
Report to Resources & Audit Sub-Committee

Date of Meeting: 9 December 2015

Subject: Quarter 2 2015 Performance Report, NHSFV

Report by: Kathy O'Neill, NHSFV/CHP General Manager

1.0 Purpose

- 1.1. This report presents to Sub-committee an overview of progress in aligning NHSFV performance monitoring with Clackmannanshire's Single Outcome Agreement (SOA) indicators.

2.0 Recommendations

- 2.1. It is recommended that the committee notes, challenges and comments on the performance information provided by NHSFV.

3.0 Considerations

- 3.1 Performance information is provided at Appendix 1, attached. The value information contained within the appendices has been provided by the Strategy & Performance Advisor for Clackmannanshire Council and the Senior Information Analyst for NHSFV. Three performance indicators have not changed since the Quarter 1 report due to data being unavailable at present – see latest notes.
- 3.2 Meetings between colleagues in Clackmannanshire Council's Strategy and Performance team, NHSFV Health Improvement/Principal Public Health Officer and NHSFV Performance Management team, have continued to support alignment of performance indicators between the Council, the Integration Joint Board and NHSFV LDP. NHSFV will be starting close work with the Council to develop joint linkages into the Covalent performance management system. The potential for improving alignment & dovetailing of performance monitoring in the future is recognised between the Head of Performance Management for NHSFV, the Head of Health Improvement for NHSFV, and the Strategy & Performance Manager for Clackmannanshire Council.
- 3.3 It is intended to jointly explore the potential to align future reports on NHSFV contribution to Clackmannanshire's SOA with development of

performance monitoring of the NHSFV LDP. NHS Forth Valleys 2015/16 Local Delivery Plan can be found at: <http://nhsforthvalley.com/wp-content/uploads/2015/03/NHS-Forth-Valley-Board-Meeting-Papers-31st-March-2015.pdf#page=188>

- 3.4 It was agreed for Quarter 1 and for this report, that it takes a life stage approach and provides some examples of activity that NHSFV have undertaken in the time frame, where NHSFV have had a leadership role to support partners effectively and efficiently to deliver on outcomes within Clackmannanshire's SOA.
- 3.5 Furthermore, this and subsequent reports intend to provide an 'additional theme' to focus upon in order to provide Committee with a live example of partnership activity between NHSFV and Community Planning Partners. Quarter 2 report has a focus on the social influencing approach – see end notes. An accompanying short video will be played at the committee meeting to showcase this programme.

Author(s)

NAME	DESIGNATION	TEL NO / EXTENSION
Kathy O Neill	CHP General Manager	01786 454631
Joanne O Suilleabhain	PPHO	01259 290204




APPENDIX 1; NHSFV QUARTER 2 PERFORMANCE REPORT


Introduction

It has been agreed that for the purpose of this report, NHSFV will provide information on the most recent available figures on the following Performance Indicators, namely:

Early Intervention and Prevention

1 Early Years

Code	Description	2014/15			2013/14	2012/13	2011/12	Latest Note
		Value	Long Trend	Scottish Average	Value	Value	Value	
SAP NEW 014	Number of still births in Clackmannanshire (rate per 1,000 live and still births)	5.4		4.0	9.0	7.9	8.8	
SAP NEW 015	Number of infant mortalities in Clackmannanshire (rate per 1,000 live births)	1.8		3.6	1.8	3.2	1.8	
SAP NHS 02a	Percentage of 3-5 year olds registered with an NHS general dentist	91.9%		92.3%	93.1%	91.4%	87.8%	

Code	Description	2013/14			2012/13	2011/12	2010/11	Latest Note
		Value	Long Trend	Scottish Average	Value	Value	Value	
SAP NHS 04c	Percentage of Primary 1 children within Clackmannanshire CHP who are at risk of being overweight	16.5%		12.4%	11.9%	14.1%		[Data for 2014/15 will not be available until February 2016]

