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Foreword

It is with great pleasure that I present to you the PHE East Midlands prospectus. The aim of this prospectus is to give you a flavour of the work we do across the East Midlands and the advice and support that we can provide.

PHE East Midlands supports local priorities and demands, and ensures that local innovation and evidence influences the national agenda and contributes to developing best public health practice.

We also facilitate the local implementation of national evidence-base and dissemination of best practice guides and toolkits.

This document sets out our proposals for service delivery and offer of support across the East Midlands and covers the work of our teams in Health Protection, Health Improvement, Healthcare Public Health, Workforce Development and Public Health Information and Intelligence. Our delivery is supported by an integrated business support team.

I hope you find this Prospectus useful and encourage you to contact us if you require further information about PHE East Midlands.

Dr Fu-Meng Khaw
Director
Public Health England
East Midlands
East Midlands at a glance
Who we are and what we do

Public Health England (PHE) is the expert national public health agency that fulfils the Secretary of State for Health’s statutory duty to protect health, address inequalities and promote the health and wellbeing of the nation.

PHE East Midlands is one of three Centres in the Midlands and East of England Region. PHE East Midlands covers a population of 4.7m in nine unitary and upper-tier local authorities: Derby City, Derbyshire County, Leicester City, Leicestershire County, Lincolnshire, Northamptonshire, Nottingham City, Nottinghamshire County and Rutland. It is the local presence of PHE and an active partner in the local public health system.

As the ‘front door’ to PHE, PHE East Midlands delivers an integrated offer of services and advice and works across PHE teams, such as the Local Knowledge and Intelligence Service (LKIS) and Field Epidemiology Service (FES), to provide a seamless and integrated offer across the following areas:

- Functional domains: health protection, health and wellbeing, and healthcare public health
- Programmes: such as Children and Young People, Tuberculosis control, Sustainability, Mental Wellbeing, Workforce Development, Learning & Development, Informatics and Intelligence and Healthcare Acquired Infections
- Place based working: Dedicated Place Leads corresponding to the nine unitary/upper tier local authorities
- Focus on health inequalities and health equity as an underpinning foundation for all our work.
PHE People Charter
Protecting and improving the nation’s health

‘In PHE the way we behave will have the greatest impact on achieving our objectives’

**Communicate**
- Communicate openly, honestly and clearly, avoiding jargon
- Seek out and share knowledge, suggest solutions
- Encourage, listen and be receptive to others’ views

**Achieve together**
- Work together towards PHE’s objectives
- Nurture open relationships and build trust
- Work collaboratively with all customers, internally and externally
- Empower each other and hold each other to account

**Respect**
- Treat colleagues and customers as they would wish to be treated
- Value difference by embracing diversity and inclusion
- Look after our own wellbeing, and support each other
- Recognise and celebrate our successes, large and small

**Excel**
- Provide excellent service to colleagues and customers
- Drive personal development and suggest ways to improve
- Maintain professionalism at all times
Our Vision for Prevention in the East Midlands

PHE East Midlands will work with partners to deliver a system wide approach to prevention that will engage, enable and empower people to optimise their mental and physical health and wellbeing and enhance their quality of life.

Public Health England exists to Protect and Improve the Nation’s Health. The prevention of ill health is at the heart of that vision. In the East Midlands our holistic approach to prevention is not just about preventing the onset of disease through tackling risk factors and the wider determinants of health, but also enhancing quality of life for those with long term conditions through the prevention of the progression and impacts of disease through early intervention with high quality treatment and care. To do this PHE East Midlands will work with a wide range of stakeholders across the public, private and voluntary sectors to support the systematic adoption of evidence based prevention approaches across the East Midlands.

Often prevention measures are delivered through small scale, short term, and independent projects. To achieve the ambition for a ‘Radical upgrade in Prevention’ in the NHS Five Year Forward View, it is important to ensure a systematic approach is taken. Prevention measures should not be undertaken in isolation, but should be routinely embedded across the health, social and care system and applied systematically to ensure maximum benefit is achieved.

