



HEALTH IMPROVEMENT ACTION GROUP

2009/10 Full Year Progress Report to Single Outcome Agreement Implementation Group

17 June 2010

Outcomes and Indicators

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Delivery Plan Actions

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Summary Table

<i>No of Indicators</i>	<i>Exceeded or Met Target</i>	<i>Below Target</i>
<i>20*</i>	<i>11 (55%)</i>	<i>6 (30%)</i>

**3 Indicators still awaiting data*

<i>No of Actions</i>	<i>Completed</i>	<i>On Schedule</i>	<i>Behind Schedule</i>
<i>40</i>	<i>13 (32.5%)</i>	<i>26 (65%)</i>	<i>1(2.5%)</i>

SINGLE OUTCOME AGREEMENT 2009/12
HEALTH IMPROVEMENT ACTION GROUP – OUTCOME AND INDICATORS FULL YEAR PROGRESS REPORT 2009/10

PRIORITY THEME: Alcohol									
National Outcome	Local Outcome	Local indicators	Responsible Agency/ Worker	Baseline as at:	Target			Progress Mid Year	Progress Full Year
					09/10	10/11	11/12		
NO6: We live longer, healthier lives	Communities in Angus take responsibility for their own health and well-being	<i>Number of people enrolled in the Healthy Happy Communities Project (HHCP Steering Groups)</i>	Project Lead HHCP	08/09 – 22 members enrolled (Brechin/ Kirriemuir, Alcohol project)	20 members (Alcohol Project) 12 members (Arbroath, Nutrition project)	Increase by 4 members/year (Arbroath, Nutrition)	Increase by 4 members/year (Arbroath, Nutrition)	Alcohol project Brechin targeted whole community through poster campaign. (1)	12 members enrolled for Nutrition HHCP March 2010
<p>SUMMARY OF PROGRESS: Alcohol (1): HHCP has reduced its focus on alcohol and is now focusing on nutrition. Project lead for nutrition project commenced in post November 2009. For HHCP alcohol project groups entering exit strategy stage - Kirriemuir service being supported by The Volunteer Centre Arbroath, supported by HHCP and Angus Council; and Brechin team have final push of their poster campaign, supported by HHCP. There will be continuing involvement for 2 team members through Nutrition project.</p> <p>AREAS FOR CONSIDERATION AND ACTION: (1): HHCP project lead for nutrition is only funded for two years.</p>									



SINGLE OUTCOME AGREEMENT 2009/12
HEALTH IMPROVEMENT ACTION GROUP – OUTCOME AND INDICATORS FULL YEAR PROGRESS REPORT 2009/10

PRIORITY THEME: Nutrition and Physical Activity									
SOA National Outcome	Local Outcomes	Local indicators	Responsible Agency/ Worker	Baseline as at:	Target			Mid Year Progress & Status as at Dec 09	Progress & Status as at March '10
					09/10	10/11	11/12		
NO6: We live longer, healthier lives	Children in Angus will get the best possible start in life.	<i>SOA - Proportion of children in Primary 1 with their Body Mass Index outwith a healthy range (incl. overweight, obese & severely obese) (Annual/ISD)</i>	Angus CHP	2007/08 Reviews = 1083 14.7%	Maintain at 2007/08 level	Maintain at 2007/08 level	Maintain at 2007/08 level	2008/09 9.4% (obese, incl. severely obese)	2008/09 most recent data (2)
		<i>SOA - Proportion of newborn children exclusively breastfed at 6-8 weeks (Annual/ISD)</i>	Angus CHP	2006/07 26.8% 1,090 reviews	Maintain	Angus Target Increase to 30%	National Target Increase to 33.6%	2007/08 26.1% 1,197 reviews	08/09 26.0% 1,160 reviews (3)



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PRIORITY THEME: Nutrition and Physical Activity									
SOA National Outcome	Local Outcomes	Local indicators	Responsible Agency/ Worker	Baseline as at:	Target			Mid Year Progress & Status as at Dec 09	Progress & Status as at March '10
					09/10	10/11	11/12		
		<i>Number of volunteers trained to deliver nutritional training to individuals and communities (Register of staff trained)</i>	Project Lead HHCP	Being collated	No baseline set	2 volunteers (Brechin, Nutrition)	4 volunteers (Brechin, Nutrition)	Project lead commenced in post in Nov 2009.	Zero: Training package currently being developed
		<i>Number of children aged 2-12 who access childhood obesity service (POST Register)</i>	Childhood Obesity Service NHS Tayside	Oct 2009 Zero	10 children/families (per year)	30 children/families (per year)	30 children/families (per year)	14 children and their families have been referred to the POST service; as of 13/11/09 10 of these have opted- in to the service.	42 children and their families have been referred, of these 28 have taken up the service and 10 have met the H3 target of attending 75% of the programme



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PRIORITY THEME: Nutrition and Physical Activity

SOA National Outcome	Local Outcomes	Local indicators	Responsible Agency/ Worker	Baseline as at:	Target			Mid Year Progress & Status as at Dec 09	Progress & Status as at March '10
					09/10	10/11	11/12		
	People in Angus live longer, healthier lives through the use of physical activity and healthy weight management	<i>Number of people participating in Steps Tay Health (Health Walk Register)</i>	Angus CHP Walking Co-ordinator	Aug 2009: 47 people enrolled	A further 5 enrolled by March 2010	A further 10 enrolled by Nov 2010 when funding ends.	N/A	Nov 2009 85 people enrolled	June 2010 127 people enrolled
		<i>Number of people completing exercise on referral (Routes to Leisure System)</i>	Angus Council Leisure Services	07/08 38	120 (per annum)	130 (per annum)	140 (per annum)	08/09 140	09/10 126



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		<i>Proportion of adult population with their body mass index outwith a healthy range participating in weight management programmes (Health Weight Database)</i>	Healthy Weight Co-ordinator	09/10: <u>Level 2:</u> No. courses running = 5 No. attending = 54 <u>Level 3:</u> New starts 259 % attending at 6mths = 26% % losing ≥ 5% weight at 6 mths = 41% <u>Level 4:</u> 180 new	Baseline data was established during 09/10 therefore no target was set for this period. (4)	<u>Level 2:</u> No. courses running = 20 No. attending = 240 <u>Level 3:</u> New starts 350 No. eligible for 6mth review = 158 % attending at 6mths = 30% % losing ≥ 5% weight at 6 mths = 42% <u>Level 4:</u> 90% of referrals will meet Level 4 criteria	<u>Level 2:</u> No. courses running = 25 No. attending = 300 <u>Level 3:</u> New starts 450 No. eligible for 6mth review = 225 % attending at 6mths = 39% % losing ≥ 5% weight at 6mths = 44% <u>Level 4:</u> 95% of referrals will meet Level 4 criteria	Dec 09: <u>Level 3:</u> New starts 70	09/10: <u>Level 2:</u> Baseline established 09/10 5 groups commenced 54 participants <u>Level 3:</u> New starts 356 Level 4: Baseline established 09/10 180 new patients (Angus); 75 new patients referred to specialist obesity service at Ninewells.