Midwives

Midwives lead on Workstream 1 of the Early Years Collaborative (Pre-conception to 1 year). Workstream 1 has four key change areas:

1. Improving access to maternity services.
2. Attachment and child development – by age and stage
3. Point of contact and transfer of care to next service
4. Smoking cessation – delivering interventions

Two tests are now embedded in practice:

1. Early access to antenatal care: monitoring continues in relation to women accessing maternity care by the 10th and 12th week of pregnancy. July –September 2015 data shows an average 84% of women accessing care by 10 weeks and an average 91% by 12 weeks, in Clackmannanshire.
2. Postnatal communication with Named Person: electronic communication to named person, within Forth Valley sent on day of discharge from hospital. Monitoring continues with data showing 100% for women living in Clackmannanshire.

Four current tests of change:

1. Engage with midwifery teams to progress further tests of change and improve practitioner's knowledge, understanding and skills in the process of small tests of change and Plan, Do, Study, Act (PDSA) reporting. Eight midwifery teams are invited to attend tri-weekly meetings. This test continues with midwives actively involved in PDSA process. There is a plan to embed this test of change in practice from October 2015.
2. To use a Maternity Tracker as a tool to implement change in the delivery of antenatal care in relation to improving identified health behaviours for all pregnant women e.g. CO monitoring for all pregnant women at first antenatal booking appointment. Reporting for this test relates to both Stirling and Clackmannanshire, with the July-Sept average at 93% compliance with completion of the tool.
3. Vulnerable Persons Database Reports from Police Scotland to maternity services in Forth Valley. This test is ongoing with data July to September showing 11 reports in total for pregnant women living in Clackmannanshire. This information informs midwives of potential areas of vulnerability or child protection issues which previously may not all have been reported to maternity services.
4. To improve maternal knowledge and understanding of the importance of monitoring foetal movement. This is done in conjunction with informing women about attachment and bonding with their baby in pregnancy. Reporting for this test will commence in October 2015.

The Family Nurse Partnerships (FNP)

The FNP is a Scottish Government funded project which is an evidenced based, licensed programme originated from the University of Colorado. It follows the work of Professor David Aulds who holds the license with the Scottish Government. Professor Angela Wallace is the Executive Sponsor in Forth Valley and also chairs the Family Nurse Partnership Advisory Board. The programme works with young mothers aged 19 years and under, having their first baby and their families. At the time of this report, 29 clients in Clackmannan are being supported, the babies range from age 0 to 16 months old. In Forth Valley we have a Supervisor and 5 Family Nurses who mainly come from midwifery and Health Visitor backgrounds, all of whom have received advanced level training to equip them for their role. The Family Nurses are working with the young mothers and their families from early pregnancy until the babies' 2nd birthday. They visit weekly to fortnightly for a minimum of one hour, building a therapeutic relationship. FNP is based on theories of human ecology, attachment and self efficacy and has three overarching goals: 1. to improve antenatal health and birth outcomes, 2 to improve child health and development, 3 to improve the economic self sufficiency of the family. The potential to develop assets based physical activity support for mothers and their babies will be looked at over the coming 6 months.

Oral Health for pre-school children

Childsmile is Scotland's flagship child oral health improvement programme, it is designed to improve the oral health of children in Scotland and reduce inequalities both in health and access to dental services. Childsmile staff currently work out of Clackmannanshire Community Health Centre. Childsmile is rolled out in all 14 health boards in Scotland and consists of 4 main strands:

