockport wellbeing website also includes information on the links between alcohol and lower level mental health issues, such as anxiety and depression.

A strategy is also being developed to improve the identification and interventions in the A&E department of Stepping Hill Hospital.

Following the health inequalities Scrutiny report, further data collection and analysis has been undertaken to help inform development of the alcohol strategy to specifically target the issues identified in Brinnington. The next stage of this process will be to engage with local community organisations and

service providers to identify what further work is required and how services may be provided/improved to more effectively tackle the inequalities. It is recognised that other deprived parts of the borough also suffer disproportionate alcohol related health impacts, and we will need to seek opportunities to use the work in Brinnington as a learning process that should be used to inform service development and improvement more broadly.

A meeting of key officers with responsibility for addressing alcohol misuse at the beginning of August reviewed the current position in relation to alcohol misuse in Stockport, and recommended:

- Commissioning a review of research in to effects of alcohol use, in order to clarify the rationale for advice on weekly/daily intake and health impacts of drinking above this level
- The planned alcohol service review should seek to develop targeted screening and brief interventions in a range of settings
- Exploring the potential of social marketing techniques to influence drinking levels and patterns.
- Development and delivery of training on awareness and screening for first points of contact in a range of public services, e.g. housing, Job Centres, social care providers.
- Promotion of a recognition that tackling alcohol misuse is a shared responsibility throughout public services, employers and licensed trade

Meanwhile, with effect on 11th August, Stockport Council has designated most of the Borough as an area in which the Police have new powers to stop drinking in public places. This will enable Police to take action to prevent alcohol-related antisocial behaviour and violence, which has affected communities throughout the borough. This follows the success of the Town

	Centre street drinking ban in helping to reduce alcohol related		
	crime and incidents, and overwhelming support from the public for an extension of the powers.		
Ensuring all children and young people are able to reach their potential.	A recent Scrutiny review looked at Stockport Town Centre Evening Economy and a revised action plan has been developed as result. This continues working towards the objectives of developing a more welcoming Town Centre in the evenings, and a diverse range of evening entertainment and leisure facilities, steering the evening economy away from dependence on the type of venues that tend to encourage excessive drinking. As part of the Change for Children Programme, a project has been initiated called 'Inclusive and Supportive Communities'. This brings together a range of professionals working with children and young people across Stockport and is focused on the development of integrated, multi-agency services to be delivered via a locality-based model.	2006 and ongoing	Children & Young People's Partnership
	Phase One of the Programme includes:		
	 Key agencies identify named managers who will be responsible for planning and delivery of work with children and young people in the Pathfinder Cluster 		
	These teams and managers will become the Local Partnership for Children and Young People		
	The Local Partnership for Children and Young People in Brinnington and Reddish will begin in October 2006.		
	The Local Partnerships for the other Community Clusters will operate from January 2007		
	There will be three Community Cluster Managers to co- ordinate the work of the Local Partnerships		
	The priorities for the Partnership will be agreed by the partners, and will inform how services are delivered and		

commissioned using delegated budgets.

The work will cover the development of Children's Centres, Extended Schools, the 10 Year Childcare Strategy and the 'Youth Offer' - along with any other related areas of policy and practice that subsequently emerge locally or from Central Government.

At this time the project is focusing on the following areas:

- sharing the principles that will underpin the development of locality-based services
- setting out a strategic timeline for what has to be done and by when
- undertaking a comprehensive provision and service demand mapping exercise
- producing a commissioning framework, particularly to guide the development of 'wrap-around' services (the socalled 'Kelly Hours')
- preparing proposals for the definition of localities, incluiding possible locations for the next rounds of Children's Centres and Full Service Extended Schools

The multi-agency Project Work Team will advise on these developments, ensuring that the views of all stakeholders are considered. The purpose of this way of working is to:

- have more accessible services where they are needed
- prevent social and edicational exclusion and improve support to parents
- integrate services for vulnerable groups
- safeguard and promote the well-being of Stockport's

	children and young people		
The continued development of information about health inequalities in Stockport including information about mortality, illness, transient populations and lifestyle.	Agreed. SHIP acknowledges the need to identify and utilise new sources of data to provide information which better supports detailed service planning. Significant progress is able to be reported since the review was conducted. Principally, • The completion of the Stockport Adult Lifestyle Survey • The establishment of the project team to undertake a second Stockport Young People's lifestyle survey. • Joint work across health and social care services to improve needs assessment methodologies • Mapping health risk factors against deprivation indices to inform planning for the Health Inequalities Strategy. The PCT's programme of Health Equity Audits will support all of the above by applying a robust qualitative test based on service utilisation against survey or proxy data.	Ongoing	Associate Director of Public Health PCT Public Health Analyst SMBC Policy Manager Health
To develop a more systematic approach to carrying out Health Impact Assessment of the Council's major strategies, and to use the Health Impact Toolkit as a more manageable screening tool as part of the policy development process.	Agreed. A process is proposed which will facilitate the provision of Health Impact Assessments against the Council's Policy Framework at a point in the development of those key strategies which will inform their consideration by Scrutiny and the Executive prior to adoption by the Council meeting. The approach will be supported by discussions which are underway as to how the relationship between the Director of Public Health and the Council can be placed on a more formal footing. The challenge as to how to mainstream the approach in relation to lower level plans and strategies remains, although it may be informed by successfully piloting Health Impact Assessments against the Policy Framework.	Ongoing	Deputy Director of Public Health

