Health Promotion Service
Annual Report 2016/17

The Health Promotion Service leads on approaches which maintain and improve health and wellbeing and mitigate, prevent or undo health inequalities.
Introduction

Our 2016/17 Annual Report captures a busy year for the Health Promotion Service (HPS). We have examples of achievements in this year’s Annual Report and have work here from each of the strategic framework priority areas: giving children the best start in life; supporting healthy choices and reducing harm; and strengthening and enabling sustainable communities to improve health. The framework is represented on the next page. This is the final year of our current 3 year strategy and so work has started on the development of a new framework for 2018 onwards.

Highlights from the past year include a partnership project on digital play; work with pharmacists to develop training for Health Promoting Practice, and research into the needs of homeless people in Midlothian. Staff have also enjoyed success in sharing their work with wider audiences as highlighted on our Celebrating Success page.

The examples we give here represent a small proportion of the work of the HPS. For a comprehensive view you can visit the HPS website using the links at the end of the report or by scanning the QR code. If you would like to give us feedback on this report I would welcome your email.

Moyra Burns
Health Promotion Service Manager
Strategic Framework

Our Vision
People in Lothian reach their full health potential

Our Purpose
Lead health promotion approaches which maintain and improve health and wellbeing and mitigate, prevent or undo health inequalities

How We Do It
Promote health in policies, prioritise early intervention and drive prevention through four core functions
Programme and project management: develop, lead and evaluate
Organisational and partnership development: establish, engage and support
Capacity building: with organisations, communities and workforces
Information and knowledge management: generate, share and disseminate

Our Priority Areas
Strengthening and enabling sustainable communities to improve health
Giving children the best start in life
Supporting healthy choices and reducing harm
Capacity Building Programme

The Capacity Building Programme is central to our aim of supporting and building the capacity of the health improvement workforce across the Lothians.

Capacity Building Programme

The programme is developed by Health Promotion Specialists in partnership with local and national bodies such as NHS Health Scotland and can be accessed here.

We offer a variety of training courses, including six on core Health Promotion Skills and Approaches where we aim to provide an overview of generic health promotion principles and equip participants with basic skills to utilise these in their field.

To illustrate training provided in our Capacity Building Programme we have included a snapshot of two courses: Introduction to Creating Imaginative Learning and Understanding Health Inequalities next in the report.

Luisa Walker

Facts & Figures 2016/17

4 Health Inequality Seminars attended by 141 participants

90% of participants who attended the Health Inequality Seminars agreed it improved their knowledge of the topic

102 different organisations used our Capacity Building Programme for staff development

90% of participants reported an immediate increase in knowledge that would be of benefit to their work

IN THE PIPELINE

In the year ahead, we will be conducting an online consultation with partners to ensure that the current Capacity Building Training Programme meets the needs of practitioners and to identify future training opportunities.

Strengthening and enabling communities
A Snapshot of our Training

Creating Imaginative Learning

Creating Imaginative Learning (CIL) is designed to add ‘sizzle to the substance’ of any training or learning event making it more stimulating and engaging for learners.

The 5 key concepts of CIL:

• Honour Uniqueness
• Rich and Multisensory
• State is Everything
• Creation not Consumption
• Keep It Real

It is aimed at anyone who has a role in delivering information, education and training either to the wider health improvement workforce, partner agencies, or patient and client groups. Participants have included Peer Supporters, Third Sector, Health and Social Care, and NHS clinical and non-clinical staff. The training evaluates very well and participants are positive about their CIL experience.

“We’re very guilty of relying on PowerPoint and some flipcharts. This course got us thinking creatively and outside the box. Lots of ideas to take back, thank you.”

“I have some excellent ideas for making courses more interactive and meeting different learning styles and preparing the learning environment.”

Dave Carson and Kerry Murray

Understanding Health Inequalities

A key role for the Health Promotion Service is to deliver training aimed at promoting people’s knowledge and understanding of health inequalities. This introductory course provides the opportunity to increase awareness of health inequalities and what causes them, explores the impact of inequalities and looks at the evidence base around what works to address health inequalities. There is also time for participants to consider and discuss how to apply the learning in their own role.