- Childsmile Core
- Childsmile practice
- Childsmile Nursery
- Childsmile School

1. **The Childsmile Core Programme** is available throughout Scotland. Every child is provided with a dental pack with a toothbrush and tooth paste containing 1000ppm (shortly changing to 1450). This pack is provided on at least 6 occasions by five years of age. In addition to these packs, every three and four year old child attending nursery is offered free daily supervised toothbrushing within their establishment. The toothbrushing programme is also made available to at least 20% of Primary 1 and 2 classes of schools situated with the highest level of need; these are defined through the NDIP programme. We have 193 toothbrushing programmes in NHS FV and this will be increasing to 242 in the school year 2015/2016. The Core team have also been working on developing a presentation to deliver at

school induction days, this will help to raise awareness of the importance of the toothbrushing programmes within educational establishments and dental “look books” have been designed to help the children accept fluoride varnish application and toothbrushing. In addition to toothbrushing demonstrations in schools, the core team will be commencing Oral Health talks in educational establishments reinforcing the importance of good toothbrushing habits and healthy snacks. This is to ensure consistency of message and being the familiar face that the children already know. Future developments include planning for teacher training throughout Clackmannanshire following recent success in Falkirk.

2. **Childsmile Practice** is designed to improve the oral health of the children from birth. Childsmile practice is introduced to families by the Health visitor who assesses the child’s dental health support needs at 6 – 8 wks; families requiring help to find a dentist and oral health support are referred to the DHSW. The DHSW contacts the family when their child is around 3 months old; in addition to this, the Childsmile practice team also see many families of children between the ages of 6 months and 6 years. Support is provided through home visiting, the role of the DHSW is primarily to facilitate the family to participate in the Childsmile programme through dental practice attendance and provide Key Oral health messages. Childsmile Practice team also visits local baby groups, toddler groups and ante-natal groups to promote the uptake of the Childsmile Programme and help any families register with a dentist.
- 3 & 4. **Childsmile Nursery and School team** deliver preventative care interventions for children aged 3 and upwards who are at an increased risk of dental decay. Childsmile nursery and school work with 20% of children from each health board. Educational establishments are targeted in order of those with highest proportion of children living in the most deprived local quintile as defined by the Scottish Index of multiple Deprivation. Preventative care is provided in the form of twice yearly fluoride varnish applications by Childsmile dental teams within these educational establishments. NHS Forth Valley currently has 61 Fluoride varnish establishments and this will be increasing to 71 in the 2015/2016 school year. For any further information please don’t hesitate to call (01324) 616042 ext 5760.

Community Dietetics Service

Webpages. The ‘Community Nutrition’ and ‘Choose To Lose’ Website are continuing to be popular sites, receiving over 1600 hits per month. Community nutrition site contains a range of subjects including information and links for Multi Cultural Nutrition, Maternal and Early Years, Food development and workplace nutrition. The Choose to Lose site supports a self-management approach to weight management. Further developments over the next 6 months will include additional family weight management pages.

Nutrition Campaigns & training have been used to support the uptake of Healthy Start vouchers and vitamins. Additionally a vitamin D campaign to encourage use of vitamin D supplements for pregnant and breastfeeding women, babies and children under five has been delivered

over May – September 2015. Weaning workshops have been delivered to health visitor teams, key early years staff and parents.

Clackmannanshire Healthier Lives (CHL). NHS Forth Valley Nutrition & Dietetic service works in partnership with CHL who continue to support individuals, building capacity through food development work for Community Cafes and Fruit and Vegetable Barras. They also deliver weight management groups and a range of training including food hygiene, nutrition courses and practical cooking skills training.

Paediatric and adult clinics are delivered on a regular basis from CCHC for conditions e.g. diabetes, bowel disorders, obesity, food intolerances etc.

Tackling Childhood Obesity: Max in the Middle Programme

Max in the Middle is a primary school based intervention for 10/11yr olds aiming to impact on the whole family through engaging with parents as part of the programme. Active schools coordinators support primary and secondary school children to take up sports and be more physically active (walking, cycling).

Max in the Middle is scheduled to take place in:

Tillicoultry x2, Craigbank x 2, and Abercromby x2 (September to November 2015)

Strathdeveon x2, Alva x 2, Menstrie, Fishcross, St Serfs (January to March 2016)

An estimated 325 children will be receiving 20 hours of intervention/ support from now to March 2016.

