Healthier Communities Select Committee						
Report Title	Women's Health Inec	Women's Health Inequalities Review Progress and Planned Actions				
Key Decision	No					
Ward	All	All				
Contributors	Executive Director fo Health	Executive Director for Community Services and Joint Director of Public Health				
Class	Part 1		Date: 11 Fe	ebruary 2010		

# 1 Summary and Purpose of the Report

This report sets out the response from NHS Lewisham and the Council to the recommendations arising from the Healthier Communities Select Committee's review of Women's Health Inequalities. The appendix details the progress made and future actions planned towards meeting the recommendations arising from the Women's Health review.

## 2. Policy Context

The activity being undertaken in response to the Committee's recommendations support the priority set out in the Local Strategic Partnership's Sustainable Community Strategy - 'Healthy, active and enjoyable - where people can actively participate in maintaining and improving their health and well-being' and to the specific objectives set out in a number of strategic plans, such as the Health Inequality Strategy, Children and Young People's Plan and the Physical Activity Sport and Leisure Strategy, which underpin the Sustainable Community Strategy.

#### 3 Recommendations

Members are recommended to:

- i. note the progress that has been made and future actions planned to address the recommendations arising from the Women's Health review, and
- ii. receive more detailed reports on key work areas as and when required, and
- iii. note that all outstanding actions are to be incorporated into the Health Inequalities Action Plan and monitored accordingly.

## 4. Background

- 4.1 The Healthier Communities Select Committee undertook a review of women's health inequalities in Lewisham between October 2007 and July 2009.
- 4.2 The Committee set up a working group to carry out the review. The Review was comprised of five committee members Councillor Romayne Phoenix (Chair), Councillor Chris Flood, Councillor Alan Hall, Councillor Andrew Milton and Councillor Sylvia Scott.
- 4.3 The objectives of the Women's Health Inequalities Scrutiny Review were:
  - a) Set out how existing provision of health services for women helps to meet strategic aims, objectives and priorities for Lewisham in order to improve health and well-being;
  - b) Identify what services are specifically targeting and improving women's health in the borough;
  - c) Understand the nature of women's health issues, including maternal health, domestic violence and in particular investigate any inequalities that exist between different groups of women;
  - d) Examine the communication and targeted health awareness raising campaigns in the Borough; and
  - e) Identify specific action that the local authority and/or its health partners might take to promote and improve women's health.
- 4.4 The Mayor received a report on 18 November 2009 and agreed that it be submitted to the Healthier Communities Select Committee as a written response to the recommendations contained in its review. Also, that the information provided in responses to the recommendations be used as the basis for the Council and its partners to develop a detailed action plan.
- 4.5 The NHS Lewisham Board considered their responses to the recommendations on 16<sup>th</sup> December 2009.
- 4.6 The information contained in appendix 1 details the progress made to date and future actions planned in relation to the Women's Health review.

#### 5. Financial Implications

Any costs to the Council of implementing recommendations will be need to be funded from existing resources - either from the Directorate's base budgets or from external funding sources.

## 6. Legal Implications

- 6.1 Statutory Guidance issued under s38 of the Local Government Act 2000 provides that an Overview and Scrutiny Committee may review and scrutinise any matter relating to the planning provision and operation of health services in the area of its local authority. In Lewisham, this function has been assigned to the Healthier Communities Select Committee.
- 6.2 Lewisham Council's Constitution provides for the Select Committees to report to the Mayor and Cabinet and relevant NHS organisations and for the Executive Bodies to consider the report within one month of receiving it.

### 7. Equalities Implications

- 7.1 The recommendations flowing from the review seek to reduce health inequalities across the borough and to improve health outcomes for women in Lewisham.
- 7.2 The review looked at women's health over a broad range of policy areas, and presented practicable and constructive recommendations to the bodies in the borough with health, well being and care responsibilities.

### 8. Crime and Disorder Implications

There are no crime and disorder implications arising from this report.

### 9. Environmental Implications

There are no environmental implications arising from this report.

#### **Background Papers**

- 1. Background papers on the review are available from Roger Raymond in the Scrutiny Team.
- 2. Mayor and Cabinet report from 12 December 2009

If you have any queries on this report please contact William Godwin, Manager of the Executive Director's Office, Directorate for Community Services, on ext 46951.