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SUMMARY OF PROGRESS: Nutrition and Physical Activity

(4): Level 1 – opportunistic lifestyle advice, numbers not collated.

Level 2 – Winning Weigh – structured group programme lasting 7 weeks with ongoing support focusing on diet, physical activity and behaviour change – the weight management support workers now have 5 groups running throughout Angus (Forfar, Brechin, Arbroath (2) and Montrose).

Level 3 - Counterweight - one-to-one structured intervention lasting one year focusing on diet, physical activity and behaviour change – 8 practices in Angus CHP are now delivering this programme 'in-house' with another 2 yet to commence. The remaining 6 practices are able to refer to the weight management support workers who commenced post in February 2010. Compared to National Scottish data and published Counterweight data, Angus CHP is doing very well. The targets given are based on cumulative figures.

Level 4 – Dietetic service – one-to-one and group interventions focusing on more advanced behaviour change techniques i.e. CBT for more complex obesity cases, e.g. those with co-morbidities. This service continues in the process of refining the Level 4 intervention – this involves developing robust referral criteria, establishing an evidence-based intervention programme and establishing means of data collection. Tayside Nutrition & Dietetics are now to become one service and therefore there may be redesign of services. With other elements of the adult weight management pathway in place, it is envisaged that referrals will be more appropriate and in line with referral criteria.

Databases have now been developed for collecting Winning Weigh data and data for Counterweight patients seen by support workers however, extraction of Counterweight data from general practice systems continues to be manual and time-consuming.

AREAS FOR CONSIDERATION AND ACTION:

(2): The Paediatric Obesity Service Tayside has been developed to deliver, in part, on the HEAT Target in relation to childhood obesity. The service was established in October 2009 for children aged 5-15 with extreme levels of obesity in Angus. A priority for the service is to deliver nutritional training to individuals and communities. This indicator is currently below target but this could be explained in part by the increased number of reviews. POST is looking at undertaking a whole school approach to H3 in order to meet the targets for reducing childhood overweight and obesity. TIMESCALE FOR CHANGE: Healthy Weight, Active Living (2008-2011) sets to 'slow the rate of increase' rather than reduce the numbers of overweight and obese children.

(3): A robust implementation plan is being put into place following a Tayside-wide improvement event held in May 2010 to address this challenging issue. This will include a much needed improvement in data collection – core data collection tools will be implemented and health visitors will, on a monthly basis, record and forward the number of babies being exclusively breastfed at 6 weeks. A breastfeeding support worker has been appointed for fifteen hours per week to support work in the north-east and north-west localities. Breastfeeding support worker and health visitors are delivering packs to S5/6 pupils and literature in waiting rooms have been reviewed to ensure they are up-to-date. TIMESCALE FOR CHANGE: The H7 target must be met by March 2011, this is 35.3%, therefore we would expect to see this reflected in Angus figures by March also.

(4): There is currently no electronic means to collate data for level 4 intervention however it is hoped that this will be available by Dec 2011. Interim arrangements are being developed on a Tayside wide basis.

Other: Publication of recent data on databases such as ISD make data capture and comparison over relatively short lengths of time difficult.



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PRIORITY THEME: Mental Health and Well-being

SOA National Outcome	Local Outcomes	Local indicators	Responsible Agency/ Worker	Baseline as at:	Target			Mid Year Progress & Status as at Dec 09	Progress & Status as at March '10
					09/10	10/11	11/12		
NO6: We live longer, healthier lives	The gap in health inequalities across the population of Angus is reduced	<i>SOA - Number of suicides per 100,000 population (Annual/GROS)</i>	Choose Life Steering Group and Mental Health and Wellbeing Co-ordinator	2003-2007 15.3 per 100,000 population (5 yr average) (n=83 – 5 yr total)	Reduction in 2004-2008 five year average (per 100,000 population)	Reduction in 2005-09 five year average (per 100,000 population)	Angus target: 20% reduction between 2003-2007 and 2009-13 five year averages (per 100,000 population) National Target - Reduce by 20% between 2003-2013	2006-08 16.1 (3 yr average)	2005-2009 14.0 per 100,000 population (5 yr average) (n=77 – 5 yr total) (5)
		<i>Number of staff trained in suicide awareness (Staff Training Register)</i>	Angus CHP	March 2008 24 out of 1065 staff trained (2.3%)	533 out of 1065 staff to be trained by Dec 2010 (50% - National target – HEAT 5)	Not determined – no national target set beyond Dec 2010	Not determined	Dec 2009: 172 staff trained (16.2%)	June 2010: 243 staff trained (23%) (6)

SUMMARY OF PROGRESS: Mental Health and Well-being

(5): The national Choose Life group is evaluating the impact of training sponsored by Choose Life for example SafeTALK, ASIST and STORM. A local needs analysis is being completed to inform the local action plan – the deadline for completion of this is October 2010.

Exceeded Target	Met Target	Below Target
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AREAS FOR CONSIDERATION AND ACTION:

(5): Evaluation for Phase II of national Choose Life action plan was released in March 2010 which suggests the need for a strong, visible lead from the Scottish Government for the remainder of the strategy which will continue until 2013. The Choose Life target of reducing suicides by 20% is to be reviewed and links (local and national) with drugs and alcohol services,

(6): A programme of training for 2010 is being circulated to all managers, and on-site training is offered to staff groups who would prefer this method of delivery. The in-house suicide intervention and prevention programme has been provisionally approved by Health Scotland and this can now be included towards the H5 target. **TIMESCALE FOR CHANGE:** Although not met for 09/10, it is anticipated that the target to have 50% of front-line staff trained by Dec 2010 will be met.