Bespoke courses and workshops on health inequalities are also provided to teams or organisations. This enables tailoring the content and discussions to particular areas of work, contexts or population groups, for example, Voluntary Sector Organisations, NHS teams, Health and Social Care staff and Senior Management.

“Great to hear about tools to use to target health inequalities.”

“Great interactive inputs.”

Elizabeth Oldcorn

Strengthening and enabling communities
Young Children’s Digital Play

An online course.

The Children & Technology group at Moray House School of Education has been conducting research into the use of digital media by children and their families for over a decade.

Key Findings

More than half of 3 and 4 year-old children use a tablet device such as an iPad, typically playing with it for nearly 1.5 hours a day, in addition to play on mobile phones and other devices. Parents and health workers have key roles in helping young children develop through play. Parents are hungry for guidance on family use of digital media but they don’t know where to find it; training for professionals who work with families has not kept pace with changes in a digital world so they may find it difficult to help.

A project designed to build on the work and to extend its reach through the involvement of partners – NHS Lothian Health Promotion Service, CEC Children and Families Department and Playbase – was funded by the Economic and Social Research Council (ESRC).

In November, the work began to design, develop and evaluate an eight-week online course on digital play. The eight-week course goes online in July 2017 and can be accessed here.

Lesley Reid

Supporting healthy choices and reducing harm
The Hidden Homeless

You do know them. They are your patients, clients and contacts. They may have a roof but not a home.

How do we break the cycle of poor health and health inequalities?

Following the release of the *Restoring the Public Health Response to Homelessness in Scotland Report*, the need to respond was identified in Midlothian. We worked with the Midlothian Health and Social Care Partnership to lead a steering group and host a professional forum in June 2016. Sixty five people attended from across the partnership, with representation from NHS Lothian, Midlothian Council and the Third Sector. Highlights of the event included context setting by the Director of the Health and Social Care Partnership, an individual sharing their lived experience of homelessness, and a presentation by Dr Neil Hamlet, author of the above report.

Conversations at the forum helped the Health & Homelessness Steering Group develop a Midlothian action plan aiming to improve integrated work involving health and homelessness services to both prevent and ensure provision meets the needs of homeless people and families in Midlothian.

As a result, numerous projects are underway. We are collaborating with Public Health and national partners to link health and homelessness data; a small grant has been received to pilot innovative ways of identifying and referring hospital patients with housing concerns for advice and support. We are leading a consultation with local organisations and individuals with experience of homelessness to better understand their health needs and identify early intervention opportunities. Recommendations from this will be used to inform future service delivery and content of a bite-size workshop for Midlothian staff on increasing understanding and responding appropriately to those at risk or experiencing homelessness.

Tracy McLeod and Chris Stothart

Strengthening and enabling communities
The Healthy Start Scheme

Vitamins: Who needs them?

The Healthy Start Scheme supports eligible families to access healthy food and vitamins. Families affected by imprisonment are a potential population who may be missing out on receiving this support. In partnership with the NHS Lothian Infant Feeding Team in Edinburgh City and HMP Edinburgh, we engaged in a process to explore knowledge of and access to the scheme with families attending the HMP Edinburgh Visitor Centre.

We spoke to 10 families to gauge: knowledge and uptake of the scheme, barriers to uptake, and how to support such families to access the scheme. Two families received Healthy Start vouchers and one was also receiving Healthy Start vitamins.

Of the eight families who were not engaged with the scheme:

- five had been told they were not eligible
- two had received vouchers during pregnancy but had not continued after birth
- one had never heard of the scheme
- two families had purchased vitamins and six did not give their children any vitamins. Four of the families were no longer regularly engaged with a Health Visitor and so had limited access to the scheme or information about the importance of vitamins.

Time pressures meant “going back and forth” to the Health Visitor or Pharmacy was difficult or unlikely. We therefore asked their opinions about receiving vitamins via the HMP Edinburgh Visitor Centre staff. All families felt this would be appropriate as they regularly attended the Centre. These findings have been shared with relevant NHS Lothian teams and we are now testing the distribution of vitamins via the HMP Edinburgh Visitor Centre staff.