That the role of the Public Health Network focus upon a) mainstreaming understanding of health inequalities and	Agreed. Network members themselves are clear that there should be regular meetings offering people a chance to focus on a number of public health issues over the period of the year. A clear role for the Network in the development of the Health Inequalities Strategy is articulated in the appendix.	Mar 2006	Public Health Network Co- ordinator
the Council and its partners' commitment to reduce these and b) to survey the workforce to identify existing gaps between need and provision and to feed this into health inequalities strategy	SHIP recognises the core membership as providing much of the delivery capacity to tackle inequalities as well as a key mechanism for local innovation and impact. It is essential therefore that the Network understands its role in influencing and delivering the strategy and is assisted in fulfilling its potential by the statutory agencies.		
development work. To set shared objectives to tackle health inequalities by key partners. Objectives may be framed under the following themes; targeted interventions; community empowerment; workforce development; addressing the social and economic causes of health inequalities; and public health leadership.	Agreed. Those objectives and any associated targets and interventions will, of course, be identified through the process of developing the Health Inequalities Strategy.	Mar 2007	Associate Director Public Health Policy Manager (Health)
To develop shared targets and indicators	Agreed. It is anticipated that the development of the basket of indicators for the Public Health Strategy will provide a useful	Mar 2007	Associate Director

specifically measuring	start for the for the eventual performance management of	Public
work to reduce health	efforts to narrow the health inequalities gap.	Health
inequalities to sit		
alongside the	The clarification of clear, evidence based objectives to tackle	Policy
developing	health inequalities will underpin the identification of a set of	Manager
performance	clear health inequalities targets.	(Health)
monitoring framework		
of the Public Health		
Strategy 28 goals.		

APPENDIX B

Health Inequalities Strategy - Draft Work Programme

Actions	Comment	Method	Lead	Date
1. Identify Partnerships Dealing	With Health			
Identify Local public health leadership and accountabilities	This should describe the public health delivery and leadership role undertaken by SHIP on behalf of the Stockport Partnership. It should include the outcomes of current discussions on the complexion and role of the Public Health Partnership Board	Report to Public Health Partnership Board	Associate Director of Public Health Policy Manager (Health)	July-Sept 06
Identify the key partners to be involved	Mapping exercise	Report to Public Health Partnership Board	Associate Director of Public Health Policy Manager (Health)	July-Sept 06
2. Consider National, Regional an	d Local Priorities		-	
Review national strategies such as the NHS Plan	This element intends to describe the national policy context and ensure local efforts deliver on national health inequalities targets.	Report to Public Health Partnership Board	Associate Director of Public Health	25 th Sept 06
identify local partners' key health and other strategies	This element intends to describe the local policy context and describe	Report to Public Health Partnership Board utilising Local Area Agreement, Local	Associate Director of Public	25 th Sept 06

ing efforts to reduce th inequalities. cognises that much ant work already takes and a consolidation of efforts into a single ramme of work would be both leadership and ormance management at work more effective.	Delivery Plan, PCT Business Plan, Council Plan, Community Strategy	Health Policy Manager (Health)	
ant work already takes and a consolidation of e efforts into a single ramme of work would be both leadership and ormance management	Strategy	Manager	
ac work more engage.			
			1
objective for the health line is to identify the ch problems of the area che factors contributing for health. Health Baseline will porate: The general picture of health, including the illness, disability or injury; The health services available in target neighbourhoods The social, environmental and economic factors affecting the health of target populations.	Report to Public Health Partnership Board utilising: > Public Health Monitor > Adult Lifestyle Survey 2007 > completed HEAs > Area Profiles > Area Deputies' reports > developing basket of public health indicators	Associate Director of Public Health Public Health Analyst	25 th Sept 06
)	th problems of the area the factors contributing for health. Health Baseline will porate: I the general picture of health, including the illness, disability or injury; I the health services available in target neighbourhoods I the social, environmental and economic factors affecting the health of target populations.	h problems of the area the factors contributing for health. Health Baseline will porate: The general picture of health, including the illness, disability or injury; The health services available in target neighbourhoods the social, environmental and economic factors affecting the health of target populations. The problems of the area and Public Health Monitor Adult Lifestyle Survey 2007 Area Profiles Area Deputies' reports Developing basket of public health indicators The problems of the area and health Monitor Adult Lifestyle Survey 2007 The problems of the area and all the social and a profiles are profiles. The problems of the area and all the social and a profiles are profiles are profiles. The problems of the area and all the social and a profiles are profiles are profiles. The problems of the area and all the social and a profiles are profiles. The problems of the alth Monitor and all the social are profiles. The problems of the alth Monitor and all the social are profiles. The problems of the alth Monitor and all the social are profiles. The profiles are profiles are profiles are profiles. The problems of the alth Monitor and all the social are profiles. The problems of the alth Monitor and all the social are profiles. The profiles are profiles are profiles are profiles are profiles. The profiles are profiles are profiles are profiles are profiles are profiles. The profiles are profiles ar	h problems of the area the factors contributing for health. Health Baseline will porate: I the general picture of health, including the illness, disability or injury; I the health services available in target neighbourhoods I the social, environmental and economic factors affecting the health Public Health Monitor Adult Lifestyle Survey 2007 Completed HEAS Area Profiles Area Deputies' reports Analyst Public Health Public Health Analyst Public Health Analyst