Prevention does not only apply to the delivery of care and front line services, but also needs to be evident in local policies and approaches to business delivery. Through a ‘Health in All Policies’ approach the principles of prevention can be applied across a range of functions including facilities management, employee health and wellbeing, the commissioning of services and the procurement of goods.
Our Vision for Prevention in the East Midlands (cont.)

These organisational activities have an impact on the environments in which patients and the public live, influencing the wider determinants of health such as employment, income, education, housing, air quality and social capital and connectedness, and in some cases directly influencing lifestyles and the key risk factors of smoking, diet, physical activity and excess alcohol consumption.

During 2017/18 we will develop a Prevention Strategy, building on our work with the East Midlands Clinical Senate in developing ‘Meeting the Prevention Challenge in the East Midlands: A Call to Action’ which supported a direct response to the NHS 5YFV. The development and implementation of a prevention strategy will:

- Actively seek system wide engagement from partners across the public, private and voluntary sectors to develop a holistic approach to prevention in the East Midlands

- Prioritise primary prevention to address underlying causes of poor health and wellbeing, as well as having a continued focus on secondary and tertiary prevention

- Prioritise healthy life expectancy and quality of life, not just adding years to life

- Develop a person centred prevention model to ‘engage, enable and empower’ individuals and communities, including those with health literacy needs

- Promote a non-silo approach to prevention that supports mental and physical health and wellbeing

- Utilise Making Every Contact Count (MECC) as a mechanism to embed the delivery of prevention.
Health in the East Midlands

Health Inequalities

In the East Midlands in 2013-15 life expectancy was **79.3** years for males and **82.9** years for females, significantly lower than the England average for both (79.5 and 83.1 respectively). Life expectancy has increased nationally yet the East Midlands has not kept pace, increasing at a slower rate.

Healthy life expectancy in 2013-15 was **62.5** years for males and **63.5** years for females, significantly lower than England average for males (63.4) and similar for females (64.1)

Life expectancy is increasing for men and women, however it remains worse than the national average and the inequality gap in life expectancy is not significantly reducing.

The gap between life expectancy and healthy life expectancy is referred to as ‘the window of need’, and is the number of years that an individual can expect to live in ill health. In the East Midlands in 2013-15, males live an estimated **16.8** years in ill health and females live **19.4** years in ill health.

In 2014 **183,160** children in the East Midlands aged under 20 live in low income families, however the figure has improved significantly since 2010. There is wide variation within the region from 8.3% in Rutland to 33.6% in Nottingham.
Life expectancy by gender in the East Midlands

Years of life expectancy, district authority variation within the East Midlands, 2013-2015

Females

Males
**Child Health**

13.7% of women smoke during pregnancy in the East Midlands (2015/16), significantly worse than England (10.6%) but significantly improving since 2010/11.

72.5% of 5 year old children in 2014/15 are free from dental decay, significantly worse than England (75.4%).

1,282 babies born at full term in the East Midlands in 2015 had a low birth weight (weighing under 2500g), significantly better than England and significantly improving.

**Excess Weight**

One third of 10-11 year old children in the East Midlands are overweight or obese in 2015/16, significantly better than England (34.2%) but the trend is increasing significantly from 2008/09.

One fifth of 4-5 year old children in the East Midlands are overweight or obese in 2015/16, this is similar to England (22.1) with the figure significantly reducing from 2008/09.

Two thirds of adults in the East Midlands in 2013-15 are overweight, significantly worse than England (66.8% and 64.8% respectively). There were 264,330 adults with recorded diabetes in 2014/15 which has significantly increased since 2010/11.
Smoking

18% of the adult population in the East Midlands smoke (2015), rising to 28% in those with routine and manual occupations.

Mental health

In 2015/16 There were 9,599 emergency admissions due to intentional self-harm in the East Midlands which is a rate of 203.0 per 100,000 population, significantly worse than England (196.5).

Health care public health

79.8% of eligible women were screened for breast cancer in the East Midlands in 2016, however this has reduced significantly from 81.7% in 2010.

