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|  **18th South West Public Health Development School** ***Public Health – Making It Happen*** Dartington Hall, Devon24-25 September 2014 |

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| **Day One Programme - Wednesday 24th September 2014** |
| **0945** | **Registration opens with tea and coffee** | **Great Hall foyer** |
| **1030** | **Welcome and opening ‘*Putting public health at the heart of all we do’*****Maggie Rae, DPH Wiltshire; Virginia Pearson, DPH Devon; Sohail Bhatti, DPH Bristol;** **Bruce Laurence, DPH Bath & NE Somerset; Becky Pollard, DPH North Somerset** | **Great Hall** |
| **1100** | **Workshop 1a - *Social media: when a viral infection is good for health - Utilisation of Facebook*** | **Upper Gate House** |
|  | **Workshop 1b - *The art and science of effective collaboration on transport planning and health*** | **Griffiths Room** |
|  | **Workshop 1c - *Beyond sexual health: Developing an LGB&T health needs assessment & strategy*** | **Dukes Room** |
|  | **Workshop 1d - *Balancing Act – the role of public health in health and justice*** | **Holand Room** |
|  | **Workshop 1e - *Late HIV diagnosis through screening & testing & the case for routine testing*** | **Ship Studio** |
| **1230** | **Lunch** | **Great Hall** |
| **1330** | **Workshop 2a - *Primary Drug Education (It ain’t what you do, it’s the way that you do it!)*** | **Upper Gate House** |
|  | **Workshop 2b – *Look after your happy bugs: Social marketing and antimicrobial resistance*** | **Griffiths Room** |
|  | **Workshop 2c - *Reducing the risk of suicide and depression due to the recession*** | **Ship Studio** |
|  | **Workshop 2d - *Every step counts - Are people losing their love of the purposeless walk?*** | **Dukes Room** |
|  | **Workshop 2e *- Implementing nutritional recommendations for children*** | **Holand Room** |
| **1500** | **Tea and coffee available for plenary** | **Great Hall** |
| **1500** | **Plenary introduction - Jenny Harries, Public Health England****Plenary - Hazel Stuteley OBE, Connecting Communities (C2) ‘*From isolation to transformation’*** | **Great Hall** |
| **1615** | **Fringe a - *FPH Local Affairs Committee*** | **Upper Gate House** |
|  | **Fringe b - *Social media & public health: Twitter basic skills*** | **Holand Room** |
|  | **Fringe c - *Taking a stand: Challenging sedentary working*** | **Griffiths Room** |
| **1700** | **Free time** |  |
| **1830** | **Pre-dinner drinks** | **Garden by Great Hall** |
| **1900** | **Seating for dinner** | **Great Hall** |
| **1915** | **Pre-dinner speaker - John Middleton, Vice President, Faculty of Public Health**  | **Great Hall** |
| **1930** | **Dinner**  | **Great Hall** |
| **2100** | **Music and entertainment - Bristol Afrobeat Project** | **Great Hall** |

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| **Day Two Programme - Thursday 25th September 2014** |
| **0800** | **Breakfast for guests** | **White Hart** |
| **0915** | **Registration for day two delegates**  | **Great Hall foyer** |
| **0945** | **Plenary introduction - Shona Arora, Public Health England****Plenary – Guy Watson, Riverford founder ‘*Making it Happen’***  | **Great Hall** |
| **1030** | **Morning break with tea and coffee** | **Great Hall foyer** |
| **1045** | **Workshop 3a - *I wouldn’t have missed it for the world: Flood memories, knowledge & resilience*** | **Upper Gate House** |
|  | **Workshop 3b - *Approaches to achieving better inclusion of people with dementia*** | **Griffiths Room** |
|  | **Workshop 3c - *Permitting and prohibiting the use of electronic cigarettes*** | **Ship Studio** |
|  | **Workshop 3d - *Making public health intelligence work for you - we are all responsible*** | **Dukes Room** |
|  | **Workshop 3e - *Increasing drug misusers’ uptake of Hepatitis B immunisation*** | **Holand Room** |
| **1215** | **Lunch** | **Great Hall** |
| **1315** | **Workshop 4a - *Child poverty in the UK***  | **Griffiths Room** |
|  | **Workshop 4b - *Developing local liver disease needs assessments*** | **Holand Room** |
|  | **Workshop 4c - *What can GPs do for Public Health - What can Public Health do for GPs?*** | **Dukes Room** |
|  | **Workshop 4d - *Advocacy skills in the era of internet and social media*** | **Ship Studio** |
|  | **Workshop 4e - *New immunisations & developments: how can we make the systems work better?*** | **Upper Gate House** |
| **1445** | **Plenary debate (with tea and coffee) – ‘*Collaborating with business: Can public health make it work?’*****Clare Pettinger, Plymouth University; Ann Evans &** **Olivier Lechanoine, Danone;** **Judy Moore, Infant & Toddler Forum; Amy Bird, Public Health Wiltshire** | **Great Hall** |
| **1600** | **Finish**  |  |
| **1615** | **Coach to Totnes train station** | **Outer courtyard** |

