

## **EAST AYRSHIRE COUNCIL**

**CABINET – 17<sup>TH</sup> JUNE 2009**

### **COMMUNITY HEALTH IMPROVEMENT PARTNERSHIP (CHIP) – PROGRESS REPORT**

#### **Report by Executive Director of Neighbourhood Services**

#### **1. PURPOSE OF REPORT**

- 1.1 The purpose of this report is to update members on the progress of the Community Health Improvement Partnership (CHIP) following the mainstreaming of the initiative in 2008 and completion of the first year of the Council's Service Level Agreement with NHS Ayrshire & Arran.

#### **2. BACKGROUND**

- 2.1 The Community Health Improvement Partnership (CHIP) was established in 2001 to directly address health inequalities within East Ayrshire's most deprived communities with a particular emphasis upon coronary heart disease.
- 2.2 The project initially focused upon the delivery of services via the CHIP Van Mobile Healthy Living Centre which enabled East Ayrshire's most isolated communities to access the same services as those living in more urban areas. This outreach method of promoting health improvement was recognised nationally as a model of good practice and locally gained an excellent reputation amongst the population of East Ayrshire thus providing a platform for the development of further health related activities utilising the brand.
- 2.3 The project has developed considerably and in line with local and national priorities the focus of the service as a whole expanded to address the wider reducing health inequalities agenda. As such the service now incorporates a Lifestyle Referral Scheme, an extensive programme of community based classes and services, a men's health and equalities programme including homeless people and the prison population, the Healthworks workforce initiative, older people's community and home based lifestyle programmes, Cookwell healthy eating programmes and a range of community based health events and initiatives.
- 2.4 In 2008, following 7 years of temporary external funding, the CHIP project was mainstreamed by East Ayrshire Council in partnership with NHS Ayrshire and Arran and became a permanent service. The NHS Ayrshire & Arran funding arrangements necessitated the development of a Service Level Agreement which has now been in operation for a year.

#### **3. PROGRESS / PERFORMANCE**

- 3.1 As outlined at 2.4, the community Health Improvement Partnership has made the transition from being a short-term funded project to become a mainstream community health development service in this last year.

- 3.2 This secures the services of CHIP in the long term and ensures that the population of East Ayrshire will continue to benefit from a range of relevant health interventions to improve their quality of life. As such, the key driver for measuring performance of CHIP is the achievement of targets associated with the Improving Health and Wellbeing theme of the Community Plan.
- 3.3 To satisfy mainstream funding requirements of NHS Ayrshire & Arran key work areas and associated targets for CHIP were developed as a Service Level Agreement. These link directly to aims one, two and five of the Improving Health and Wellbeing theme of the Community Plan.
- 3.4 A breakdown of performance against specified targets of the Service level Agreement along with a summary of the key achievements in each area for 2008-09 is outlined as follows:-

#### 3.4.1 Healthy Communities and Workplaces

Utilising the CHIP Van to distribute health awareness advice, health checks and signposting information a range of visits and events are delivered within communities and workplaces throughout the year. The CHIP Van remains a popular visitor in communities and recent additions such as the Wii Fit ensure it continues to attract new customers. Community Visits remain an important first point of contact with individuals in terms of anticipatory care. The HealthWorks Initiative offers employers the opportunity to provide various degrees of health interventions for their workforce. These include prevention and treatment of stress and high blood pressure as well as more fun-based relaxation input.

Target(s)	Performance	
3,000 attendances through outreach services such as Chip Van, Events & Groups	<b>4,210</b> Attendances on Chip Van	<b>Achieved</b>
500 Attendances through Workplaces	<b>358</b> Number of attendances at Workplace activities	<b>Not Achieved</b>

Whilst the target for Community Attendances was achieved, the target for Workplace interventions was not. This can to some extent be attributed to businesses becoming slightly more cautious in terms of buying the HealthWorks packages in the current economic climate; however the target for 2009/10 will remain the same with additional effort on achieving it.

#### 3.4.2 Lifestyle Referral Scheme

This service accepts referrals from primary and secondary care health professionals and provides a holistic assessment of lifestyle factors affecting the individual. Clients are invited to an initial consultation with the Lifestyle Development Officer where a range of information, advice and support is put in place. This is followed by further appointments at 6 weeks, 12 weeks, 6 months and 12 months.

Target(s)	Performance	
700 new referrals per year	<b>910</b> new referrals received	<b>Achieved</b>

This target was achieved and demonstrates a continued increase in relationships and trust with medical professionals who make referrals. In addition, internal statistics recorded in the last year indicate that there is also an increase in the numbers remaining in the referral system and attending the various follow up appointments outlined above.