Comment	Method	Lead	Date
very clearly target populations, risk factors, gaps in provision and impact			
⊥ What works			
In order to establish the current situation in relation to addressing health inequalities it is necessary to identify the	Report to Public Health Partnership Board - Identify key health improvement interventions in target areas	Associate Director of Public Health	27 Nov 06
characteristics believed to represent good practice in addressing health inequalities.	Identify and assess progress against local inequalities targets Clarify local plans for taking forward area working Identify existing models of good practice both in Stockport & elsewhere	Policy Manager (Health) Public Health Network Co- ordinator	
	Utilise findings of the Brinnington Appreciative Inquiry to identify interventions which have greatest impact. PHN event - Engage the Public Health Network in solution and needs assessment		PHN Event Dec 06
	very clearly target populations, risk factors, gaps in provision and impact What works In order to establish the current situation in relation to addressing health inequalities it is necessary to identify the characteristics believed to represent good practice in addressing health	what works In order to establish the current situation in relation to addressing health inequalities it is necessary to identify the characteristics believed to represent good practice in addressing health inequalities. Report to Public Health Partnership Board - Identify key health improvement interventions in target areas Identify and assess progress against local inequalities targets Clarify local plans for taking forward area working Identify existing models of good practice both in Stockport & elsewhere Utilise findings of the Brinnington Appreciative Inquiry to identify interventions which have greatest impact. PHN event - Engage the Public Health Network in solution and needs	very clearly target populations, risk factors, gaps in provision and impact What works In order to establish the current situation in relation to addressing health inequalities it is necessary to identify the characteristics believed to represent good practice in addressing health inequalities. Identify and assess progress against local inequalities targets Clarify local plans for taking forward area working Identify existing models of good practice both in Stockport & elsewhere Utilise findings of the Brinnington Appreciative Inquiry to identify interventions which have greatest impact. PHN event - Engage the Public Health Network in solution and needs

Actions	Comment	Method	Lead	Date
Ensure neighbourhood partnerships and local community are aware of health issues that affect the area and able to inform solutions to address them	This element seeks to sustain the engagement of the wider community in Brinnington which was generated by the Appreciative Inquiry. Additionally it seeks to raise awareness of local health issues with the Council's Area Committees and engage them in the identification of solutions	Consultation with local partnerships and Area Committees – presenting data from local health profiles and identifying priorities for action Ascertain view of residents on how they can work with statutory agencies to support the improvement in health of local residents Develop local targets from consultations	Associate Director of Public Health Policy Manager (Health)	Oct-Dec 06
6. Identify Health Priorities			<u> </u>	27.11
Agree key areas for action based on local and national targets, evidence from the Health Baseline, evidence of effectiveness and best practice and the views of key stakeholders.	Specific local priorities will be identified through a review of local and national data on healthy and population statistics. Local targets will reflect identified local problems.	Report to Public Health Partnership Board - Develop set of high level outcomes for health in the local area (eg life expectancy targets) with more detailed outcome targets with milestones to enable progress to be monitored (eg reflecting lifestyles, access to services and wider determinants of health).		27 Nov 06
7. Develop Programme	The programme will be	I	Public	Doc 06
Agree a programme of activity for local delivery	The programme will be based on a reliable identification of health issues for local people and evidence of effective interventions.	Public Health Network event - Highlight the areas of unmet need and provide a clear set of objectives to work towards to meet these needs	Health Network Co- ordinator	Dec 06

Actions	Comment	Method	Lead	Date
		Decide rationally how to use resources to improve the local population's health in the most effective and efficient way		
		Influence policy, interagency collaboration, or research and development priorities.		
		Develop a joint implementation plan to co-ordinate a range of evidence based interventions		
		Underpin the programme with relevant indicators and targets		
Undertake Health Impact Assessment of planned programme		HIA Toolkit	Deputy Director of Public Health	Jan – Feb 07
8. Review				
Performance Monitoring of goals/targets	The development of a robust performance monitoring tool to track reductions in health inequalities will be developed by the Public Health Partnership Board and reported to SHIP and the Stockport Partnership on a regular basis	Report to Public Health Partnership Board – proposing robust framework for measuring impact and cost effectiveness	Policy Manager Health Associate Director of Public Health Public Health Analyst	Establish performance Management framework Feb – Mar 07 Then ongoing