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**WEDNESDAY 24TH SEPTEMBER**

**WORKSHOP INFORMATION**

**WORKSHOP SESSION ONE**

**11:00 - 12:30**

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| **1A - Social media: When a viral infection is good for health – Utilisation of Facebook for health promotion, behaviour maintenance and community capacity building** |
| **Aims:** To demonstrate the application of social media as a tool for: * Health Promotion - Promotion of breastfeeding
* Maintaining healthy behaviours - Supporting mothers to maintain breastfeeding
* Community capacity - Increasing the number of breastfeeding mothers who are connected within a community and accessing support

 To provide attendees with knowledge for application in own programme areas.**Learning Outcomes:**On completion of the workshop, delegates will:* Have an understanding of the importance of breastfeeding, especially for reducing health inequalities
* Have an increased / consolidated knowledge of social network theory
* Have examples of social media in action for health that can be used in their own programme areas
* Have learned how social media has been utilised in North Somerset to support breastfeeding mothers:
	+ 24 hour peer support
	+ Accessible format for young mothers
	+ Accessing specialist breastfeeding advice
	+ Linking “isolated” breastfeeding mothers together
* Have had the opportunity to think about their own social media public health project, and outline a set of guidance for service operators/users

The workshop will include presentations about:* Breastfeeding and its importance to health, and reducing health inequalities
* Social networks - theory, research and real world examples (RSA social mirror)
* Social media - when viral infections are good; examples of social media in action for health promotion; setting up social media breastfeeding support groups and developing guidance (a bottom up approach); “I can’t use Facebook at work” - how to remove barriers to using social media

The workshop will also include a series of activities and interactive exercises.  |
| **Workshop leaders:**Samuel Hayward, Health Improvement Specialist, North Somerset CouncilHelen Yeo, Senior Public Health Analyst, North Somerset Council |

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| **1B - The art and science of effective collaboration on transport planning and health – finding the shared agenda** |
| **Aims:** To share and explore ideas and opportunities for effective collaboration with transport planning colleaguesTo commence with some exploration of fundamental issues including transport policy drivers and ways of working as barriers to be worked around, and policy opportunities. To work through ideas centred around the co-benefits agenda to ensure full engagement. To consider joint training sessions and other means through which to increase trust and relationship building as part of on-going work**Learning Outcomes:** The planned outcome of the session is to have identified some specific issues with which public health staff can engage better with transport planning colleagues –a ‘top 5 offer’ list of key areas where the agenda is clearly shared with transport plannersThe session will draw from examples in Bristol and elsewhere in the country (including work in London and Plymouth). A brief summary by public health colleagues from Plymouth City Council will be given about the ‘Plymotion’ – a personalised travel planning programme delivered in partnership between Transport and Health colleagues in order to maximise the health and well-being benefits of the proposals.The workshop will also include a brief exercise in order to ascertain levels of trust and rapport with transport colleagues in seeking to break down barriers including silo working. |
| **Workshop leaders:**Adrian Davis, Transport and Health Specialist, Bristol City CouncilSarah Lees, Consultant in Public Health, Plymouth City Council Rosemary Starr, Transport Team, Plymouth City Council |