Sabina McDonald

Giving children the best start in life
Ageing Well

Demonstrating the 5 ways to wellbeing.

We fund four Ageing Well projects across the Lothians to enable older people to be active, to improve personal health outcomes and retain independence. A report from the New Economics Foundation (2008) suggests that building the five actions below into our day to day lives is important for wellbeing. A recent evaluation of West Lothian’s Ageing Well work showed that each project evidenced at least four out of five of the wellbeing areas below:

1 **Connect**
   Evaluations of Ageing Well have consistently shown that older people value the social connections they make as much as the benefits of being physically active.
   • 100% of participants in the singing for health group reported enjoying the social contact.
   • 55% of participants in the Knit & Knatter group reported an improved social life.

2 **Be Active**
   Ageing Well across Lothian provides physical activity opportunities for older people through gentle exercise; postural stability; fit steps; ballroom dancing; line dancing and an environmental group, to name a few.
   • 68% of Ageing Well participants reported ‘to get fitter’ as one reason for attending.

3 **Keep Learning**
   Ageing Well delivered on more than just physical activity.
   • 55% of Ageing Well participants from the Knit & Knatter group reported they had learnt something new.
   • 76% reported they had learnt something new from the environmental group.

4 **Give**
   Ageing Well West Lothian has 18 active volunteers.

5 **Take Notice**
   This one is about mindfulness, taking notice and being aware of the world around you.

Gillian Amos

Cooking for One on a Budget with Larder Cook School

Supporting healthy choices and reducing harm
Enabling people to have a “good conversation” is central to the House of Care Framework. This seeks to establish what is important to each individual and develops a plan to enable people with long term health conditions and those with challenging lifestyles to live a better quality of life.

The Lothian House of Care collaboration emerged from the patient pathway work undertaken as part of NHS Lothian’s strategic planning process, and the lead partners are NHS Lothian and Thistle Foundation. The Midlothian Senior Health Promotion Specialist has provided both consultancy and project management and is now on secondment to the collaboration as Lothian House of Care Coordinator.

The work has two main work streams. Wellbeing Practitioners based within GP practices who take referrals, support people through good conversations to identify what matters to them, what outcomes they wish to achieve and enable them to access local resources.

The second work stream is funded by the British Heart Foundation and works with Primary Care to change the way they support people with long term conditions. This involves information sharing and joint decision making with goal setting and action planning.

New work streams include community pharmacists looking at embedding this approach; exploring ‘More than medicine’; and diabetes management in Secondary Care.

Alliance Scotland has published a learning report that shows how House of Care supports person-centred care. You can read the report here.

Tracy McLeod

Strengthening and enabling communities

We will also be launching a new cohort for diabetes and multimorbidity in Primary Care during 2017.
Smoke-Free Schools

Scotland has a long-term target to become smoke-free by 2034. Secondary schools are in an excellent position to make an important contribution towards achieving this aim by further reducing the uptake of smoking by young people.

For the past two years our tobacco prevention programme has been working in partnership with ASH Scotland to involve 12 secondary schools across Lothian in a pilot aiming to strengthen delivery of tobacco education and improve implementation of the school smoke-free policy.

The pilot fits with GIRFEC’s emphasis on creating a protective [school] environment, and NICE recommendations to develop a whole-school smoke-free policy.

The [audit] checklist was one of the most useful tools at the very beginning.

Each school initially reviewed their current tobacco work using an audit tool which was adapted from similar research carried out in the US.

With support of a development officer from ASH Scotland, lead teachers then undertook a consultation process with staff, pupils and parents to assess current practice. The feedback was used to produce a smoke-free action plan which the school began to implement in August 2016.

“[It’s been good to go through the process though, rather than just getting a policy from say [another school], for example, and saying well we’ll just use that and put our name on it.”

An interim evaluation of the pilot demonstrated positive outcomes including a more comprehensive coverage of tobacco prevention across both the curriculum and all year groups, and strengthened enforcement of school smoke-free policies.