PRIORITY THEME: Sexual Health

SOA National Outcome	Local Outcomes	Local indicators	Responsible Agency/ Worker	Baseline as at:	Target			Mid Year Progress & Status as at Dec 09	Progress & Status as at March '10
					09/10	10/11	11/12		
NO6: We live longer, healthier lives	The Angus Population have a positive and responsible attitude towards sexual health	<i>SOA - Rate per 100,000 of the Angus population diagnosed with Chlamydia (Annual/Angus CHP)</i>	Angus CHP	2007 Angus Females:0.13% (n = 72) Males: 0.14% (n = 74)	Expected to increase	Expected to increase	Reduction by 2020 (National Target)	2007 most recent information available for Angus	Not viable Data not available at Angus level. (7)
		<i>SOA - Teenage pregnancy rate per 1,000 females aged under 16 (FSF) (Annual/ISD)</i>	Angus CHP	2005-2007 6.7/1000 n=41	Maintain	Tayside Target – 6.8/1000 Angus Target - 5.6/1000	National Target to be determined by Scottish Government 2010	2006-2008 figures not yet validated	2006-2008 7.7/1,000 n=47 (8)

Exceeded Target	Met Target	Below Target
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	<i>Number of young people aged 12-15 accessing Sexual Health Youth Service</i>	Angus CHP	07/08 2414 young people accessing	800	1200	1400	08/09 1006	09/10 855 (9)
	<i>Proportion of Angus population aged under 25 registered for C-Card (Condom Initiative Register)</i>	Health Improvement Team	2007 272 new young people registered	Increase by 100 per year	Increase by 100 per year	Increase by 100 per year	2008 218 new young people registered	2009 113 new young people registered (Total: 603)

SUMMARY OF PROGRESS: Sexual Health

(8): Recent local evidence indicates a possible small reduction in teenage pregnancy rates between 2007/08 and 2008/09 – these figures have not been fully validated and are unlikely to be consistent with national data as it is not compiled in the same way, and have therefore cannot be included at this time. Engagement with Speakeasy programme (a course designed for parents and carers to help them talk to their children about sex, relationships and growing up) at authority level has been postponed until autumn 2010. In the interim time schools have been encouraged to engage with Speakeasy on an individual basis. SHARE training has been delivered to all secondary school Pupil Care and Support staff. Courses are also being offered to primary school teachers. Staff tutors have attended training to develop SRE for young people with additional support needs. Angus Council Education Department has additional guidance for SRE based on the Curriculum for Excellence. The C-Card (which provides free condoms and advice to under 25s) has been implemented in Angus; launched at the WEB Project (Forfar), No. 1 for Youth, the Pitstop Youth Café and the Youthbytes Bus. The C-Card micro-site was launched in March 2010 - www.taysideccard.org and the young people's health workers team provide access within one mile of each secondary school from January 2010.

AREAS FOR CONSIDERATION AND ACTION:

(7): Chlamydia is expected to increase due to improved screening.

(8): An improvement plan with driver diagram and measures has been produced by NHS Tayside to impact on teenage pregnancies rates across Tayside. Progress for 09/10 is behind schedule, however it is anticipated that the Tayside target to reduce the teenage pregnancy rate to 6.8/1000 will be met by 2010/11, it is expected that the Angus target of 5.6/1000 will now be met for 2011/12. **TIMESCALE FOR CHANGE:** It is anticipated that the Tayside target of 6.8/1000 will be met for 2010/2011; while the Angus target of 5.6/1000 will be met for 2011/2012.

(9): There is a significant drop in numbers between 07/08 and 08/09 in the number of young people accessing sexual health youth services – this is thought to be due to the Young People's Health Worker team ceasing to exist. During the 09/10 period, 216 of the 855 accessed the service between Jan and March 2010 – the Young People's Health Worker team was re-introduced in Jan 2010.

Exceeded Target	Met Target	Below Target
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PRIORITY THEME: Smoking and Tobacco Control									
SOA National Outcome	Local Outcomes	Local indicators	Responsible Agency/ Worker	Baseline as at:	Target			Mid Year Progress & Status as at Dec 09	Progress & Status as at March '10
					09/10	10/11	11/12		
NO6: We live longer, healthier lives	The health of the Angus population is improved by reducing the impact of tobacco use	SOA - Number of the smoking population who quit through cessation services at 1 month (Annual/NHS Tayside)	Angus CHP	2008/09 n = 296 quit at 4 weeks	Angus Target n=592 (per year)	Angus Target n=592 (per year)	Angus Target n=1,776 (Total for three years 2009/10 to 2011/12)	April-Sept 09 (167 in touch with services) 77 quit at 4 weeks	09/10 129 quit at 4 weeks (10)
		<i>Number of women attending the 'Give it up for baby' smoking in pregnancy incentive project.</i>	Smoking Cessation Co-ordinator	2007/08: 0	50	60	70	2008/09: 49	2009/10: 49 (11)

SUMMARY OF PROGRESS: Smoking and Tobacco Control
 (10): Measures have been taken throughout the year to try to improve recruitment to smoking cessation services. These include providing more community based groups, offering more 1-2-1 services, home visits and telephone support. Workplace based groups have been actively pursued and over the last 9 months these have taken place at an increased number of settings in both the public and private sector. Despite these efforts recruitment to the service has remained flat. The Young Persons' Smoking Cessation and Prevention Worker is now full-time across Angus, working with young people on a one-to-one and group basis in school and community settings. The post links with the School's Health Promotion Team (NHS Tayside Public Health) and Staff Tutors (Angus Council Education) and there is an Action Plan describing a range of initiatives from now to 2011 in both prevention and cessation.

AREAS FOR CONSIDERATION AND ACTION:
 (10): More evening groups being offered and meetings with primary care staff to promote the service and encourage referral have been arranged over the coming months. Staff members from the smoking cessation services across Tayside are meeting with representatives of ASH Scotland to look at ways of improving recruitment and efforts are now underway to reconvene the Angus Tobacco Alliance. Help with making this a productive exercise is currently being sought from ASH Scotland. Community Pharmacies and GPs will now not be paid for referrals made to the smoking cessation service unless the minimum data set is completed, it is likely that this will see a significant increase in the numbers quitting at 4 weeks. The Smoking Cessation Service was disrupted by Staff redeployment during H1N1 Containment phase during the summer of 2009. For a time this limited recruitment to the various programmes. **TIMESCALE FOR CHANGE:** 75% of the H6 target (that 8% of smoking population will have quit through smoking cessation services at 4 weeks) will be met by March 2011, this should be reflected in Angus figures. In Angus, we are required to have 592 quit per year, therefore by March 2011 we should see 444 quits at 4 weeks.