# Women's Health Review Action Plan

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	Recommendation	Organisational responsibility	Lead Officer	Progress towards recommendation / information update / implementation plans
1	For the Children and Young People Select Committee to monitor how the 'Healthy Eating' initiatives and Sex Education in schools are being delivered to help improve young women's health for the future.	LBL	Christine Grice and Warwick Tomsett	An in-depth review of obesity has been completed which led to the production of the Healthy Weight/Health Lifestyles strategy which incorporate actions to promote health eating. This strategy was considered by the Children and Young People's Select Committee. The current Teenage Pregnancy Strategy is currently being revised. The strategy incorporates plans for delivery of sex education in schools. The CYP Committee will be presented with the draft strategy in 2010.
2.	That the Healthier Communities Select Committee monitor progress of the social marketing work taking place in Evelyn Ward by Lewisham PCT in respect of smoking cessation and investigate the use of social marketing for alcohol cessation.	PCT	Jane Miller	A stop smoking social marketing initiative has been launched in Evelyn ward. The lessons learnt from this initiative will inform all strategies to improve healthy lifestyles, including alcohol use. The progress of this and the lessons learnt will be presented to a future meeting of the HCSC.

3	The Healthier Communities Select Committee monitor the North Lewisham Plan to ensure that it delivers on its key targets, particularly in the areas of premature mortality in respect of cardiovascular disease which is a particular issue for women in the borough.	PCT	Jane Miller	The North Lewisham Plan is currently being implemented and evaluated.  This sets out a range of initiatives to reduce premature mortality from cardiovascular disease including NHS health checks (vascular); CVD risk registers in primary care; stop smoking services; a stop smoking social marketing initiative; and other vascular prevention programmes such as healthy walks and healthy eating, including funding for community organisations to provide healthy lifestyle activities. An evaluation of Evelyn Chooses Health participatory budgeting programme provided evidence of raised awareness and behaviour change among participants. Progress reports on the North Lewisham Plan will be presented to the HCSC as required.
4	Lewisham PCT develop ways to improve follow-up procedures for women who have received Health Checks for early identification of those at risk of cardiovascular disease in North Lewisham.	PCT	Jane Miller	Learning from the CVD Healthy Communities Collaborative regarding follow up of those who have received health checks is being taken forward through the borough wide NHS Health (Vascular) Checks programme.  Two evaluations of the health check process have been carried out which produced lessons for future work. An IT solution is being developed, based on these lessons, for the NHS Health Check (Vascular) programme that will enable monitoring NHS Health Check patient pathways. For example, if a woman is seen by a pharmacist, the IT solution will ensure that her health check results are automatically transferred to the relevant GP and NHS Lewisham will be able to know if any action has been taken as a result of the health check.  In the interim, a new consent form is being used in pharmacies to enable NHS Lewisham to ensure people at risk are being followed up. In addition to this, more information about community health checks has been given to GPs to encourage

				them to follow up any patients that have been found at risk in a community health check.
5	Lewisham PCT provide more information to women patients on financial assistance in funding prescription costs. This has been seen as a particular concern for patients who have to take a lot of medication to keep their blood pressure low.	PCT	Jane Miller	Pharmacists generally advise patients who have a multiple range of therapies on whether they are exempt and about the availability of pre payment certificates. Leaflets on health exemptions are available in pharmacies as well as at:  http://www.nhs.uk/NHSEngland/Healthcosts/Pages/Prescription costs.aspx  There is also a comprehensive leaflet on health costs which has been distributed to pharmacies (available in a number of languages) http://www.nhsbsa.nhs.uk/HealthCosts/1558.aspx
6	Lewisham PCT should recruit cardiac instructors to ensure delivery of the Active Heart Programme.	LBL	Annette Stead	The active heart scheme is run by the Sport and Leisure service. They are developing a training plan in terms of qualified tutors and are also conducting a business process review of the whole scheme. Due to complete before end financial year and sign off by the PCT.  The business process review of the Active Heart scheme is underway with completion date due for end February.
7	For the Healthier Communities Select Committee to monitor the implementation of University Hospital Lewisham's Maternity Services Strategy and Action Plan.	PCT and UHL	Oliver Lake / Joy Ellery	The PCT and UHL have a separate action plan which focuses on maternity services. Progress is already being made in several areas, and will continue to be reported to the HCSC.