Colin Lumsdaine

Deans Community High School Poster

Giving children the best start in life
Health Promotion in Pharmacy

Every healthcare contact is a health improvement opportunity.

Leith Walk Ward Pharmacy Initiative

We are responding to the challenges of unsustainable patient flow through GP Surgeries, by working within the Leith Walk Ward Pharmacy initiative which works with Community Pharmacists, local Agencies and residents. This involves increasing awareness of the services offered by Community Pharmacy and encouraging residents to make Community Pharmacy part of how they maintain and recover their health, or live with an illness.

Alongside this the work involves developing branding which captures the helpful and joined up nature of local services, supporting pharmacy staff to signpost people to appropriate support and services, local services having pop-up stalls within the pharmacies and working out how citizens can make their mobile phones into helpful supporting devices while they are waiting.

Lesley Reid

Developing training for Health Promoting Practice

In line with the Scottish Government 2020 Vision for Health and Social Care, Pharmacists will be joining the Primary Care team to provide consultation services within GP Surgeries.

As part of the Health Promoting Health Service, we are working with NHS Lothian Primary Care Pharmacists to develop training to support them in embedding health promotion in their daily patient care. A series of focus groups have been run to identify core training elements required to support staff to feel confident embedding health promotion into their work.

The next phase of the pilot involves developing a training framework which will be tested in Primary Care Pharmacies before being rolled out in other staff groups and eventually embedded into core NHS provided training offered to all staff.

Megan Watson

LOOP’s pop-up stand in Community Pharmacy

“Focus groups increased feelings of support to work in a Health Promoting manner by 53%.”

Strengthening and enabling communities
Throughout 2016/17 we worked collaboratively with partners to develop and support several evaluation proposals to assess the effectiveness of ABI delivery on practice and the impact on individuals’ outcomes. These evaluations are designed to specifically measure where preventive measures lessened inequalities. This will add to the evidence base for ABI delivery in wider settings and embed the delivery into core practice in Lothian; maximising the potential to use an integrated approach across services to support individuals who drink to excess.

We have also been busy delivering training and sharing our work nationally. In partnership with the Smoking Service we developed and delivered Joint Alcohol and Smoking Brief Intervention Training. A poster presentation of this work was presented at the National Smoking Conference in November 2016 and we continue to expand delivery of the training. Working in partnership with Higher Education Establishments (Queen Margaret and Napier Universities) we facilitated ABI training for 2nd and 4th year Nursing students. This led to the inclusion of ABI training in the 2017/18 curriculum for Health and Social Care. This work was published in Nurse Education in Practice.

Along with NHS Health Scotland and West Lothian Drug and Alcohol Service (WLDAS), we commenced a study testing the delivery of Alcohol Brief Interventions in Criminal Justice Settings. The work is recognised nationally and our poster presentation was awarded best visual display and best example of partnership working at the National Public Health Conference 2016.

The Alcohol Brief Interventions Programme has, for the fourth year, successfully delivered throughout NHS Lothian and is expected to exceed the Scottish Government’s performance management target.
**Workforce Development**

*Building a highly skilled Public Health workforce.*

**Work with Higher Education Institutions**

Over the past year we have worked with colleagues at Queen Margaret University on the revalidation of two of their Physiotherapy programmes. The aim was to improve the understanding of students of the context in which people live and enable them, as physiotherapists, to promote the health and wellbeing of populations and communities.

We have also provided teaching on Glasgow Caledonian University’s level 3 BSc (Hons) Diagnostic Imaging programme. This aimed to give the students an understanding about Health Promotion, and provide some context for the idea that “every healthcare contact is a health improvement opportunity.” We will be working to develop these links further over the coming year.

**UKPHR Scottish Boards**

The UKPHR is a voluntary registration body for public health professionals in the UK. The need to ensure a high quality public health service through the provision of a competent workforce has long been recognised. The register started in 2003 with a focus on the specialist workforce; registration for practitioners began in 2011.

NHS Lothian joined the Scottish Boards scheme in 2016 and three Senior Health Promotion Specialists are working towards registration with the current cohort; plans for the next cohort are currently underway.