(11): Plans are underway to offer the new national training "Raising the Issue of Smoking in Pregnancy" to all midwifery staff in Angus. It is anticipated that the 09/10 target will be met by October 2010. **TIMESCALE FOR CHANGE:** It is anticipated that the 2009/10 target will be met within two months.



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PRIORITY THEME: Oral and Dental Health									
SOA National Outcome	Local Outcomes	Local indicators	Responsible Agency/ Worker	Baseline as at:	Target			Mid Year Progress & Status as at Dec 09	Progress & Status as at March '10
					09/10	10/11	11/12		
NO6: We live longer, healthier lives	The gap in health inequalities across the childhood population of Angus is reduced	<i>SOA - Number and % of Primary 1 children with no signs of dental disease (Annual/National Dental Inspection Programme of Scotland)</i>	Angus CHP and Angus Nutrition Network	2008 62.9% of 717 primary 1 children	60%	65%	National Target 60%	2008 most recent data	2008 most recent data (12)
		<i>SOA - Number and % of 3-5 year old children with dental registrations (Annual/ISD)</i>	Angus CHP and Angus Nutrition Network	June 2008 n = 2465, 71.1%	70% of all 3 – 5 year old children to be registered with an NHS dentist	75%	80%		March 2009 n = 2550, 73%

SUMMARY OF PROGRESS: Oral and Dental Health
 (12): Childsmile continues to progress and deliver tooth-brushing and fluoride programmes in schools. Toothbrushing: all council schools and nurseries are participating to varying degrees. 1358 3-4 year olds currently brushing in the nurseries. Fluoride varnishing: 328 out of 547 P1-3; and 210 out of 280 nursery age children. Parents must provide consent for this and there is a consent return rate of 50-60% in primary and 75-80% in nursery.

AREAS FOR CONSIDERATION AND ACTION:
 (12): Surveys for P1 & P7 are carried out on alternate years, therefore primary one children will be surveyed again this year.

(13): ISD who collate the dental registration data has two 'warnings' over figures that are sub NHS Board, i.e. CHP, and how they are used. Current data that relates to registration numbers is collected based on the address of the dental practice where the patient received treatment, NOT ON THE ADDRESS OF THE PATIENT. This is because the current ISD system is based on payment to dentists for work undertaken on patients and not on where the patient lives.



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PRIORITY THEME: Alcohol						
National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
NO6: We live longer, healthier lives	Communities in Angus take responsibility for their own health and well-being	Pilot The Healthy Happy Communities Project in Kirriemuir and Brechin to support communities to address alcohol related issues within their communities.	Angus Alcohol & Drugs Partnership (Angus ADP)	31 March 2009	HHCP <i>nutrition</i> post (see progress) is only funded for 2 years from Cel36 and Fairer Scotland Fund	Completed – pilot ended June 2009. Project lead commenced employment on 16/11/09 to develop HHCP in early years/family nutrition. (1)
		Support the implementation of the NHS Tayside Alcohol Action Plan.	NHS Tayside Public Health Directorate	31 March 2011	The screening process may result in increased numbers of referrals.	(2)

SUMMARY OF PROGRESS: Alcohol

(2): Good progress was achieved in delivering alcohol screening and brief interventions, in year 1 2008/09 but there has been a significant drop in activity in 2009/10. A detailed paper analysing the performance and identifying remedial actions was considered at the Board's Executive Team meeting in December 2009. As a result there has been an increase in training in primary care along with enhanced services, work is underway to enhance the profile across all systems, and monthly updates are being provided by selected GP practices. Further training has been undertaken with staff in Accident and Emergency Departments, Minor Injuries Units and Maternity services. Licensing Forums are working on ways of delivering the new licensing objective to protect and promote public health; and work is being taking forward in relation to prevention and early intervention for alcohol misuse amongst children, young people and families. The Montrose "Link Up" project (previously described as the Montrose demonstration project) commenced in early 2009 as scheduled and will run for 18 months.

AREAS FOR CONSIDERATION AND ACTION:

(1): HHCP has reduced its focus on alcohol and is now focusing on nutrition. Project lead for nutrition project commenced in post November 2009. For HHCP alcohol project groups entering exit strategy stage - Kirriemuir service being delivered by The Volunteer Centre Arbroath, supported by HHCP and Angus Council; and Brechin team have final push of their poster campaign, supported by HHCP. There will be continuing involvement for 2 team members through Nutrition project. HHCP project lead for nutrition is only funded for two years.

(2): The screening process, alongside greater general awareness of alcohol related problems and services, has, as expected, resulted in a very significant rise in the number of referrals to specialist services - TAPS and Tayside Council on Alcohol (TCA): 09/10 quarter 1 n=64, quarter 2 n=110. New staff have been recruited to both these services and are tackling the increased number of referrals: 09/10 quarter 3 n=42, quarter 4 n=35. Additional posts have been established in the Social Work specialist Drug and Alcohol teams.



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PRIORITY THEME: Nutrition and Physical Activity						
National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
NO6: We live longer, healthier lives	Children in Angus will get the best possible start in life <i>Nutrition Life Stages - Early Years</i>	Breastfeeding – Develop services to promote breastfeeding.	Angus Community Health Partnership (Angus CHP)	March 2011	Slippage monies from HIF to support BF in Forfar until March 2010. Cel36 funding supporting BF in Arbroath and Brechin for 2 years from Sept 2009	(3)
		Promote Nutrition in early years settings.	Angus Council Education Department	Funded up to March 2009	Short-term funding	To facilitate implementation of Hungry for Success. The post was extended to March 2010 through HIAG funding but has now come to an end.
	<i>Nutrition Life Stages - School-aged Children</i>	Healthy Weight - Deliver child healthy weight intervention programme by 2010-2011 (H3).	Angus CHP Nutrition and Dietetics Service	2009-2012	May require funding for childcare workers to work with children while adults are participating in programme; and venue costs.	The POST Service (see additional information below) has been established to deliver, in part on H3. POST is looking at undertaking a whole school approach to H3; and the dietetics service is investigating developing additional community-based services for tackling childhood obesity.