8	UHL and Lewisham PCT to periodically report to the Healthier Communities Select Committee on progress against the Maternity Services Strategy and Action Plan.	UHL and PCT	Joy Ellery Oliver Lake	The PCT and UHL have a separate action plan which focuses on maternity services. Progress is already being made in several areas, and will continue to be reported to the HCSC
9	The Healthier Communities Select Committee take an active role in considering proposals for the reconfiguration of Maternity Services in South-East London.	PCT	Martin Wilkinson / Oliver Lake	Update reports will be provided as required to HCSC.
10	The Council and Lewisham PCT should look to expand the Book Prescription Scheme, developed by Lewisham Library Services in partnership with Lewisham PCT, to improve the excellent service it is currently providing to residents.	LBL and PCT	Antonio Rizzo Dee Carlin	The Council currently has 210 items in stock at 5 libraries with 569 issues between April – September 2009.  Future plans aim to strengthen the links between PCT and libraries, and include  Stock increase and publicity to GPs via the PCT  Wellbeing impact assessment  Participation in the "Health and well-being activities in public libraries" pilot with Loughborough University

11	Lewisham PCT should report to the Healthier Communities Select Committee improvements in access to cognitive behavioural therapy or equivalent psychological therapy treatment while it develops community care, to ensure there is appropriate early intervention for acute episodes where admission is required.	PCT	Oliver Lake / Dee Carlin	Improving access to psychological therapies is a priority outcome for NHS Lewisham as identified in the Commissioning Strategy Plan. A new psychological therapy service has been established and referrals are now being taken from GPs. 28 newly appointed advisors are in post.  Update reports will be provided to HCSC as required.
12	That Lewisham PCT ensures that access to psychological therapies is a priority.	PCT	Dee Carlin	Improving access to psychological therapies is a priority outcome for NHS Lewisham as identified in the Commissioning Strategy Plan.
13	The Council should support the establishment of a Special Domestic Violence Court in Greenwich which will also represent cases originated in Lewisham.	LBL	Geeta Subramaniam	It is unlikely there will be further rounds of SDVC accreditation nationally, however Lewisham and Greenwich will continue to work towards implementing specialist court services which reflect the SDVC model. A Local Implementation Team has completed a gap analysis and action plan. A draft multi-agency borough protocol has been written and submitted to the LCJB for approval. Lewisham cases will be clustered at Greenwich Magistrates Court on Thursdays, with clustering due to commence imminently.
14	The Council actively encourage all schools in the borough to participate in the Westminster Domestic Violence Project.	LBL	Christine Grice / Geeta Subramaniam	This project is for Primary Schools within Lewisham. The training package for schools has been completed and trialled. Christ Church Primary School received training on 4 <sup>th</sup> January 2010 and will be the first school to pilot the project. Three further schools have expressed an interest in piloting the project. A consultant has been appointed to liaise directly with head teachers and child protection leads and encourage

				schools to participate in the project.
				The Lewisham Safeguarding Children's Board considered support to schools regarding Domestic Violence and is actively promoting further work.
15	That Lewisham PCT explore with health partners the setting up of a Sickle Cell Register in the borough.	PCT	Jane Miller	NHS Lewisham will undertake a review of the effectiveness and feasibility of establishing a sickle cell register. The findings of the review will be presented to the HCSC. Depending on the outcome of the review the possibility of setting up a sickle cell register for Lewisham will be explored.
16	The Healthier Communities Select Committee monitor the implementation of the Sickle Cell Society's '2008 Report: Standards for Clinical Care of Adults with Sickle Cell Disease in the UK' by Lewisham PCT.	PCT	Oliver Lake / Jane Miller	NHS Lewisham will identify current practice in Lewisham against the standards in the report by the Sickle Cell Society and prepare recommendations for future action where necessary. Progress reports on the implementation of the Sickle Cell Society's Report will be presented to HCSC as required.
17	The Council take a pro-active approach in promoting the use of sunscreen in all schools and also to promote the reduction in the use of sun-beds generally and the removal of unmanned sun-beds in council property.	LBL	Christine Grice / Annette Stead	Officers propose to include within the new leisure contract specification a requirement that no sunbeds can be installed or used within Lewisham's leisure facilities.  Consideration is also being given to the following:  Prior to the new leisure contract being in place, officers will identify and review possibilities of ceasing sunbed use in leisure centres  Promoting the message of sunscreen use for children and young people in schools and children's centres.