Max in the Class is scheduled to take place in:

Alva, Fishcross, Craigbank, St Mungos, Strathdevon, Tillicoultry (between September 2015 and April 2016)

An estimated 150 children will be receiving 6 hours of intervention/ education



In total, the Max programmes will be experienced by approximately 475 children (aged 8 to 11) in Clackmannanshire Schools, with over 500 family members involved. This is coupled with 19 Staff receiving 6 -12 hours training in order to consolidate the key messages provided to children and their families



A report on the impact of the programme is available from Tom Houston, Lead Officer, Public Health NHSFV

All of the above programmes provide support for the promotion of healthy weight (birth upwards) through early intervention at individual, family and community levels.

Adult Intervention and Prevention

2 Adult

Code	Description	2014/15			2013/14	2012/13	2011/12	Latest Note
		Value	Long Trend	Scottish Average	Value	Value	Value	
SAP CL1 008	Percentage of local residents who describe their mental/emotional wellbeing as 'very happy' or 'fairly happy'	90%		N/A	81%	85%	85%	
SAP CL1 012	Local residents describing their health as 'good' or 'fairly good'	89%		N/A	86%	88%	87%	

Code	Description	2013			2012	2011	2010	Latest Note
		Value	Long Trend	Scottish Average	Value	Value	Value	
SAP NHS 01e	Mortality rate due to cancer within Clackmannanshire (rate per 100,000 population) - calendar year data	349.4		334.1	362	356.8		[Data for 2014 will not be available until November 2015]
SAP NHS 01f	Mortality rate due to heart disease within Clackmannanshire (rate per 100,000 population) - calendar year data	244.1		221.8	284.8	256.4		[Data for 2014 will not be available until January 2016]

Outcomes 8 & 12 will be reported on via the Clackmannanshire 1000 survey. The following NHSFV activity supports these outcomes:

NHSFV Keep Well Programme

From April – October 2015 the Keep well service provided one to one health assessments and health improvements sessions to 509 residents of Clackmannanshire. Most of the assessments carried out were for people living in Council Tax band areas A or B (Keep well uses tax banding to define target areas of relative poverty). 140 have been followed up at 3 months to review the outcomes of the support and interventions identified during their one to one assessment:

- 27 people had reduced their alcohol intake
- 84 had lost weight
- 37 had increased their physical activity
- 6 had quit smoking (quitting for 12 weeks)

- 25 had been diagnosed with a new condition identified during their assessment

Please note that all the above outcomes have shown an increase from the previous year i.e. more positive outcomes reported despite a similar number of people seen over the same period of time as last year.

Life Coaches for stopping smoking within Keep Well. There is continued focus on establishing 2 way referral pathways with key partnerships within stop smoking services i.e. Pharmacy, Smoking cessation drop in clinics, GP practices and other key agencies supporting the 1-1 model of service delivery for clients who wish to stop smoking. It has been agreed that the 1-1 model of service delivery is achieving the best long term outcomes. At present within Clackmannanshire:

- 42 clients referred to Life coach to give up smoking (April – October 2015)
- 8 clients stopped smoking (12 weeks or longer)
- 7 clients reduced to less than 50%

Smoking Cessation Services - continuing to increase partnership working, to improve client options and chances of success. Continuing to promote awareness of Smoke Free Homes and other stop smoking initiatives.

Homestart Alloa. The Keep Well Life Coach delivered an informal awareness session on tobacco related issues in March 2015 for 13 staff and volunteers (an update on NRT and NHS e cig guidelines, Smoking Cessation Service available and smoke free homes and how to ask open questions of clients). The outcomes were as follows: Staff felt confident to discuss this with families and from this 4 parents requested further sessions. As a result, the team will develop a Smoking Cessation pack for community partners that can be linked more closely to smoking cessation services.

Tullibody Health Living - it has been agreed that Keep Well will have 3 hourly sessions available within their services every Tuesday morning. 2 clients are attending at present.