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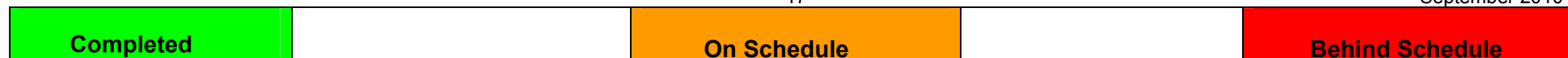
PRIORITY THEME: Nutrition and Physical Activity						
National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
		NHST childhood specialist obesity service will be established.	Angus CHP Nutrition and Dietetics Service	March 2010	H3 funding is short-term until Feb 2012. Capacity for only one clinic to cover the whole of Angus, this clinic is based in Arbroath	POST service established in October 2009 for children aged 5-15 years with extreme levels of obesity in Angus.
		Carry out a mapping exercise of Paediatric Overweight/Obesity in Angus which will include descriptive epidemiology and existing service provision in Angus childhood obesity. (Epidemiology: the study of how different diseases occur in people/populations and why)	Health Improvement Team	July 2009		Mapping exercise completed October 2009 and reported to HIAG. A summary of the report will be published and shared through the Council and NHS websites. The findings re-enforce the outcomes set out in the Health Improvement Plan.
		Conduct a survey looking at the families perspective of the paediatric overweight/obesity in Angus.	Health Improvement Team	Feb 2010	None reported	Focus groups had been held by POST and Health Scotland in Angus to explore with parents how to help them access a childhood weight management service. A social marketing project is currently being developed.



SINGLE OUTCOME AGREEMENT 2009/12
HEALTH IMPROVEMENT ACTION GROUP – DELIVERY PLAN FULL YEAR PROGRESS REPORT 2009/10

PRIORITY THEME: Nutrition and Physical Activity

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
		Monitor heights and weights of Primary 1 and Primary 7 children.	Angus CHP	June 2009	The P7 heights/weights are being taken by Health Care Assistants – this is an additional duty and reduces the amount of time they can spend on other health promotion activities. However it does provide us with an opportunity to measure our impact on childhood obesity.	Heights/weights are routinely monitored in P1 as part of Child Health Screening Programme. Heights/weights currently being monitored in P7 to gather baseline information on obesity levels. Monies have been used to purchase new scales for school health staff; and to ensure they were working to best practice standards, each school nurse had an update on completing heights and weights.



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PRIORITY THEME: Nutrition and Physical Activity

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
	<p>People in Angus live longer, healthier lives through the use of physical activity and healthy weight management</p> <p><i>Nutrition Life Stages - Communities</i></p>	<p>Local communities will be supported to address weight management issues within their local areas through focus groups and working with the Patient & Public Partnership Group (PPG) and enhance the range of options for support available.</p> <p>Communities in Angus will feel confident to take ownership and to contribute to addressing weight management issues.</p>	<p>Angus CHP Nutrition and Dietetics Service</p>	<p>February 2010</p> <p>Amended timescale: Feb 2011</p>	<p>May require funding for childcare workers to work with children while adults are participating in programme; and venue costs.</p>	<p>Focus group with parents and children carried out in March 2010. Exploration of what service experience they had, the impact of overweight/obesity on daily life and what would be the 'gold standard' service. A Social marketing project is currently being developed.</p> <p>'Emerge' weight management group run for 6 months (now being extended to 1 year). Very well received. Evaluation currently being written.</p> <p>Dial a Dietitian to become a sustainable part of weight management services. Date for commencement to be agreed.</p>



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PRIORITY THEME: Nutrition and Physical Activity						
National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
		Pilot 'Winning Weigh' group with funding from 'Fairer Scotland', targeting men in Arbroath.	Angus CHP Nutrition and Dietetics Service	October 2009	No long-term funding: Fairer Scotland Funding, PMS and Keep Well monies only two years.	No pilot was carried out targeting men - the programme is well established and a group targeting men in Arbroath was delivered successfully in 2005. Winning Weigh is now being rolled out as part of adult weight management pathway, if during the roll-out is felt that men need to be targeted this will be addressed.
		Pilot work with commercial slimming organisation (Scottish Slimmers) through Fairer Scotland targeting areas of deprivation in Arbroath.	Angus Council Community Planning	October 2009	No long-term funding: Fairer Scotland Funding only two years.	Following evaluation of the pilot, it was not felt that this was a viable treatment option for funding at present.



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PRIORITY THEME: Nutrition and Physical Activity

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
	<i>Nutrition Life Stages - Adults and Work Places</i>	<p>Implementation of adult weight management pathway (work plans under development).</p> <p>Identify and train relevant/appropriate personnel who could potentially deliver Level 1 & Level 2 (Winning Weigh) interventions of the Tayside Adult Weight Management pathway eg</p> <ul style="list-style-type: none"> • Smoking Cessation Team • Community Pharmacists • Exercise Referral Staff • Voluntary agencies. 	Angus CHP Nutrition and Dietetics Service	September 2009	No long-term funding – two years only.	<p>The pathway is almost implemented in Angus. Level 1 still requires work.</p> <p style="text-align: center;">(4)</p> <p style="text-align: center;">Timescale for implementation of level 1 to be amended to April 2011.</p>
	<i>Nutrition Life Stages - Older People</i>	Link with phase three of the Nutrition Standards Project addressing malnutrition in the community.	Angus CHP Nutrition and Dietetics Service	April 2009 onwards	Staffing issues	<p>This has been done within phase three of the Nutrition Standards Project plan however resource issues mean that this is at risk of not being developed at all.</p> <p>There has been significant progress with care homes agreeing to completion of a nutrition referral assessment form prior to patients being seen. Further links are being made.</p>



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PRIORITY THEME: Nutrition and Physical Activity						
National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
	<i>Physical Activity</i>	Develop an Angus Facilities Strategy.	Neighbourhood Services (Leisure Services)	2012	None reported	At stage 1 of the process - currently looking at pulling a number of strategies together including 'facilities', putting together a 'bidding' document and then seek external funding for a consultant to undertake the exercise (or part thereof). The facility strategy is likely to cover all facilities that encourage physical activity including community-based facilities.
		Provide a wide range of quality, safe and secure indoor/outdoor facilities, paths and cycleways.	Neighbourhood Services (Leisure Services)	Annual development programme	None Reported	(5)
		Offer a varied programme of physical activity for people of all ages and abilities within communities and schools.	Neighbourhood Services (Leisure Services)/Education Department	2012	None reported	(6)



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PRIORITY THEME: Nutrition and Physical Activity

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
		Create and develop a Play Strategy for Angus.	Education Department	2009 Amended timescale: March 2011	None reported	Development event held on 18 March 2010 work is being taken forward by the Early Years and Childcare Joint Action Group. First meeting of Play Steering Group was held in May 2010.
		Develop existing programmes in leisure facilities, schools and outdoor areas through partnership working.	Neighbourhood Services (Leisure Services)/Education Department	2012	None reported	(7)
		Continue to develop effective communication pathways with partners.	Health Improvement Team	2012	None reported	There is representation at the HIAG for the leads of health improvement priorities on a rotational basis. Additionally there are health improvement team representatives on the health improvement related community planning action groups. The future of an Angus Council Corporate Health Improvement Network is to be decided; the health improvement team are producing a quarterly newsletter.