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| **1C – Beyond sexual health: Developing an LGB&T health needs assessment and strategy** |
| **Aims:** To consider the health needs of LGB&T people and the challenges in developing a Health Needs Assessment and Strategy for this population.**Learning Outcomes:*** Understand the health needs of LGB&T people and the social/political/cultural context
* Understand the complexity in undertaking an HNA for a protected characteristic that cross-sects society
* Understand how being part of a sexual or gender minority affects individuals across society, who may or may not identify with an LGB&T ‘community’
* Principles to apply to other complex needs assessments where health intersects with social and cultural factors
* Delegates to consider how they could improve LGB&T health in their area
 |
| The workshop will include introductory group work to identify the challenges involved in assessing health need based on sexual orientation and gender identity. There will be discussion of the Devon Health Needs Assessment and Strategy process – engaging stakeholders, local survey, literature review findings, joint strategy and commissioning, examples of work.  |
| Small group discussions will be based on the questions:* Reflecting on the process described above, is there anything you would do differently?
* What is the challenge for public health to improve LGB&T health?
* Do you have any local examples of good practice (and evaluation methods)
 |
| **Workshop leaders:**Sarah Bird, Advanced Public Health Practitioner, Devon County CouncilSarah Aston, Sexual Health and Targeted Prevention Team Leader, The Eddystone Trust |

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| **1D - Balancing Act – the role of public health in health and justice** |
| **Aim:** To explore the role of the public health system in identifying and meeting the health and social care needs of people in prisons, transforming rehabilitation, addressing health inequalities and promoting health among people in contact with the criminal justice system**Learning Outcomes:*** To learn about and understand the role of Public Health England, and public health staff as health & social care commissioners, service providers, and those in academic and third sector organisations, in identifying and meeting the needs of those in prison and in contact with the criminal justice system in the community and places of prescribed detention
* To learn about practical examples of work in the South West and identify ways in which this learning could be applied in participants’ own organisations. This will include skills in undertaking health needs assessment in places of prescribed detention, prisons and probation services and establishing peer mentor services

The workshop will use a mix of presentation and group discussion. Discussion will focus on how public health staff can work across organisations to prioritise the health of people in contact with the criminal justice system and address the health inequalities experienced by them. |
| **Workshop leaders:**Clive Gray, Senior Health Promotion Specialist, Bristol Public HealthRachel Campbell, Public Health Specialist, Health and Justice, Public Health EnglandSarah Weld, Public Health Specialty RegistrarZoe Clifford, Public Health Specialty Registrar |

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| **1E - Addressing late HIV Diagnosis through screening and testing and the case for routine testing in some settings** |
|  **Aim:** To review prevalence data for the south west and present the local and national evidence for developing local testing strategies whilst identifying opportunities for routine testing **Learning Outcomes:*** Knowledge of prevalence data for the south west
* Understanding of the local and national evidence for expanding HIV testing and how this impacts local HIV testing strategies and routine testing in some settings
* Provide tools for developing local testing strategies

The workshop will focus around a data and evidence presentation with the opportunity for group discussion and data analysis. |
| **Workshop leaders:**Norah O’Brien, Sexual health facilitator, Public Health EnglandElizabeth Tempest, Field Epi Service, Public Health EnglandMargaret May, University of Bristol  |

**WEDNESDAY 24TH SEPTEMBER**

**WORKSHOP INFORMATION**

**WORKSHOP SESSION TWO**

**13:30 - 15:00**

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| **2A –** **Good Practice in Primary Drug Education (It ain’t what you do, it’s the way that you do it!)** |
| **Aim:** To introduce participants to evidence based strategies for primary aged drug education interventions and to understand why traditional methods of drug / health education aren’t always effective**Learning Outcomes:** Participants will understand:* Drug Education within the context of primary PSHE (Personal, Social, Health and Economic education)
* The correlation between positive peer relationships and reduced substance misuse
* The theory underlying the social norms approach to drug / health education and practical applications in schools