There were 4,953 hip fractures in those aged over 65 in the East Midlands in 2015/16, a rate of 578 per 100,000 population which is similar to that nation rate of 589.

There were 24,870 deaths in the East Midlands from causes which are considered preventable in 2013-15, a rate of 186.3 per 100,000 which is similar to the national rate of 184.5. Deaths are considered preventable if they could have been potentially avoided by public health interventions in the broadest sense.
Core Function 1: Protecting the public’s health from infectious diseases and other hazards to health

Our primary duty is to protect the public’s health in the East Midlands. We provide leadership and scientific advice to reduce harm from infectious disease and environmental hazards, including the growing problem of infections that resist treatment with antibiotics.

We ensure there are effective surveillance arrangements in place locally to identify threats and for preparing, planning and responding to health protection concerns and emergencies.

Our diverse and expert workforce applies unique knowledge and scientific skills and capabilities across epidemiology, microbiology and environmental hazards to provide the best health protection service to professionals and the public.
Health Protection: Priorities for 2017/18

- Maintain and develop our 24/7 health protection and emergency response capacity
- Work with partners to tackle antimicrobial resistance
- Continue work with partners to reduce the level of TB in the East Midlands

Examples of work

In 2016 the health protection team:

- Received over 181,000 electronic laboratory reports
- Handled 14,860 cases of infection
- Received 3,349 enquiries
- Managed 804 incidents and outbreaks

Workplace TB

The team led an investigation of a case of TB in a workplace. There were four infectious cases identified from initial testing and as a result several hundred people were invited for screening across the country. As part of the response the team worked with fourteen different employers and many TB services across the UK.

Contaminated Piercings

An initial cluster of 4 cases of Pseudomonas aeruginosa in Northamptonshire identified by a local surgeon was associated with ear piercings. Investigation by the HPT led to a national incident which identified 162 cases at 10 different studios linked to a specific aftercare product. The product was withdrawn from sale. Environmental and Microbiological evidence later showed a strong link between the product and the patients affected.
Core function 2: Improving the public’s health and wellbeing and reducing health inequalities

We will support local authorities and the NHS to secure the greatest gains in health and wellbeing.

We will work with our partners to achieve reductions in inequalities through evidence-based interventions.

We will promote actions to build healthy place, people and communities, making the case for prevention and early intervention.

We will work with our partners to establish networks and communities of improvement on key priorities.
Health and Wellbeing: Priorities for 2017/18

Support the reduction of Health Inequalities across the East Midlands, by creating opportunities to share evidence and good practice whilst facilitating the development of a sector led improvement approach. We will do this by:

- Working with and through local partners to achieve the public health co-benefits of sustainability, in particular through the development of the East Midlands as a sustainable food region and an East Midlands healthy Place network

- Developing a system-wide approach to increasing physical activity and promoting healthy weight for children and adults (including pregnant women); in line with Childhood Obesity Plan, PHE’s national work on WSO and by engaging with partners across the region

- Focusing on mental health, including supporting the development of local suicide prevention plans across the East Midlands and supporting the improvement of the health of employees and recognise the powerful contribution of employers to improving people’s mental and physical health, including specific work with the NHS and Civil Service.

- Contributing to CVD prevention system led improvement by facilitating improvements to the quality and reach of the NHS Health Check and Diabetes Prevention Programmes

- Working with key partners within the NHS and local authorities to ensure every child has the best start in life, by developing a prevention framework to support the transformation of maternity services, addressing smoking in pregnancy, breastfeeding and perinatal mental health.
Good Food East Midlands

In 2014 PHE began working on a sustainable East Midlands food project. In 2017 Good Food East Midlands (GFEM) was established as an independent Board and is all about supporting the fantastic work that is going on across the East Midlands to grow, cook and eat healthy and sustainable food.

The project was set up to promote sustainable food, and to encourage individuals and organisations to give some thought to what they eat, and where it comes from. The idea for the project came from the Soil Association's Sustainable Food Cities (SFC) programme and has sought to adapt that model to cover an English region.

