

NHS LANARKSHIRE**NORTH COMMUNITY HEALTH PARTNERSHIP****COATBRIDGE LOCALITY****Date of Report: 9th April 2013****From: David Shields, Service Manager NHSL – Coatbridge Locality****Authors: Paul Campbell & Janice Scouller****Subject: Locality Update Report to the Local Area Partnership****Health Improvement****UNICEF Breastfeeding Programme**

Target: 23.5% of babies exclusively breastfed at 6-8 week assessment.
In Coatbridge Locality most recent figure is 16.2%
In Lanarkshire most recent figure is 16%

Community Midwives, Public Health Nursing (PHN) and Health Improvement Teams are working to maintain Stage 3 of the UNICEF Baby Friendly Initiative. The focus of this work over the past few weeks has been to carry out a self assessment using a ratified survey tool developed by UNICEF. The nursing staff have been training in the use of the tool and used it to interview a cohort of mothers who are currently breast feeding. The staff themselves have to take part in a peer review session with the team leader to make sure their knowledge and skills are kept up to date to support and inform breast feeding women in Coatbridge.

27-30 month Child Health Review

The new universal 27-30 month child health review is to be implemented in line with Scottish Government policy on the Child Health Programme as set out in 2005 in Health for All Children 4: Guidance on Implementation in Scotland and updated in A New Look at Hall 4 – the Early Years – Good Health for Every Child, 2011. The 2011 policy update recommended that a universal review for children should be added to the current programme.

At present, only children in the additional and intensive groups are routinely offered a face to face 24 month review and assessment. The 24 month developmental assessments for this group will be phased out in April 2013 after the implementation of the new 27-30 month assessment, as all children will receive a developmental assessment as part of this addition to the programme. It is essential that none of the children who would have had a 24 month review are missed in the transition between the two reviews. Therefore, 24 month reviews will not be phased out before the implementation of the 27-30 month reviews.

The 27-30 month child health review has two main priorities, namely promotion of strong early child development and promotion of child healthy weight. The review consists of a child development assessment, height and weight check, provision of health improvement information and assessment of any other issues as required.

The Scottish Government's Early Years Collaborative programme sets the goal of ensuring that 85% of all children within each Community Planning Partnership have reached all of the expected developmental milestones at the time of the child's 27-30 month child health review by the end of 2016.

Locally, work is underway to prepare for the introduction of the review, including identifying suitable accommodation, training staff, identifying case numbers, purchasing equipment, developing a booking system and deploying additional staff resource in time for an April start.

No Smoking Day 2013

Figures from various sources show that two thirds of smokers want to quit at any one time. The theme for No Smoking Day on 13th March 2013 was “Swap Fags for Swag”. One of the biggest incentives for smokers to quit comes from considering the real amount of money they spend on cigarettes and what they could afford if they were to give up for good (Based on a 20-a-day smoker paying £7.00 per packet of cigarettes, they would save £2555 over a year). Coatbridge Locality Health Improvement Team worked in partnership with various NLC and NHS Lanarkshire partners to promote No Smoking Day by providing stalls at various sites. This was a chance to promote the local stop smoking groups within the local area and increase the knowledge and confidence of staff and carers to help raise the topic of smoking and signpost the public to the local stop smoking groups. NSD posters and leaflets were also distributed by housing staff to residents within the local tower blocks, as part of the wider Health and wellbeing activity being carried out in support of the Towers Strategy.

Sexual Health - Speakeasy

Lanarkshire is one of the most active areas delivering Speakeasy courses for parents and carers. The course aims to build confidence, knowledge and skills to encourage parents and carers to speak with their children about sexual health and relationships. The content of the course focuses a lot on the importance of positive relationships and increases parents knowledge around issues such as abuse, culture and diversity, the impact of the media on young people in addition to information about puberty, sexually transmitted infections, etc.

To support the continued delivery of Speakeasy within Lanarkshire the North West Unit Health Improvement team recently provided a Speakeasy training for trainers course and this has resulted in a further 8 trainers successfully accredited to deliver the course within Lanarkshire. Two members of staff are from Coatbridge Locality.

In addition to the training opportunity there was also a recent Lanarkshire Celebration event that took place on 24th February 2013. This was a family fun day where all participants were invited to attend with their families and receive a certificate to celebrate their participation in Speakeasy as well as a variety of family friendly activities available on the day. Approximately 50 people attended the celebration event (learners and their families) and 23 learners were awarded with certificates.

GP Practice questions

The question asked at the last LAP was two fold. “Do practices with larger patient populations automatically provided a poorer quality of service to smaller practices?” and, “if the quality is shown to have been poorer what can the Health Board do about it?”

Firstly, I could find no evidence to support the theory that a larger practice population automatically provides a poorer service.

Secondly, and in broad terms Health Boards have a general ability to require practices to perform to an acceptable level and if there is a view that a practice is not doing so there are various sanctions available to a Board to issue what is known as breach and remedial notices and ultimately to terminate a contract in extreme cases. There are also various financial penalties that may be applied.

NHSL managers and commissioned GP’s from other localities also visit the practice annually for appraisal and evidence gathering purposes. We also use the patient survey results to indicate where things might need a closer look against local and national practice figures.

All practice survey results are available at the following:

<http://www.scotland.gov.uk/Topics/Statistics/Browse/Health/GPPatientExperienceSurvey/GPPatientExperienceSurvey1112>

Conclusions

The LAP members are asked to note the content of this report for information.