Mental Health services. The Keep Well Life coach is working in partnership with Mental Health Services in delivering Keep Well awareness sessions as part of their Stress Control programs. This has generated the following referrals over the last 6 month period:

- 31 clients referred to Keep Well Health assessment
- 3 clients referred to Keep Well Life Coach
- 1 client attending regular session at CHL free Gym

- 2 clients have been referred to GP
- 1 client regularly attending diabetic nurse

Breatheasy. The Keep Well Life Coach has established links with Breatheasy as a new partnership. Awareness sessions from Keep Well and key partners have been established for 2015/16. The following partners have agreed sessions: Princess Royal Trust Carers / CHL – Physical activity for people with breathing limitations; Mental Health Services – how to cope with anxiety and stress; NHS Health Promotion and Home Energy Scotland – fuel poverty session. The Keep well awareness session was attended by 13 people resulting in 10 clients being referred for a full health assessment and 4 clients being given brief stop smoking advice

Health Promotion Service

The NHSFV Health Promotion Service has developed and delivered training for Promoting Mental and Emotional Wellbeing including Introduction to Child and Adolescent Mental Health and Wellbeing, Scotland's Mental Health First Aid, Self Harm, Blood Born Virus (BBV) Awareness Raising, Mental Health in the Workplace and Mental Health Workshops for Young People. Substance Training is also delivered, including Tobacco and Cannabis, Substance Misuse Education Framework, FASD, Overdose Awareness Training, Street Sense Teaching Pack, Gone Teaching Pack, Sexual Health, including SHARE training for teachers, Sexual Exploitation Awareness, Feel Think Do.

In partnership with a range of NHS/LA colleagues, **delivery of Stress control groups** takes place throughout Clackmannanshire for people with mild to moderate anxiety and depression. The number of attendees of Scotland's Mental Health First Aid training (April – October 2015) are:

Total attended courses in FV - 143

Total attended from Clacks area - 30

NHSFV Stop Smoking Service

The target for Smoking Cessation for 2015/16 was reviewed by the Scottish Government in light of the previous target rates (nationally, 58% of the previous quit target for Scotland was achieved across Health Boards for 2014/15). A more realistic 219 quits at 12 weeks for clients living in SIMD 1 & 2 areas has been agreed for Forth Valley for 2015/16. In addition, quits achieved by all prisoners residing within a Forth Valley prison will contribute to the target from 1st April 2015.

It should be stressed that whole population quit successes for Smoking Cessation are not included in this target of 219 quits, therefore this does not reflect the total number of quits that may be achieved in Forth Valley during 2015/16. As the target is focused on quit rates at 12 weeks, there is a 16 week delay in reporting the data (time lag).

Smoking Quits for Clackmannanshire and Forth Valley

The figures below are for the community clinics that we have based in Clackmannanshire council area, along with the other CHP areas, and FV wide services along with pharmacy. Data is for April – October 2015.

CHP	Set Quit Date	4 Week F/Up Total Quits	12 Week F/Up Total Quits	HEAT (SIMD 1 & 2) 12 Week F/Up Quits
CHP				
Clackmannan	21	5	4	3
Falkirk	58	13	7	6
Stirling	14	9	7	6
Totals	93	27	18	15
FV Wide				
FVRH	41	13	12	5
Falkirk Pregnancy	15	5	3	3
GP SCI Referrals	6	3	2	1
Keepwell Project	11	7	6	6
Workplace	1	1	1	0
Totals	74	29	24	15
Prisons				

Prison - Cornton Vale	17	12	2	2
Prison - Glenochil	33	4	0	0
Prison - Polmont	25	4	2	2
Totals	75	20	4	4
Pharmacies	482	143	49	25
Total Q1	724	219	95	59

Smokfree Homes and Cars

A strategy group has been convened and an inaugural meeting took place on 10th November. The steering group will be a sub group of the NHSFV Tobacco Action Group (TAG) and lead the strategic partnership within Forth Valley in relation to second hand smoke, responsible for:

- Implementation of national and local (Forth Valley) strategies and campaigns
- Liaison with stakeholders to ensure that the issue of second hand smoke is embedded in all plans and strategies produced by Forth Valley, Community Planning Partnerships and other relevant public sector and voluntary sector documents
- Creation of a steering group Action Plan