Smoking in Pregnancy

PHE centre leads from Midlands and East have been working collaboratively to tackle the high rates of smoking in pregnancy (SiP) across the region. By working with partners and stakeholders we have demonstrated a high level of leadership, engagement and quality improvement, by taking a system approach to delivery and improvement. We are working in partnership with the three maternity clinical networks and NHSE maternity delivery boards to embed evidence based work around SiP into maternity transformation plans.

By working with partners and stakeholders we have demonstrated a high level of leadership, engagement and quality improvement, by taking a system approach to delivery and improvement. We are working in partnership with the three maternity clinical networks and NHSE maternity delivery boards to embed evidence based work around SiP into maternity transformation plans.

Health and Wellbeing: Examples of work
Core function 3: Improving population health through sustainable health and care services

As the public health adviser to NHS England, we will support NHS commissioners and providers as they seek to improve population health and tackle inequalities, and to develop more personalised, proactive care that can help each of us maintain the best possible health and wellbeing.

Our specialist staff will provide the evidence and analysis to help the NHS and local authorities allocate their resources most effectively, with a greater shift towards prevention and early intervention.

We will provide public health expertise, support and advice to the NHS to prevent ill health and promote effective treatments; to help drive improvements in population outcomes and reductions in health inequalities in a cost effective manner.
The Prevention Challenge

PHE East Midlands and the EM Clinical Senate jointly published 'Meeting the Prevention Challenge in the EM: A call to action' in December 2015. Drawing on the NHS Five Year Forward View, this report set out the economic case for prevention across NHS organisations in the EM, including 10 practical recommendations for NHS Provider Trusts. Through the development of a self-assessment tool PHE have supported Trust Directors and their colleagues in 10/15 NHS Trusts in the EM to review where they are against the recommendations.

This approach has secured senior ownership of progress and gaps in prevention activities and set a baseline for the Trust’s future prevention actions. Common difficulties in embedding recommendations have been identified and findings have informed PHE EM’s strategic planning.

Working with Health Education England

Consultants in Dental Public Health have worked with Health Education in the East Midlands to incorporate public health, and particularly Delivering Better Oral Health as core components of a range of local postgraduate teaching and training opportunities.

Dedicated sessions on alcohol, tobacco, Making Every Contact Count and behaviour change are delivered in partnership with East Midlands PHE Health and Wellbeing colleagues and local authority public health teams or their commissioned services.

A Delivering Better Oral Health audit programme for DFTs has been developed. Each of the audit topics will be rotated over a five year cycle to ensure that every geographical area will undertake an audit in tobacco, alcohol, caries prevention, periodontal disease and dietary advice in the five year cycle.
Core function 4: Building the capability and capacity of the public health system

PHE East Midlands will ensure the delivery of training and development that equips the East Midlands public health workforce for the challenges ahead in response to local needs and demands.

We will work closely with local authorities, the Public Health Training School, Heath Education England working across the East Midlands, the Chartered Institute of Environmental Health, Public Health academia, the voluntary and community sector, and the local NHS to build capacity and capability across the public health system.

Health Literacy

(the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions)

PHE East Midlands, HEE and NHSE have worked collaboratively to fund and deliver a Health Literacy pilot. Activity fell under four broad areas:
- delivering and evaluating training to 260 staff in front line and strategic roles to increase health literacy awareness and skills;
- development of approaches to identify realisation of system efficiencies through health literacy interventions (100% of participants identified potential changes they would make to their practice due to attending training);
- beginning the development of an undergraduate Health Literacy module;
- delivering training to 56 Diabetes Type 2 patients to enable more effective self-management approaches.