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PRIORITY THEME: Nutrition and Physical Activity						
National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
		Actively promote physical activity opportunities and benefits in Angus.	Health Improvement Team	2012	None reported	(8)
		Offer a range of gentler and mainly seated group exercise opportunities for older people, and others with restricted mobility/other impairments, in community settings across Angus.	Health Improvement Team/Angus Gold	2009-2011	None reported	(9)
		Continue to expand the successful Angus Exercise Referral programme.	Health Improvement Team	2012	No core funding to expand – funding received from HIAG.	Funding for the programme has been moved from Angus CHP to Angus Council Leisure Services and a subsidised charging system has been introduced from 1 April 2010 for those being referred. During 2009/10 126 people completed the six week programme.
		Continue to expand the successful Angus Walking Project with emphasis on more walks in more locations.	Health Improvement Team	2010	Funding ends November 2010. Not enough volunteers currently trained to create more groups.	(10)

SUMMARY OF PROGRESS: Nutrition and Physical Activity

(3) A robust implementation plan is being put into place following a Tayside-wide improvement event held in May 2010 to address this challenging issue. This will include a much needed improvement in data collection – core data collection tools will be implemented and health visitors will, on a monthly basis, record and forward the number of babies being exclusively breastfed at 6 weeks. A breastfeeding support worker has been appointed for fifteen hours per week to support work in the north-east and north-west localities. Breastfeeding support worker and health visitors are delivering packs to S5/6 pupils and literature in waiting rooms have been reviewed to ensure they are up-to-date.



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PRIORITY THEME: Nutrition and Physical Activity

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
		<p>(5): Major improvement works have been undertaken in games halls located at three major facilities in Arbroath, Kirriemuir, Carnoustie and Forfar and fitness suites at six leisure facilities have been redecorated and new cardiovascular units installed. Kirriemuir Synthetic Pitch and a new play park and crazy golf at Carnoustie Seafront have now opened. Design and planning permission for the new Montrose swimming pool extension to existing leisure centre continues to progress and the Countryside Rangers Base and Glen Doll is now open. Leisure Services have taken over the management of town halls and this will give scope to increasing the range of activities on offer to the public. Development of path networks around 7 burgh towns - 4 burghs completed/ remaining 3 burghs to be completed by 2013; and an extension of Angus Coastal Path - Dundee to Carnoustie and Arbroath to Auchmithie is completed.</p> <p>(6): bACTIVE Membership scheme growth, now up to 6500 members and is maintained through quarterly promotional campaigns. Programme examples: sports specific Angus Development Squads' that allow talented athletes to progress as far as possible within their chosen sports in partnership with our regional and national sports partners. Fit for Girls programme introduced through all 8 secondary schools - aimed at reducing the fall off in participation rates of S1-3 girls, particularly after transition. The Angus Glens Walking Festival and a structured programme of watersports activities and high and low ropes activities attracted members of the public to try these activities. 94% of P6/7s and 82% of S1/2s achieve an hour of physical activity per day; 65% primary schools and 100% S4-S6 classes receive an hour of physical activity per week. Increase in the number/quality of active coaches/volunteers as a programme of education and training was provided – three courses with 42 participants.</p> <p>(7): Existing active partners/partnerships in Angus: - Local (e.g. Sports Development, Sports Facilities, Active Schools, Angus Disability Sport, Sports Clubs, Angus CHP, primary & secondary schools, Montrose FC), - Regional (e.g. SportTayside & Fife, Tayside & Fife Institute of Sport, NHS Tayside) and - National (SGB's, sportscotland, Scottish Disability Sport) - Active Schools and Leisure Services working in partnership with the NHS project P.O.S.T (Paediatric Obesity Service Tayside) on the intervention programme for children with obesity.</p> <p>(8): Examples of this include: Continuous training delivered to Out Of School Care (OOSC) workers (42) to allow for continued physical activity in county wide initiative. Providing the ACCESS scheme which is designed to support coaches and club helpers working to develop and sustain sport at local level and above. 25 clubs worked in partnership with active schools to deliver a variety of physical activity to local school children, during and after school. A Sub Zero club was introduced over the winter period for 10-14 year olds to encourage them to be more physically active throughout the year. A winter biathlon series is held using Monikie Country Park as the venue.</p> <p>(9): The Vitalyz seated exercise programme is on offer in venues including residential care homes, sheltered housing complexes and local leisure centres; it received major recognition following a recent HMIE inspection of Community Learning and Development activity across Angus. The programme is being well received and is gradually being extended to many venues including long-stay hospital wards. 34 individuals have been trained to date. Three Angus Gold volunteers are delivering to 65 participants, other instructors are delivering sessions but the number of participants is unknown. Funding is currently being sought from NESTA (National Endowment for Science, Technology and Arts) to develop this as a sustainable resources.</p> <p>(10): Currently six groups running with 127 walkers and 22 trained volunteer walk leaders; 68% of walkers in the groups do not meet the current physical activity guidelines.</p>				



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PRIORITY THEME: Nutrition and Physical Activity

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
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One group has moved on to a 'next steps' group which means the walkers involved are able to manage longer walks. Of those attending 9% have heart disease, 13% are overweight, 29% have high blood pressure, 13% have diabetes and 28% have anxiety/depression. All medical conditions have been diagnosed by a GP or other health professional. Additionally, 76% are female and 24% are male.

AREAS FOR CONSIDERATION AND ACTION:

(4): This objective is currently behind target however smoking cessation workers have now been trained and the community pharmacist in Carnoustie is delivering weight management interventions and counterweight is being piloted in pharmacy in Dundee. Exercise Referral staff have been on the Royal Environmental Health Institute of Scotland and work ongoing to have weight management support workers working more closely with this staff group and the use of volunteers in assisting with Winning Weigh groups is being explored. It is anticipated that level 1 will be implemented by April 2011.