The workshop will be a mixture of presentation incorporating Qwzidom (an interactive voting system which all participants will use); paired discussion work and small group work using PSHE style activities (e.g. diamond nine, circle time, draw and write etc). All delivered with enthusiasm and a sense of humour! |
| **Workshop leader:**Pete Kirby, Programme Development Manager, Coram Life Education |

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| **2B – Look after your happy bugs – a social marketing approach to antimicrobial resistance** |
| **Aim:** To demonstrate the application of Social Marketing principles to the development of a behaviour change intervention in Devon**Learning Outcomes:** By the end of the workshop delegates will have:* been reminded of the priority of antimicrobial resistance
* consolidated their knowledge of the Social Marketing method
* learned how these have been applied to a case in Devon that addresses the challenges of behaviour change sustainable use of antibiotics in the community
* practiced applying the outputs of scoping activities in a desk top exercise
* develop an intervention based on the theory of ‘exchange’ & outline how they would evaluate it
 |
| The workshop will include presentations on:* Sustainable Antibiotics Strategy and Social Marketing methods and behaviour change theory
* A review and findings of the Scoping Stage activities:
* lit review
* stakeholder mapping
* expert advisory group
* market research for engagement and segments
* development of insights and profiles
* the behavioural proposition
 |
| Activities will include the discussion and use of the insights and profiles produced by the Scoping Stage to generate ideas for a behaviour change intervention that responds to the behavioural proposition based on the theory of exchange.  |
| **Workshop leaders:**Martin White, Advanced Public Health Practitioner, Devon County Council Ruth Dale, Public Health Programme Manager (Social Marketing), Devon County Council |

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| **2C – Reducing the risk of suicide and depression due to the recession: local and national responses** |
| **Aims:** * To update participants on local and international research findings on the impact of the Great Recession on mental health and self-harm/ suicide and
* To pool participants’ expertise to consider appropriate interventions to offset recession-related impacts on mental health in future economic crises

**Learning Outcomes:** * Improved knowledge of the impacts of economic recession on mental health and the pathways leading to increased risk
* Improved knowledge regarding the evidence base for specific interventions for people affected by the recession
* Shared knowledge of how other LAs / regions have responded to offset the impact of the economic recession on mental health
* An understanding of how researchers have responded to policy relevant research questions
* To generate and develop ideas for an intervention(s -) including to whom and when best the support should be offered

There is evidence that, as with previous recessions, the incidence of depression, self-harm and suicide have increased. At present there is limited information to guide healthcare responses to reduce the impact of the recession on mental health. NIHR funded qualitative and quantitative research carried out by the University of Bristol and other collaborating universities has begun to shed light on these issues and we are beginning to develop our ideas for pragmatic interventions to pilot to offset the adverse impact of recession / job loss on mental health. We would like to update workshop participants on our findings and engage them in considering appropriate interventions to pilot in the South West. During the workshop, the topic will be introduced and evidence reviewed during a 20-25 minute presentation. The remainder of the session will involve small group work and whole group discussion with feedback to identify possible intervention(s); also how, when and to whom the support should be targeted. |
| **Workshop leaders:**David Gunnell, Professor of Epidemiology, University of BristolMaria Barnes, Research Associate, University of Bristol |

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| **2D – Every Step Counts - are people losing their love of the purposeless walk?** |
| **Aims:** To reconnect public health with walking as an important activity to improve physical and mental health:* To consider the current evidence for walking to improve health
* To understand the current landscape of walking programmes nationally
* To share the local perspective of leading a scheme and procuring to maintain, sustain and develop walking programmes
* To share good practice on promoting and facilitating walking
* Concluding with a view of public health’s role in the future of walking in the South West
 |
| **Learning Outcomes:** * To understand the value of walking, giving a national and local perspective
* To learn from the procurement experience of one local authority
* To share good practice and provide ideas to increase action to increase walking to improve health, as a mode of transport and to promote wellbeing and creativity