18	The Healthier Communities Select Committee monitor Lewisham PCT's progress in increasing cancer screening coverage for breast cervical and bowel cancer.	PCT reporting	Oliver Lake / Katrina McCormick	The final report from the Cancer Healthy Communities Collaborative will be presented at the end of 2010 when the project is completed. Lewisham PCT's progress in increasing cancer screening coverage for breast cervical and bowel cancer will be presented to HCSC as required.
19	The Council should also promote uptake in cancer screening coverage for breast, cervical and bowel cancer through its communications and events, such as in Lewisham Life and at local assemblies.	LBL	Adrian Wardle / Paul Jackson	The PCT will be asked to make all requests for information updates at local assemblies to the Local Assemblies Manager who will facilitate with assembly chairs. Written information materials can be deposited with the Local Assemblies team for distribution at meetings.  The Council published a news article on bowel cancer in the March 2009 Lewisham Life and carried a double page feature on breast and prostate cancer in the spring 2009 edition of My Life, the magazine for over 60s. The Council will continue to support NHS screening initiatives and ensure that it gives coverage to these issues at regular intervals in Lewisham Life, My Life and other council communication channels, such as the website.
20	The Healthier Communities Select Committee should monitor the Council and health partners' tobacco control 'smokefree' agenda to ensure that it is effective in stopping men and women of all ages from starting to smoke, as well as an effective 'stop smoking' service.	PCT	Jane Miller	There is an established and expanding stop smoking service provided by a range of providers. Specialist services are also provided which target those groups who are most heavily addicted. There are now evening drop-ins in Evelyn, Downham and Bellingham and an evening group at Lewisham Hospital. Pregnant women, their partners and parents of under 5s are offered a specialist service by the advisor funded by the Children's Centres.  In common with smokers in England more women than men in Lewisham set a quit date in 2008/09 and more women than men successfully quit. In 2008/9 1,438 men set a quit date with the

				Lewisham Stop Smoking service compared with 1,914 women and 708 men successfully quit compared with 876 women. In 2008/9, 49% of the men who set a quit date stopped smoking compared with 46% of women.  In 2008-9, approximately £497k was spent on the stop smoking service, which resulted in 3,327 people setting a quit date (more than 6 % of smokers, NICE guidance recommends 5%) and 1584 4-week quitters. This was 750 per 100,000 population compared with a target of .604 per 100,000 population. In line with the NHS Checks (Vascular) Programme NHS Lewisham plans to increase investment in smoking to expand capacity.  There are also plans to appoint a Tobacco Control Programme Manager to strengthen the Tobacco Control Programme in Lewisham, which, in addition to the Stop Smoking Service includes:  Stopping people starting to smoke Enforcement re smoke free and illegal sales Communication Health education in and out of school settings  Update reports will be provided to HCSC as required.
21	The Cabinet Member for Older People ask Job Centre Plus to provide expert employment advice to older people in the One-Stop Shop.	LBL	Annette Stead	Draft protocols on the provision of benefits and other advice relating to employment have been shared with partners and are awaiting formal agreement. North and South borough one stop satellites are being rolled out.

22	The Cabinet Member for Older People should review the Lay Visitors Scheme after 12 months, with a view to including the use of unscheduled visits by Lay Workers.	LBL	Audrey Marie Yates	The volunteering Lay Visitor Scheme will be reviewed in September 2010. The Lay Visitors undertake their visits alongside the Council's Contract Monitoring Officers. The scheme is growing and adds quality to the Monitoring process. Once the Lay Visitors have settled into their Lay Visiting routine, and feel confident in their role, the issue of unaccompanied visits will be reviewed.
23	Lewisham PCT must ensure that all GP surgeries publicise National Screening Programmes.	PCT	Katrina McCormick	Lewisham PCT encourages GPs to publicise screening programmes. Each screening programme has a system for contacting eligible patients. Much screening takes place outside GP surgeries.