(10): Due to short term funding for the Walking Co-ordinator post and requirement for more volunteer leaders, there is uncertainty about creating additional groups. An exit strategy is under creation and discussions are in progress to extend the post by an additional 2 months to fully implement the exit plan. The NHS Tayside Health Equity Strategy aims to improve the quality of life of the population in Angus by reducing health inequity and social isolation. This is to be achieved, in part, through co-production and community capacity building – these are core outcomes of Steps Tay Health and therefore all avenues must be explored to secure funding for the continuation of this project. Funding opportunities were explored to develop the Walking Co-ordinator post into a Physical Activity Co-ordinator post for Angus to include continued co-ordination of Steps Tay Health. Unfortunately attempts to find permanent funding have been unsuccessful.



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PRIORITY THEME: Mental Health and Well-being

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
NO6: We live longer, healthier lives	The gap in health inequalities across the population of Angus is reduced	Angus Walking Project will include people with mental health problems	Health Improvement Team	July 2009	Funding ends November 2010	27% of people attending the walks have anxiety/depression and there is a rise in service users from mental health organisations attending the groups.
		Development and implementation of local suicide prevention action plan.	Angus CHP Mental Health Services	March 2010 Amended timescale: October 2010	None reported	A local needs analysis is being completed to inform the local action plan – the deadline for completion of this is October 2010. Evaluation for Phase II of national Choose Life action plan was released in March 2010 (11); no action plan for Phase 3 has been released.



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	Ensure H5 target is met through the delivery of in-house and national suicide prevention training packages.	Angus CHP Mental Health Services	March 2010 Amended timescale: December 2010 (in line with H5)	None reported	As of June 2010: 243 staff have been trained (23%). The in-house Suicide Intervention and Prevention Programmes (SIPP) have been given provisional approval by Health Scotland. Participants now have to demonstrate they have completed self-directed learning in order for us to be able to add them to the list of trained staff, and therefore count them towards the HEAT target. (12)
	Implement recommendations from 'Towards a Mentally Flourishing Scotland.' Raise awareness among partners of the contribution made by a wide range of activities to wellbeing, and the contribution that improved wellbeing can make to the achievement of a wide range of outcomes.	Health Improvement Team	2009-2012	None reported	A report on the <i>Towards a Mentally Flourishing Angus Event</i> held in September 2009 is being presented to the HIAG in November 2010. The report will discuss findings and recommendations.
	Develop a coherent and sustainable Volunteering Action Plan entitled 'Beyond the Trolley Service' focussing on an evidenced based approach to volunteer development in health.	Volunteer Centre Angus	2009-2012	None reported	(13)



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		Promote dignity and respect for older people through a public awareness-raising campaign and staff training.	Health Improvement Team/Angus Gold	2009-2012	National funding has come to an end. Funding must now be found from other local budgets to continue the project.	Public awareness-raising materials have been produced and distributed at health events and through Angus Gold, and Social Work and Health. Training, aimed at multi-agency staff especially those in care settings, is planned to take place throughout 2010/11.
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SUMMARY OF PROGRESS: Mental Health and Wellbeing

(11): The Phase II evaluation of Choose Life suggested the need for a strong, visible lead from the Scottish Government for the remainder of the strategy which will continue until 2013. The strategy will be re-visited in relation to where it sits now and how it will be sustained in the context of Towards a Mentally Flourishing Scotland. Primary Care and clinical mental health services have to be enhanced.

(13) Beyond the 'Trolley Service' was developed with a focus on: building capacity and volunteer management; better community engagement; volunteers/ staff and labour relationships; diversity; volunteering and community empowerment; personal and social development. An action plan has now been developed, the key drivers for this are to: facilitate communities to be empowered and engaged and address equality and diversity issues; develop a compact agreement and ensure long-term sustainability; build volunteer management support and capacity; create supportive policy, planning and best practice; and facilitate individual, personal and social development.

AREAS FOR CONSIDERATION AND ACTION:

(11): The Choose Life target of reducing suicides by 20% is to be reviewed along with links to local and national drugs and alcohol services.

(12): A programme of training for 2010 is being circulated to all managers, and on-site training is offered to staff groups who would prefer this method of delivery.



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PRIORITY THEME: Sexual Health						
National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
NO6: We live longer, healthier lives	The Angus Population have a positive and responsible attitude towards sexual health	Augment support for parents and families.	Health Improvement Team	2009-2012	Two year funding	Engagement with Speakeasy programme at authority level has been postponed until autumn 2010. In the interim time schools have been encouraged to engage with Speakeasy on an individual basis.
		Engage young people through social marketing.	Health Improvement Team	2009-2012	None reported	New marketing materials for sexual health and blood borne viruses were launched through the Scottish Government in October 2009. Information is being marketed on radio, in cinemas, through the press, posters and online - national (http://www.sexualhealthscotland.co.uk/) and local (http://sexualhealthtayside.org/) sexual health websites. The C-Card micro-site was launched in March 2010 - www.taysideccard.org



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PRIORITY THEME: Sexual Health

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
		Close the gap in inequalities through: <ul style="list-style-type: none"> - Increase access to Sexual Health Services in deprived communities. - Organise multi-agency Sexual Health staff training - Promote and co-ordinate the Tayside Condom Initiative – C Card. Target deprived areas and learning disabilities. - Introduce the Sexual Health and Relationships Education (SHARE) programme into the Sex and Relationships (SRE) programme within secondary schools in Angus. 	Health Improvement Team NHS Tayside Public Health Directorate	2009-2012	Uncertainty as to whether Respect and Responsibility monies will continue which will impact on service delivery	(14)

SUMMARY OF PROGRESS: Sexual Health

(14) - The young people's health workers team provide access within one mile of each secondary school from January 2010, and will provide health drop-ins in Arbroath and Brechin High School.

- Multi-agency staff training is ongoing.
- The C-Card micro-site was launched in March 2010.
- SHARE training has been delivered to all secondary school Pupil Care and Support staff. Courses are also being offered to primary school teachers. Staff tutors have attended training to develop SRE for young people with additional support needs. Angus Council Education Department has additional guidance for SRE based on the Curriculum for Excellence.