### 3.4.3 Programmes to treat specified illnesses, Long Term Conditions, and the Frail Elderly Population

A range of interventions have been delivered including exercise classes and educational input to address specific needs, including provision of rehabilitation and confidence building for patients with Chronic Obstructive Pulmonary Disease and Cancer. Similarly prevention and rehabilitation programmes are provided for the frail and elderly population more susceptible to falls.

Target(s)	Performance	
Minimum of 900 classes per year	777 classes delivered	<b>Not Achieved</b>
8,000 attendances per annum	10,253 Attendances at classes	<b>Achieved</b>

Although it appears that the number of classes delivered in the last year did not reach the target set, it must be noted that several classes with similar target groups and abilities were combined at certain times in the year. Importantly, the actual numbers of people attending the various levels of intervention has increased on the previous year and easily exceeded the target.

### 3.4.4 Equalities

Delivery of services particularly targeted to reduce health inequalities. Specific target groups include men, the homeless population, prisoners and those with mental health problems. Interventions include Health awareness events; health checks and advice; promotional themed programmes and events; nutrition, healthy eating and cooking on a budget; and facilitation of access to leisure centres and activities.

Target(s)	Performance	
Support three wellbeing events held within Kilmarnock Prison - 200+ attendances per visit	2 events supported	<b>Not Achieved</b>
	200+ Attendances at each event	<b>Achieved</b>
Deliver 10 health awareness sessions within homeless facilities - 50+ attendances per year	12 sessions delivered	<b>Achieved</b>
	60 Attendances in total	<b>Achieved</b>
Deliver 4 weeklong Men's Health Events - 300 participants per year	4 events delivered	<b>Achieved</b>
	229 Attendances in total	<b>Not Achieved</b>
Provide information on healthy living at 2 mental health events	3 events supported	<b>Achieved</b>

The work of CHIP is driven by the reducing health inequalities agenda, recognising that there is a specific need to target hard to reach sections of the community CHIP continues to develop bespoke and engaging ways of achieving this. In particular the service has further developed work with the homeless population in this last year via the introduction of Access Schemes at the Galleon and Visions Leisure Centres which has proven immensely popular and beneficial amongst the individuals and families accessing it.

The specific target around Prison wellbeing events was not achieved due only to disruption caused by industrial action on the day the event was scheduled to take place; it is notable that the target for attendances at the two events which did take place was achieved. The attendances at Men’s Health Events also failed to meet the set target and whilst there initially appears to be no specific explanation for this it is an area that will be given extra attention in the year ahead as it remains a key priority in East Ayrshire and nationally.

### 3.4.5 Healthy Eating

A range of healthy eating interventions are delivered within the community including Cookwell (a six week practical cooking skills programme to promote healthy eating and teach basic skills in the selection and preparation of nutritious meals on a budget), cookery demonstrations, healthy buffets and weight management sessions.

Target(s)	Performance	
Deliver a minimum of 25 programmes / events focussing on healthy eating including Cookwell, Healthy buffets & Weight management Programmes	<b>26</b> Healthy Eating Sessions	<b>Achieved</b>

It is particularly encouraging to note that uptake of Community based interventions including “Cookwell” and “Weight Off Wisely (WOW)” which require regular weekly attendance are increasing demonstrating the public appetite for healthy diet is improving.

## 4. BEST PRACTICE / ACHEIVEMENTS

- 4.1 CHIP was designated as a flagship project by East Ayrshire Community Planning Partners as a result of its direct contribution to the achievement of specific actions of key Community Planning aims and consistently high level of performance during the annual review process.
- 4.2 East Ayrshire Council and partners in NHS Ayrshire & Arran mainstreamed the CHIP project in 2008, essentially securing its health improvement services for the people of East Ayrshire. Meanwhile, throughout Scotland many Healthy Living Centres have not been successful in securing mainstream funding and face uncertainty over the future of their services. A one year reprieve was provided by the Scottish Government to support some of these projects as they strive to secure longer term funding with statutory and voluntary sector agencies. East Ayrshire Council has demonstrated real commitment to addressing the health inequalities of

the population in its decision to mainstream this innovative service at the earliest opportunity.

## **5. FUTURE DEVELOPMENT AGENDA**

5.1 Overall the services of CHIP will continue to focus on reducing health inequalities amongst the population of East Ayrshire. As outlined at 3.3, the Equally Well Implementation Plan provides a national steer for this work and Improving Health & Wellbeing thematic targets of our own Community Plan provide further framework for this and will ensure that the Services of CHIP have maximum local impact. Via the new Community Health partnership Structures some of the key areas for development will include:

- Improve links with national Keep Well Initiative within East Ayrshire
- Review of the current lifestyle referral criteria and awareness raising among referrers and clients
- Investigate the need for further sites to be used as part of the LRS
- Make increased use of the statistics recorded in relation to individuals who attend the LRS to identify health impact made, adherence levels, review the number of contacts made with each individual, benchmark with other similar services
- Launch the CHIP membership card to allow tracking of participation at various interventions and wider community activities;
- Enhance work with the Long Term Conditions Collaborative and Community Rehabilitation staff in relation to Shifting the Balance of Care
- Investigate the need for further development of healthy eating provision within the homeless hostels
- Evaluate the initial weight management programme (WOW) to identify the benefit gained and impact made with those who attended
- Improve links with Fresh Air-shire providing links with smoking cessation groups, outreach visits and sign-posting

5.2 In addition to the above, as announced by the Scottish Government on 28<sup>th</sup> May this year, East Ayrshire Council has been selected to become one of only eight local authorities to implement a pathfinder Community Healthy Weight Programme. This pilot will be implemented within the Community of Catrine and seeks to take a whole community approach to improving health and wellbeing. The services of CHIP will be central to the range of interventions delivered as part of this initiative.

## **6. RISK ASSESSMENT**

6.1 The risks associated with the work of CHIP are minimal. All working practices are risk assessed in line with authority regulations and the principles of managing safely including driver training, lone working arrangements and non-violent crisis intervention. Additionally all staff delivering intensive physical activity are appropriately qualified and only specialist staff are deployed to work with those with specific medical conditions.

## **7. LEGAL / AUTHORITY IMPLICATIONS**

- 7.1 The Council has entered a Service Level Agreement with NHS Ayrshire & Arran to underpin the work of the Community Health Improvement Partnership. The Service Level Agreement has been approved by legal services within both East Ayrshire Council and NHS Ayrshire & Arran and is subject to annual reporting through the East Ayrshire Council Cabinet and the Committee of the Community Health Partnership.

## **8. FINANCIAL IMPLICATIONS**

- 8.1 There are no additional financial implications associated with this report.

## **9. POLICY / COMMUNITY PLANNING IMPLICATIONS**

- 9.1 The Community Health Improvement Partnership is managed and delivered by the Council's Leisure Development Services section, the work of which is underpinned by key national and local strategies and priorities. In particular, since the election of the current Scottish Government, the Section has strived to further develop services aligned to the National Performance Framework and national strategic objectives – Wealthier and Fairer, Healthier, Safer and Stronger, and to a lesser extent Smarter and Greener. As such, the work of CHIP delivers particularly on key indicators of East Ayrshire's Single Outcome Agreement with the Scottish Government and below the waterline in more detail within the Community Planning theme of Improving Health and Wellbeing.
- 9.2 CHIP delivers directly on aims one, two and five of the Improving Health & Wellbeing thematic Action Plan of the Community Plan. As such performance is reported on an annual basis to the thematic group for inclusion in the Community Planning monitoring and review process.
- 9.3 The Services of CHIP have been designed to directly deliver upon the recommendations of key national and local strategies relating to Health and Wellbeing. The key drivers in on-going service development include the National Physical Activity Strategy, Improving Scotland's Health – The Challenge, Better Health – Better Care, Ayrshire & Arran Primary Prevention Strategy, Ayrshire Cancer prevention Strategy and a range of other key policy documents and frameworks.
- 9.4 Latterly, the release of the Equally Well Implementation Plan in late 2008 and the restructure of the East Ayrshire Community Health Partnership has provided a new and dynamic strategic framework for CHIP. The service has already moved beyond the realms of being purely primary prevention; however these developments will enable CHIP to reach further into key developing agendas including Anticipatory Care, Long Term Conditions and Shifting the Balance of Care.

## **10. CONCLUSION**

- 10.1 The Community Health Improvement Partnership continues to develop and deliver services that improve the health and wellbeing of the community. The decision of East Ayrshire Council and NHS Ayrshire and Arran to mainstream this CHIP not only sets a standard across the rest of Scotland but importantly it has allowed further development of services and ensures sustained efforts to reduce health inequalities. The Community Health Improvement Partnership has performed well against the targets of the Service Level Agreement and will continue to move forward and develop further in the future; the services of CHIP will be particularly important as the Shifting the Balance of Care agenda gains momentum.

## **11. RECOMMENDATIONS**

It is recommended that the Cabinet:

- (i) Note the progress of the Community Health Improvement Partnership in year one of the Service level Agreement with NHS Ayrshire & Arran

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Executive Director of Neighbourhood Services

WS/JAG  
3<sup>rd</sup> June 2009

### **GLOSSARY OF ACRONYMS USED**

CHIP: is the Acronym for the Council's Community Health Improvement Partnership Service which is based within Leisure Development Services;

LRS: is the Acronym for the Lifestyle Referral Scheme

### **LIST OF BACKGROUND PAPERS**

1. Service Level Agreement between NHS Ayrshire and Arran Community Health Partnership and East Ayrshire Council – March 2008

Any person wishing to inspect the background papers listed above should telephone 01563 578178 and ask for John Griffiths, Head of Leisure Services

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