Membership of the steering group will be drawn from:

NHSFV, Falkirk Council, Stirling Council, Clackmannanshire Council, 3rd Sector, Forth Valley College, FV Alcohol & Drugs Partnerships, Fire Scotland and other public and private organisations

Alcohol and Drug Partnership for Clackmannanshire

The Clackmannanshire ADP and the Stirling ADP have now merged to be one strategic partnership covering the two areas although separate reports will continue to be produced for the respective Community Planning Partnerships as per Scottish Government guidance. The ADP Support Team now comprises of a Lead Officer and two Project Officers covering the two Local Authority areas which has increased capacity of the staffing compliment. Workforce development is a key strategic priority for the ADP and in Clackmannanshire priority groups have been identified as Social Work (Children's and Criminal Justice), Trades staff, Communities staff and HR. Positive working relationships continue with Housing colleagues to build on the values and attitudes training previously delivered in this setting.

Support to young people misusing drugs and / or alcohol is now delivered by Barnardos and families continue to have support available to them through the Forth Valley Family Support Service. A crucial role for the ADP Project Officer has been to raise the visibility of all support services available in Clackmannanshire and to link with other community services that may be supporting individuals and families affected by drug and / or alcohol use.

The ADP continues to manage the Alcohol Brief Intervention Programme (ABI) for adults and young people. In 2014/15, 2348 ABI screenings took place in priority settings within Clackmannanshire with a further 521 screenings recorded within wider settings. The 2014/15 ADP annual report and the 2015 - 2018 ADP Delivery plan can be found at www.forthvalleyadp.org.uk

Physical activity at a strategic level

The Lets Make Forth Valley More Active group has ceased operating. The newly appointed Senior Health Promotion Officer for Physical Activity and the Consultant in Public Health Medicine with the strategic lead for physical activity, plan to support Clackmannanshire CPP with their plans for physical activity/ active living.

Reducing Fuel poverty

LearnPro module for Energy efficiency:

Working in partnership with Home Energy Scotland (HES), colleagues have developed a Learn Pro module for all NHS staff to access that is about being more energy efficient and knowing where to go for credible advice and support.

Awareness raising

HES have committed to attending FVRH for 3 days each month between March 2015 – January 2016 to promote awareness and support to the public and staff. Data for March 2015 indicates there were approximately 120-130 engagements (where people left their contact details with HES to follow up). Consideration was also given to similar sessions being held in Stirling and Falkirk Community Hospitals, but colleagues advised that similar initiatives resulted in limited access to the public and have not gone ahead.

Outcomes from having our partners from Clackmannanshire Council Energy Advice team, base themselves in CCHC every week to talk to staff and patients about staying warmer over winter and the range of support that the team members can provide have shown:

- 20 referrals to date
- Community nursing staff are now referring patients to the team.
- There have been 50 applications for Warm Home Discount where DLA benefits were the qualifying criteria (Warm Home Discount =£140). So for 50 people that is £7,000 saved on their energy bills.


Training options in partnership with HES are included in the Health Promotion training brochure and NHSFV monthly training e-bulletin. 24 staff have benefitted from Fuel efficient driver training thanks to partnership working with HES

Linking in with local Community Planning structures. Colleagues will present the above work in partnership to the Stirling CPP Tackling Poverty and Inequalities Group (TPIG) in November. A similar approach will be made to the Community Well being and Safety Partnership Group for Clackmannanshire CPP.

