

# Case study

## Hartlepool Borough Council: public health department with additional council functions and targeted health improvement interventions

“As Leader of Hartlepool Borough Council I am delighted that public health has integrated so effectively into the local authority. Since the council assumed responsibility for public health in April, this has provided us with a great opportunity to refocus our efforts to address the significant public health challenges across the town. I am confident that working in partnership with other organisations, we can make great inroads in improving the health and wellbeing of the people of Hartlepool.”

**Councillor Christopher Akers-Belcher**  
**Council Leader**

“Public health staff from the NHS have integrated very effectively into Hartlepool Borough Council since 1st April 2013. This has been possible as the staff had been located in the Civic Centre and the Director of Public Health had been a member of the Corporate Team for well over a year before formal transfer. Now public health has integrated into the authority, it has given us a great opportunity to expand the remit of the department to include public protection and sports and recreation.”

**Dave Stubbs, Chief Executive**

“Joining the local authority has been a really positive experience for public health staff working in Hartlepool and we feel really embedded in the life of the council. Together with a range of staff in the local authority we are continuing our efforts to address health inequalities, improve health and protect the health of the population.”

**Louise Wallace, Director of Public Health**

“I have worked very well for many years with colleagues in public health as part of our primary care trust. Since the 1st April 2013 when public health duties transferred to the local authority, the excellent working relationship has been maintained. As partners, we share a joint vision and strategy for health based on a comprehensive joint strategic needs assessment for the town. I am confident that together with health services, public health and social care we can make real improvements in health and wellbeing.”

**Ali Wilson, Chief Officer**  
**Hartlepool and Stockton CCG**

## Key messages

- A Public Health Department including environmental health, trading standards, licensing and sports and recreation will provide further opportunities to achieve health and wellbeing improvements both strategically and on a day to day basis through front-line staff.
- Interventions are shaped by local research as well as national evidence and their impact on health is regularly monitored.

## Context

Hartlepool is a unitary authority with a population of around 92,000. Overall, health, deprivation and life expectancy are worse than the England average and 5,400 children live in poverty. The difference in life expectancy in different parts of the borough is up to 12 years for men and 8 for women. However, early death rates for cancer, heart disease and stroke have improved in recent years.

Hartlepool has a long history of partnership working between the council, public health and primary care, with many health improvement initiatives in the council. Public health co-located in 2011 allowing functions to be embedded from an early stage.

## Additional functions

Hartlepool Council went through significant structural and political changes around the time of the public health transfer.

Following a public vote, in April 2013 political arrangements changed from eleven years of a directly elected mayor to a system of council leader and committees. Council staff had to become familiar with the new ways of working, and public health joined in this process which proved a useful shared induction.

Around 15 members of the public health team transferred to the council and combined with

the drugs and alcohol action team to become a stand-alone Public Health Department. Between April and June 2013 the council structure was reviewed, including discussions about the right range of functions to combine with public health. When this was decided, a phased approach of transfer took place:

- in September environmental health, licensing and trading standards joined the Public Health Department
- in January 2014 sports and recreation will formally come across (this is already happening in shadow form).

The Public Health Department will focus on the following key areas:

- health improvement
- clinical quality and commissioning
- drugs and alcohol service delivery
- sports and recreation
- public protection.

Many outcomes in the Public Health Outcomes Framework (PHOF) are owned by the Department, but others are shared with other council departments.

## Opportunities from the additional functions

In recent years, council teams have worked with public health on a number of projects linked to the PHOF. Joining the Public Health Department will allow this to be extended throughout and beyond the organisation: at a political and strategic level, through the work of frontline staff, and through work with Public Health England. Interventions that are already in place or planned include the following.