The workshop will have three parts and include a walking workshop and showcase of tools to promote walking Part 1 - to include a potted history of walking in the UK and walking for health programmes, with an overview of the evidence for walking to promote health and wellbeing; Walking for Health programmes (national); Key successes and lesson learnt from developing a national programme for walking and how this will shape the future support for local schemes. Part 2 – a focus on the local delivery of Walking for Health. To include the experience of delivering local schemes in South Gloucestershire; how many walkers/volunteers we have and how the programme works on the coordinators level as well as for the volunteers; how we target and how we impact individuals; the importance of public health involvement; sharing the threatened demise of Devon walking programmes and the procurement process that followedPart 3 – walking and interactive workshop. Sharing views on the value of walking through themed walking in groups, to be followed by a workshop on increasing participation and promotion using examples such as on-line tools: <http://www.getactivedevon.co.uk/?id=2177> and feedback from participantsThe workshop will conclude with a view of public health’s role in the future for walking in the UK.**Please note: we will be walking outside in the beautiful grounds so please dress appropriately** |
| **Workshop leaders:**Tina Henry, Consultant in Public Health, Devon County CouncilJackie Hayhoe, Walking for Health Programme Manager, Ramblers UK Carly Urbanski, Walking for Health Project Officer, South Gloucestershire Council |

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| **2E – Supporting health and early years practitioners to implement nutritional recommendations for children 0-5 years** |
| **Aims:** To share learning and experiences from working with the early years sector with promoting good nutrition for children 0-5 years, including feeding babies in the first year (breast feeding, bottle feeding and weaning) and feeding children 1-5 years.**Learning Outcomes:** Encouraging children to eat well and learn about food in their early years sets the foundations for their future health and wellbeing. Early years practitioners from both health and early years settings provide an ideal opportunity to support every child enjoy a varied diet and learn about food. This session will support participants with putting policy into practice – covering the nutritional guidance in the Healthy Child Programme, UNICEF Baby Friendly Standards, Children’s Food Trust voluntary food and drink guidelines and the Early Years Foundation Stage Framework. In addition there will be examples of ways to engage parents and children in learning about food using resources that promote good nutrition. |
| The workshop will include a brief overview of the policy and guidance for context including and the Healthy Child Programme, ‘Eat Better, Start Better’, Early Years Foundation Stage Framework and Ofsted requirements. It will present the relevant health data available for 0-5 years supporting intervention and include an overview of the resources developed including how they were developed, how they are being used and how they support putting policy into practice. In Bristol we have developed a range of visual resources that have scope for use with practitioners, parents and children to support implementation of nutritional recommendations.  During the workshop there will also be a series of activities for participants to have a hands-on opportunity to experience the resources and consider the scope for their use.  At the end of the session you will be given samples of the resources to take away with you. |
| **Workshop leaders:**Jessica Williams, Senior Health Promotion Specialist, Bristol City CouncilNicki Symes, Breastfeeding Co-ordinator, Bristol City Council |

**WEDNESDAY 24TH SEPTEMBER**

**FRINGE SESSIONS**

**16:15 - 17:00**

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| **FRINGE A – FPH Local Affairs Committee**  |
| **Aim:** Delegates will have an opportunity to meet the CEO of the FPH, to explore areas of relevance, discuss the Faculty’s draft strategy and the manifesto and identify the opportunities they present |
| **Learning Outcomes:*** To better understand the proposed strategy of the Faculty
* To be able to consider how the Faculty can support your professional practice and how you can contribute to the work of the Faculty
 |
| The workshop will take the form of a discussion group. There will be a brief exploration of the scope of the strategy and manifesto followed by a discussion within the group. Whilst the discussion may be framed by the strategy the discussion will provide an opportunity for members to raise other areas where their professional activity and the work of the Faculty could be complementary. Details of the draft strategy can be found at: <http://www.fph.org.uk/Strategy_Consultation_Exercise> |
| **Session facilitators:**David Allen, CEO, Faculty of Public Health (to join the discussion via Skype)Sally Pearson, Director of Clinical Strategy, Gloucestershire Hospitals NHS FTJohn Middleton, Vice President, Faculty of Public Health  |