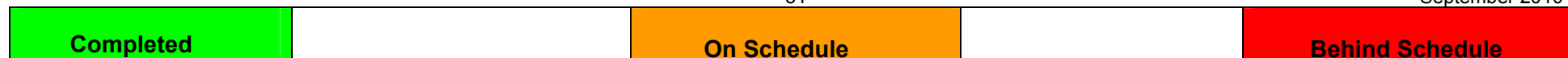
AREAS FOR CONSIDERATION AND ACTION:

Teenage pregnancy continues to be a priority in Angus especially owing to the links between deprivation and poverty. A driver diagram has been produced by NHS Tayside to impact on teenage pregnancies rates in Angus.



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PRIORITY THEME: Smoking and Tobacco Control						
National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
NO6: We live longer, healthier lives	The health of the Angus population is improved by reducing the impact of tobacco use	Develop the 'Give it up for Baby' smoking in pregnancy incentive scheme project.	Angus Smoking Cessation Team	2009-2010	Current funding runs until end of March 2011	Recruitment to continue at Angus maternity booking clinics. Discussions are to be held with managers within local retail partners to see if stores can be used to increase publicity about the scheme. Plans are underway to offer the new national training "Raising the Issue of Smoking in Pregnancy" to all midwifery staff in Angus. This will provide the opportunity to further promote the scheme.
		Launch and maintain a Smoke-Free Homes Initiative.	Angus Smoking Cessation Team	2009-2012	Current funding runs until end of March 2011	Launched in May 2008 as part of the annual Safe Angus programme. In 2010-12, more emphasis will be placed on pre-printed material for the pupils, an increased focus on deprived communities and the use of peer influence and community 'champions' to deliver key messages.



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PRIORITY THEME: Smoking and Tobacco Control

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
		Work with Schools and Young People on smoking prevention and cessation.	Angus Smoking Cessation Team /Angus Council Education Department/ NHS Tayside Public Health Directorate	2009-2012	None reported	(15)
		Support the development of the Angus Tobacco Alliance.	Angus Smoking Cessation Team and Partner Organisations	2009-2012	None reported	This multi-agency group with representation from statutory and voluntary sectors will be reconvened late-2010 to steer tobacco control work in Angus and attempt to improve recruitment. Help is being sought from ASH Scotland.

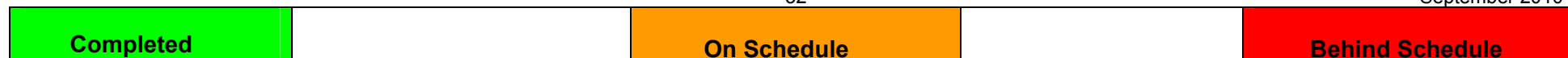
SUMMARY OF PROGRESS: Smoking and Tobacco Control

(15): Work continues on delivering cessation and prevention activity across Angus. Summer term 09-10 sees 6 out of the 8 secondary schools and 2 out of the 3 offsite schools receiving cessation input. A Peer Education programme is in the planning stages at Brechin High School.

General: Measures have been taken throughout the year to try to improve recruitment to smoking cessation services. These include providing more community based groups, offering more 1-2-1 services, home visits and telephone support. Workplace based groups have been actively pursued and over the last 9 months these have taken place at an increased number of settings in both the public and private sector. Despite these efforts recruitment to the service has remained flat.

AREAS FOR CONSIDERATION AND ACTION:

More evening smoking cessation groups are being offered and meetings with primary care staff to promote the service and encourage referral have been arranged over the coming months. Staff members from the smoking cessation services across Tayside are meeting with representatives of ASH Scotland to look at ways of improving recruitment and efforts are now underway to reconvene the Angus Tobacco Alliance. Help with making this a productive exercise is currently being sought from ASH Scotland. Plans are underway to offer the new national training "Raising the Issue of Smoking in Pregnancy" to all midwifery staff in Angus.



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PRIORITY THEME: Oral and Dental Health

National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
<i>O6: We live longer, healthier lives</i>	The gap in health inequalities across the childhood population of Angus is reduced	Implement the 'Childsmile' tooth brushing programme in nursery and primary schools.	Angus CHP Community Dental Health Services	2009-2012	None reported	Toothbrushing: all council schools and nurseries are participating to varying degrees. 1,358 3-4 year olds currently brushing in the nurseries.

SUMMARY OF PROGRESS: Oral and Dental Health

In addition to the above, flouride varnishing: 328 out of 547 P1-3; and 210 out of 280 nursery age children. Parents must provide consent for this and there is a consent return rate of 50-60% in primary and 75-80% in nursery.



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PRIORITY THEME: All themes						
National Outcome	Local Outcome	Actions	Lead Agency	Timescale	Resource Issues	Progress & Status as at March 2010
06: We live longer, healthier lives	The health of the Angus population is improved	Support all Angus schools to become 'Health Promoting Schools'.	Angus Council Education Department	March 2012	None reported	(16)
		Healthy Working Lives: <ul style="list-style-type: none"> - Deliver alcohol awareness sessions and help workplaces to develop and/or review substance misuse policies - Deliver Mentally health Workplace Training and provide stress/wellbeing sessions. Provide assistance to develop/review mental health and wellbeing policies - Deliver smoking cessation workshops and help workplaces to develop and/or review tobacco policies - Deliver sessions and promote healthy eating, physical activity, sexual health, oral health and men/women's health 	NHS Tayside Healthy Working Lives Team for across Angus Council Health Improvement Team for within Angus Council and CHP	Angus Council – all buildings/sites to be involved by 2012	None reported	(17)

SUMMARY OF PROGRESS: All themes

(16): All schools in Angus have been accredited. A local support group of teaching staff are currently reviewing the Health Promoting Schools accreditation process. The re-accreditation process will be in the new session of 2010 subject to NHS Tayside approval.

(17): Angus Council Healthy Working Lives Strategy approved. Currently 24 working towards bronze; 3 hold bronze; 1 holds silver and 1 holds gold; 2 working on mental health commendation award and 3 interested in commencing bronze.

Across Angus:
 14 workplaces (not including Angus Council) are registered - 10 working towards bronze, 2 hold bronze and 2 hold silver; this represents 1913 employees. Training delivery includes: Environmental, Health and Safety, REHIS Food and Health, Mentally Healthy Workplace for Managers and Drugs and Alcohol; sessions also delivered on smoking cessation, stress/relaxation and physical activity.