An Evaluation Report and Toolkit of resources will be published on the HEE website in Summer 2017, to share good practice and support adoption of approaches.
Building Capability and Capacity: Priorities for 2017/18

- Contribute towards delivery of key Fit for the Future recommendations through supporting the wider public health workforce to embed prevention and public health activity (examples include Job Centre Plus; elected members; Housing; Social Care; Fire and Rescue; third sector)

- Support the development of a skilled public health workforce through activities including collaboration with Health Education England (HEE), East Midlands to explore options for a further Practitioner scheme and developing approaches that enable mutual placements for PHE EM and local health and care system partners

- Work collaboratively with HEE, NHSE and the national Health Literacy Collaborative to disseminate outputs from the EM Health Literacy pilot, specifically to facilitate implementation of the recommendations and to build sustainability of approach

- Provide PHE EM workforce input into the public health and prevention agenda through continued engagement with key system partners including STPs, Local Workforce Action Boards and HEE EM

Elected member Training

PHE EM worked in collaboration with the LGA, East Midlands Councils and ADPH to design and deliver a locally delivered ‘Prevention Matters’ training session attended by 13 elected members. Evaluation showed that 100% of participants rated the training as ‘very effective’ or ‘effective’ in helping them to understand the national and local agenda for prevention. Further collaboration is planned for 2017–18, to deliver training around knowledge and data, which was a need identified by the elected members.

Safe and Well

Worked closely with Nottinghamshire Fire and Rescue, Nottingham City Council and Nottinghamshire County Council to facilitate delivery of Royal Society of Public Health Improvement Level 2 training, enabling public health and prevention approaches to be embedded into strategic and operational delivery of Safe and Well visits to support key local system priorities.
Core function 5: Knowledge and Intelligence

To support and advocate for effective local public health action, through the delivery of high quality tools and products, analysis, expert advice and training. Our service is available to local authorities and other public health partners.

What we do

- Support local partners in
  - applying public health evidence and intelligence to public health problems
  - getting the best value from available resources
  - increasing the effectiveness and efficiency of the local public health workforce

- Provide an expert analysis service working with our PHE Centres to develop and deliver an agreed programme of analytical work that supports the priorities of the local public health system

- Support the development and use of nationwide health intelligence tools and resources.

- Develop capacity and capability of the wider public health workforce, focusing specifically on health intelligence.
Knowledge and Intelligence: Priorities for 2017/18

- Ensuring partners in the local public health and healthcare system have a voice in PHE local and national Knowledge and Intelligence (K&I) agenda and an opportunity to support EM-wide approaches

- Manage the East Midlands Public Health Intelligence Network as a Continued Professional Development (CPD) and information sharing programme for public health intelligence staff.

- Providing support, advice and guidance to the implementation, delivery and evaluation of the prevention elements of STPs with an emphasis on value-based health and healthcare

- Supporting the public health workforce: increasing the effectiveness and efficiency of the local public health and wider workforce through training, do once for all and do once and share approaches, sharing of good practice and co-production

- Provide training on national PHE tools for population health analysis including Local Health, Fingertips and outputs from National Health Intelligence Networks.

For more information about the work of the Local Knowledge and Intelligence service (LKIS) in the East Midlands, sign up to the PHE East Midlands knowledge hub site at: phe.gov.uk

2 day training course for PH Managers

Objective of course is to increase PH managers in accessing and using PHI and in working with their local PH analysts. Course ran twice in 16/17 with over 50 delegates.

February course evaluated well. All delegates agreed that the course was relevant and had met their expectations. Increased confidence of participants in using PHE intelligence products from 30% to 100% of delegates feeling OK or quite confident across the two days.
Key Contacts

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Walking directions from the train station and station tram stop (approx. eight minutes’ walk):

As you leave the station from the city centre exit, turn right along Station Street passing Tesco Metro, Loxley House and Jury’s Inn

Arrive at the T-junction with London Road and using the pedestrian crossing, cross the road heading towards the Premier Inn hotel opposite.

Seaton House is situated behind the Premier Inn. Please use the PHE entrance situated at the rear of the building and press the intercom button to gain access.

Directions by road

from the North:
Exit M1 at J26, onto A610 towards Nottingham
Follow A610 and A6008 in to Nottingham City Centre

from the South:
Follow M1 to Remembrance Way/A453
Exit M1 at J24, onto A453 to Nottingham City Centre