

AGENDA ITEM

**REPORT TO HEALTH AND
WELL BEING BOARD**

21 OCTOBER 2013

**REPORT OF DIRECTOR OF
PUBLIC HEALTH**

UPDATE ON WINTER WARMTH

SUMMARY

This briefing outlines the interventions currently in place through Health and Wellbeing Board partner organisations, to support vulnerable people against the effects of cold weather. Next steps are highlighted.

RECOMMENDATIONS

The Stockton Health and Wellbeing Board is asked to consider this update and any further action required.

DETAIL

Background

1. Evidence shows that seasonal factors can have a significant impact on the health of the population. In particular, exacerbations of COPD and an increase in the stroke can be triggered by cold weather, particularly a sudden 'cold snap'. Different influenza strains circulate in the population and one or more strains may be prevalent in a given year. The influenza vaccination is composed to address the prevalent strain in that year. Influenza can have a significant impact on health and health services. It can result in complications e.g. bronchitis and pneumonia and can be life-threatening in vulnerable people i.e. particularly older people and those with weakened immune systems.
2. Public Health England data produced from a comprehensive review of weekly mortality trends in 2012/13 showed there were more deaths than expected nationally but the explanation would seem to be a combination of circulating influenza and cold weather. Many of these deaths are preventable. A peak of excess deaths occurred earlier in the North East than in England as a whole. In 2011/12, there were an estimated 80 excess winter deaths in Stockton Borough.
3. The effects of cold weather on health, including falls, can result in significant pressure on the health system and annual planning takes place to mitigate this.
4. Seasonal health and wellbeing also captures the impact of other extreme weather conditions such as heatwaves and those vulnerable to the effects of flooding, which links to emergency planning initiatives. This paper only addresses the effects of cold weather.

CURRENT PLANS AND STRATEGIC WORK

5. Multi-agency action is important to effectively address the effects of cold weather. Planning for the impacts of cold weather on the health and social care system is coordinated through the Directors of Adults and Children's Services and the Directors of Public Health together with the NHS England Area Team and the Clinical Commissioning Group. The NHS Area Team leads on the emergency and business continuity planning for the NHS system. The Tees Joint Strategy Unit (JSU) is a key coordinating body for 'winter planning' across Tees. It is important that organisations, particularly providers, support each other at times of pressure e.g. high emergency admissions and low availability of hospital beds (including Intensive Care) at peak periods.
6. The Cleveland Emergency Planning Unit works with partner organisations e.g. Cleveland Police, North East Ambulance Service, Cleveland Fire Brigade to respond to coordinate action and response in the case of emergencies and incidents, which may also be related to extreme weather.
7. The JSNA and the Health and Wellbeing Strategy for Stockton highlight preventing ill health as a key strategic priority. Reducing hospital admissions has also been identified as a priority for Board member organisations and the Clinical Commissioning Group and NHS Area Team are developing and implementing plans on this, in liaison with Public Health.
8. A draft Seasonal Health and Wellbeing Strategy for Stockton Borough has been produced with a wide range of partners, overseen by the Seasonal Health and Wellbeing Strategy Steering Group (led by SBC). The Strategy is currently being finalised and will be presented to the Health and Wellbeing Partnership for information and support. It includes actions to ensure effective communication with vulnerable groups regarding the risks of cold weather. The Strategy is supported by an existing multi-agency Seasonal Flu action plan and a Falls action plan.
9. A recent Environment Select Committee Review of affordable warmth produced recommendations which are also being implemented by the Affordable Warmth Partnership (led by SBC).
10. The SBC Technical Services Service Improvement Plan 2013/14 identifies actions to ensure that people live in safe and warm homes.
11. The NHS England Area Team is responsible for commissioning immunisations programmes. With specialist input from Public Health England, they are developing plans to ensure the implementation of existing and new immunisations programmes across the North East and Cumbria in the new NHS system (post-April 2013). The Director of Public Health has a responsibility to scrutinise these plans, ensuring robust plans are in place to protect the health of the population.

CURRENT INTERVENTIONS

Influenza

12. The NHS Area Team are ensuring the implementation of the influenza vaccination in risk groups, as in previous years. Risk groups include people aged 65 or over; pregnant women; people with a serious medical condition; people living in a residential or nursing

home; carers of people at risk of complications of the flu; and healthcare professionals. These groups are invited by their GP to attend for the vaccination. Work is ongoing to promote uptake of the vaccination in healthcare professionals.

13. SBC is providing free vaccinations to staff working with the most vulnerable groups as defined by the national criteria and will be promoting uptake among staff in contracted services e.g. residential homes.
14. The NHS Area Team and PHE are currently developing plans to implement the new influenza vaccination programme for all children aged 2-16 years old, to be implemented in 2015.

Falls

15. In Addition to the Falls action plan, a Falls Service is in place, funded by the CCG and Public Health. The service provides a reactive, post-fall service to prevent recurrence; education to minimise falls; and accepts referrals from people at risk of falls. Whilst available to all ages (over 18yrs) it specifically targets the over 65s, due to their higher risk falling and of sustaining significant injury as a result of falling.

Winter Warmth

16. The Public Health-funded Warms Homes Healthy People (WHHP) project is targeted at the over 75s, elderly people living alone and people with disabilities / health issues worsening during cold weather. A range of interventions are delivered by partners e.g. a handyperson service (draft-proofing etc.); boiler servicing and repairs and emergency heating; energy and benefits advice; and home insulation / affordable warmth advice.
17. Department of Health WHHP funding will not be available this winter; this has provided just over £100k for each of the last two years in Stockton. Funding options are being explored between Public Health and the Clinical Commissioning Group, given the links with hospital admissions.
18. The Big Community Switch (led by SBC Technical Services) – following the success of the April 2012 auction WHHP is funding Five Lamps and SDAIS to support off-line registrations for a further collective switching auction in November 2013. Evaluation of the project identified significant benefits, including identifying bill overpayments, making grant applications to clear fuel debt and identifying people eligible for Warm Homes Discount but not claiming this.
19. WHHP has also funded an e-learning package to raise awareness with front line staff of the signs of fuel poverty, the health impacts, actions that can be taken and how to refer to WHHP. The VCS have supported the WHHP project through Catalyst promoting the initiative to their organisations and contacts to encourage access.
20. The recent Go-Warm project run by the CES Group and SBC has ensured cladding and heating systems in vulnerable homes.

FINANCIAL IMPLICATIONS

10. There are no direct financial implications of this update, through funding options may need to be sought for some work e.g. the WHHP.

LEGAL IMPLICATIONS

11. There are no specific legal implications of this update.

RISK ASSESSMENT

12. Implementing plans to protect against the effects of extreme weather reduce the risk to the population. Ensuring robust Health Protection plans are in place through the Director of Public Health also reduces the risk of poor population health related to seasonal factors; and to SBC.

SUSTAINABLE COMMUNITY STRATEGY IMPLICATIONS

13. The work will support implementation of both the Sustainable Community Strategy and the Joint Health and Wellbeing Strategy.

CONSULTATION

14. The draft Seasonal Health and Wellbeing Strategy has been developed through consultation and will be circulated for further comment at the Health and Wellbeing Partnership.

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