Further information about practitioner registration in Lothian is available from the local coordinator Helen Smart.

Helen Smart

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**Strengthening and enabling communities**
Celebrating Success

Over the past year we have been successful in showcasing the work of the Service.

Faculty of Public Health Conference in Dunblane October 2016

Posters
Improving Management of Long Term Health Conditions of Adults with Learning Disabilities in Lothian
Mandy Allison

Alcohol Brief Interventions in Police Custody
Eleanor McWhirter
This poster was recognised as ‘best’ poster at the conference.

Released, but what now? Supporting people to look after their health and wellbeing after prison – the ‘Health and Wellbeing Contacts in Lothian’ Card
Sabina McDonald

Bitesize Literacy and Numeracy Project
Kathryn Sinclair

Presentations
Using Social Media to reach a larger target population: application of advanced quality improvement methods
Melissa Clements and Sarah Archibald

Room for Improvement?
General Practice Surgery waiting rooms, the waiting experience and good practices
Lesley Reid and Gary Clapton

Similarities and differences between health behaviour and sustainability behaviour change: a systematic literature review
Elizabeth Oldcorn

Supporting Transgender Employees
Helen Smart

Presentation
Mood, Mobility and Place Conference 2016
Ageing Well – Adding Years to Life and Adding Life to Years
Liz Simpson and Emma Dempsey

Poster
Scottish Smoking Cessation Conference 2016
Alcohol and Smoking Cessation Brief Interventions Training for Dental Staff
Eleanor McWhirter, Emma O’Keefe and Alexis Rumbles, NHS Lothian

Publications
Melissa Clements and Sarah Archibald contributed to a paper with Graham Mackenzie entitled, Increasing Healthy Start food and vitamin voucher uptake for low income pregnant women (Early Years Collaborative Leith Pioneer Site) in the 2016 BMJ Quality Improvement report.

Lesley Reid authored a paper with Gary Clapton titled, Neglected spaces: UK general practice surgery waiting rooms in the February 2017 BJGP Open.
Health Promotion Resource Centre

Supporting easy access to public health resources.

Health Promotion Access Catalogue

HPAC, the online ordering system launched in October 2015, continued to attract new users from a wide range of organisations. There were 426 new registrations from April 2016 to March 2017 and 310,109 leaflets and 2,249 posters were ordered by users during this period.

The Resource Centre moved to a new mobile friendly version of HPAC enabling users to order resources on their mobile phones or tablets. Lending items such as models, teaching kits, pull-up exhibitions and DVDs can also be ordered in this way.

You can register online for HPAC at www.nhslothianhpac.scot.nhs.uk

The Resource Centre continued to support the Health Promotion Service Capacity Building Programme by providing educational resources and training equipment for specific courses and by being responsible for the administration of all courses.

A refurbishment of the Resource Centre was carried out in the summer months. This has created more space for visitors and a more welcoming environment for browsing and study.

Phil Horne

Example of resources available
HPS Annual Report 2016/17

NHS Lothian Health Promotion Service

2016/17 in figures

1,381 people attended HPS delivered training

4 Health Inequalities Seminars delivered to 141 participants

56 national, Lothian or local policies, strategies and action plans influenced

102 different services used our training programme as part of their CPD

90% of participants reported an immediate increase in knowledge that would benefit their work after attending HPS training

11,991 visits to the Resource Centre

2,022 visitors to the Resource Centre

90% of attendees at Health Inequalities Seminars agreed or strongly agreed that the seminars would influence their practice

9 community engagement activities directly supported

1,695 people completed ABI e-learning modules

21,692 ABIs delivered by Primary Care, A&E, Maternity and other services

56% of projects supported have a core volunteer component

88% of projects supported work to increase confidence, knowledge and/or skills of their target population

Healthy Working Lives supported 81 employers in delivering policies

81% of projects we support have a core volunteer component

26 new information resources

Notes: Health Promotion Service (HPS), Continuing Professional Development (CPD), Alcohol Brief Intervention (ABI), Accident & Emergency (A&E).
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