All of the above NHS activities contribute to the prevention of cancers and heart disease at an individual, family and community level through individualised support and policies

Prevention and early intervention in Older age people

3 Older People

Code	Description	2013/14			2012/13	2011/12	2010/11	Latest Note
		Value	Long Trend	Scottish Average	Value	Value	Value	
ADC ADA B3a	The percentage of older people (aged 65+) with intensive care needs receiving care at home, according to the figures published for the Local Government Benchmarking Framework (LGBF), provided by the Scottish Government	47.3%		34.3%	44.7%	44.1%	37.6%	[Data for 2014/15 will not be available until January 2016]

Anticipatory Care for older adults

The Anticipatory Care Nurse led team continues to provide person centred, holistic outcome focused assessments with patients in Clackmannanshire and Stirling who are aged over 65 years. Patients are identified by GP's – with a particular focus on those with long term conditions and who are housebound. Clients are from a mixture of rural and urban areas, with a focus on deprivation. A recent development has included GP's identifying over 65's who have had unscheduled hospital admissions. Clients are supported for as long as they need using an anticipatory care plan and updating the 'key information summary' for their GP. This ensures that clients who are seen by NHS colleagues anywhere else in Forth Valley have a fuller picture of the client's conditions and needs.

The AC team are now also receiving referrals from social work and third sector colleagues, plus the acute sector (via Advanced Nurse Practitioners). Further developments for the service are to consider any age of client in order to support the wide range of issues that may face people (e.g. care needs for a young disabled patient); and supporting nursing homes to reduce hospital admissions. Since the programme began there have been over 500 contacts. For Clackmannanshire there are currently 50 active/ pending clients.

Clinical Services Review for NHSFV

Our current healthcare strategy is due to be updated in 2014, so work has been progressed to develop a new strategy which will set out our plans and priorities for the next five years from 2015 – 2020. To help inform this new strategy, a detailed review of clinical services has been

carried out across the organization – across 8 workstreams. This will identify what we need to do to meet the changing needs of our local population, keep pace with future demand and deliver the Scottish Government's [2020 Vision](#) for healthcare.

This aims to ensure that, by the year 2020, people across Scotland are able to lead longer, healthier lives at home or in a homely setting with the majority of healthcare delivered in a community setting. If people do require hospital care, day case treatment should be the norm and there will be a focus on ensuring that patients return home as soon as possible with the right support to help prevent readmission.

As part of the Clinical Services Review, a detailed report has been produced which outlines future trends in the size and age of our local population, estimates future service activity and forecasts future levels of several common diseases and long term conditions. It also examines other factors which affect the health and wellbeing of local people such as poverty, poor housing, unemployment, smoking, alcohol consumption and exercise. This important information and analysis sets out a compelling case for change which will help inform how we plan and deliver services to meet the future healthcare needs of our local population, keep pace with demand and deliver the Scottish Government's [2020 Vision](#) for healthcare.

The 8 workstream reports are due to be published shortly and the healthcare strategy for 2015-2020 will be published in 2016.

Additional Theme: Social Influence Approach – a partnership programme

<http://www.sks.org.uk/topics/drugs-and-alcohol/innovation-and-ways-of-working.aspx>

The social influence programme began in 2007 with a question "**How can we reduce the damage caused by alcohol and drugs by 50% by 2025?**" The question was asked by the Scottish Parliamentary Group Scotland's Future Forum to all ADPs. At that time there was a National Association of Alcohol and Drug Action Teams. The Association was invited to look beyond Scotland to find what was working elsewhere and what might work here. Professor Wesley Perkins, one of the leaders in the 'Social Norms' field, agreed to come to Scotland as a keynote speaker at an event held at the Scottish Parliament in 2007. Following that event, and a parliamentary debate on the approach, Forth Valley ADP agreed to develop work to test the transferability of the programme to a Scottish secondary school setting.

Following 2 years of research, recommendations were made to modify the programme in a way that would achieve the following:

1. A much shorter intervention suitable for use with an existing peer group such as 'class'

2. Data collection and analysis that could be carried out by pupils themselves as part of the intervention.
3. A model of delivery that did not depend on external facilitation, but could be delivered by school or youth work staff.
4. A better fit for the curriculum for excellence.

The linked report shows highlights and the programme evaluation describes what has been achieved using a shorter 'social influence' approach. [A 6 minute film](#) is also available showing pupils' challenging the negative perceptions of adults from their communities.