### **Tattoo Hygiene Rating Scheme (THRS)**

Hartlepool is working to introduce a hygiene rating scheme for tattoo studios in April 2014, and may be the first council in England to introduce this scheme. THRS is

a voluntary scheme supported by the Tattoo Piercing Industry Union and the Chartered Institute of Environmental Health. It is intended to increase safety standards and prevent 'scratchers', unlicensed tattooists working from home or places like pubs or festivals. The scheme promotes awareness of the difficulties of removing tattoos and the potential for health problems such as Hepatitis C, HIV and AIDS. Tattooists would be awarded hygiene grades of between 1 and 4 in a similar approach to the Food Hygiene Rating Scheme. All seven tattoo studios registered in Hartlepool have expressed interest in the scheme.

### **Linking tobacco control and stop smoking**

Hartlepool received temporary IDeA funding to tackle a range of problems associated with illegal tobacco. A tobacco control officer in the council's trading standards section worked with partners in the Police and Customs and Excise to seize counterfeit tobacco, identify retail outlets supplying children, and ensure compliance with UK smoke free legislation and EU legislation on self extinguishing cigarettes (to reduce the potential for house fires). Public health funding has been used to continue this work. Also, having tobacco control and the commissioning of stop smoking services in the same department is expected to bring further opportunities for tackling smoking harm.

### **Reducing childhood obesity**

Families in it Together Hartlepool is a partnership between the health improvement team, sports and recreation, the Dietetics Service and school nurses to provide a tier-two service for children identified as overweight or obese via the National Child Measurement Programme. The programme has been designed over a twelve-month pilot period and has changed in response to research and user consultation. The programme initially involved a group intervention with structured nutrition and exercise education but has changed to a behaviour change pathway with access to community support for individuals and families. The model will be launched in

January 2014 and the first cohort of ten families will be monitored at 3, 6 and 12 month periods to measure sustained behaviour change.

### **Escape Diabetes Act Now (EDAN)**

Following a scoping exercise, in October 2012 sport and recreation and the health improvement team implemented a 12 month pilot programme for patients identified as being at risk of Type 2 diabetes. The pilot has been based on NICE guidelines relating to Type 2 diabetes prevention, and involves:

- referrals from a GP practice based on clinical risk criteria
- interventions based on individual support and action planning, such as physical activity and nutrition
- measuring health indicators such as BMI, waist measurement, cholesterol and blood pressure.

Overall outcomes at six months shows a significant change to risk levels for the onset of diabetes as well as self reported increases in self confidence and esteem.

### **Mums on the move**

This project has been designed following a scoping exercise that showed there were no accessible opportunities for pre or post natal physical activity. It was formed by a partnership of health improvement, sport and recreation, children's centres, midwifery service, the breastfeeding coordinator and the health visitor team. A range of tailored exercise is provided in council leisure centres and parks by trainers with additional training in maternity exercise. Also, each leisure centre has received the gold award for breastfeeding which involved training over 45 members of staff. Work is now underway to develop a specialist strand for the long standing (15 years) borough-wide exercise on prescription programme HELP to focus on maternal obesity, gestational diabetes and obesity resulting in infertility.

### **Application for early morning restriction order**

The shadow Public Health Department recommended the introduction of an early morning restriction order (EMRO) for alcohol sales to reduce alcohol-related violence and anti-social behaviour in the town centre. The Committee did not support this at the current time but intends to revisit the issue next year to establish whether local licensees have taken responsibility for continuing previous improvements, including an in-depth look at the Best Bar None scheme. Although the recommendation was not supported at this stage, this was seen as a helpful political discussion on the potential of using licensing for health and wellbeing.

### **Long term conditions and older people**

Public health is responsible for the falls service and winter warmth planning. It is contributing to integration planning for the Better Care Fund, with two public health specialists identified to be involved in designing programmes.

## **Future plans**

Hartlepool is planning to work on two projects relating to takeaways in 2014-15, building on current work to reduce fat and salt content following the sampling of meals:

- a scheme to regulate the growth of fast food outlets working with planners and other partners and based around the 'takeaway toolkit'.
- the healthier catering commitment project, based on the London model for healthier catering commitment.

Hartlepool is considering the reconfiguration of a health improvement service for children 0-19 including school nursing, health visiting and, potentially, breast feeding services.

## **Contact**

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