Future Plans for the Social Influence Approach. FV ADP plans to continue to focus on 3 aspects of sustainability:

1. Developing Resources:

- A Guide to Delivering a Social Influence Programme with Young people in Scottish schools or community settings.
- Increasing choice and flexibility within the delivery model by producing thematic surveys for general use e.g. tobacco and cannabis, alcohol and respect, drugs, gangs and carrying knives.
- Simple worksheets to support discussion of results.

2. Developing the Workforce

- Developing the role of campus police officers.
Developing the role of pastoral school based staff.
- Supported delivery in key schools.

3. Expanding the evidence base & testing the transferability of the model for use within a Young Offender setting. This work will seek to answer the following questions:

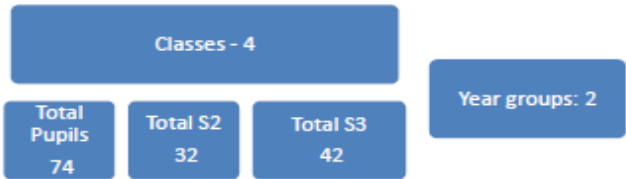
- What are the barrier and opportunities of working within this setting?
- Do misperceptions exist among young offender populations? If so:
- What is the nature and extent of these misperceptions?
- How should these be measured?
- What is the most effective way to feedback results?

4. Is the approach transferable to a young offender setting?

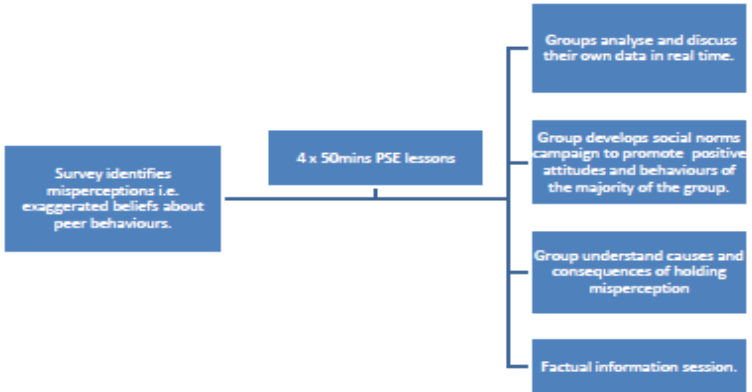
- If yes, what modifications should be made?

Alva Academy Social Influence Programme 2014-15, Overview of Findings

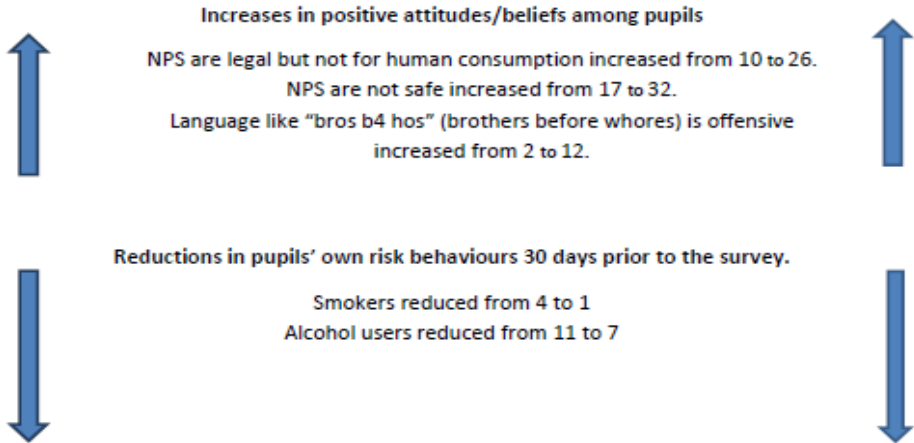
1. Participants



2. Intervention



3. FINDINGS S3 (6 months after the intervention)



4. FINDINGS S2 (6 months after the intervention)