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| **FRINGE B – Social media and public health – Twitter basic skills** |
| **Aims:** This workshop is designed for those who want to learn the basic skills for using Twitter.The aim is for those taking their first steps on Twitter to learn how to use Twitter as an effective tool for public health. It will include important guidance on how to use Twitter safely and responsibly.**Learning Outcomes:** * Better understanding of Twitter
* How to take the first steps in starting to use it

An outline presentation on Twitter will be followed by step by step collective working through the first steps in using Twitter. |
| **Session facilitators:**Sarah Weld, Public Health RegistrarKyla Thomas, NIHR Academic Clinical Lecturer and Public Health Registrar |

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| **FRINGE C – Taking a stand: Challenging sedentary working**  |
| **Aims:** To consider the health risks of prolonged sitting and explore how to promote a more mobile workforce, in a lively, active session**Learning Outcomes:** * To share thoughts and ideas about how to inject more physical activity into our sedentary work lives
* To try out some ways that physical activity and yoga can be used in the workplace setting
* To consider how Public Health can act as agents of change and lead by example….and
* To have some fun in the process

If fine the workshop will take place in the grounds of Dartington Hall. If wet then indoors but in a room with minimal seating. Participants will be encouraged to feed past and future best practice into the PHE physical activity work stream. |
| **Session facilitators:**Lucy O’Loughlin, Public Health Specialist, Devon County CouncilNicola Glassbrook, Senior Public Health Officer, Devon County Council  |

**THURSDAY 25TH SEPTEMBER**

**WORKSHOP INFORMATION**

**WORKSHOP SESSION THREE**

**10:45 - 12:15**

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| **3A – ‘I wouldn't have missed it for the world’: Flood memories, lay knowledge and resilience** |
| **Aims and Learning Outcomes:** * To share, and explore the health implications of, research results from the ESRC Sustainable Flood Memories project that worked with flood risk communities in four different settings after the 2007 floods on the lower Severn, Gloucestershire. The project explored the relationships between flood memory, lay knowledge and different frames for resilience.
* To exchange digital stories co-created with members of these communities that capture voices with intertwined messages that reflect on/ encourage dialogue about different types of individual and community resilience. Themes include psychological and emotional resilience, value of community networks, and active remembering.
* To reflect on the implications of this research/ knowledge exchange for community resilience and individual well-being in recently flooded communities in the SW.

The workshop will be participatory and will explore both potential applications of the research and integrated digital story archive resource, as well as future research needs within flood risk communities in the SW (linked to public health development and practice). |
| **Workshop leader:**Professor Lindsey McEwen, Co-Director of Centre for Floods, Communities and Resilience and Professor of Environmental Management, University of the West of England, Bristol |

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| **3B – Approaches to achieving better inclusion of people with dementia** |
| This facilitated workshop presents two viewpoints that represent quite different ways of understanding the issue of dementia - **dementia-friendly communities** and **social inclusion**. A better environment, greater involvement in neighbourhoods and communities, and an improved social response to dementia are widely held aspirations. This workshop will help participants understand the two different approaches, the role each plays in shaping the inclusion of people with dementia, and the different results of such actions both for people with dementia and for our neighbourhoods and communities. |
| **Learning outcomes:** Through engagement with the presentations and discussion, participants will:* Understand the differences between ‘dementia-friendly communities’ and social inclusion perspectives
* Become able to identify and interpret the ethos/perspective underlying a service/intervention that they encounter
* Be better able to make judgements about proposed and existing services and community interventions in relation to dementia
* Begin to understand dementia in terms of age equality and make connections with other equalities issues

Be better able to take appropriate action to improve the response to dementia in their area |
| **A collective, social inclusion approach to dementia**The movement promoting ‘dementia-friendly communities’ has gained popularity over the last few years and is working hard to promote better awareness of dementia and support for people and their families from their neighbourhoods and communities. However, it tends to adopt the ethos and language of illness and ‘care’ that is more usual in services than in neighbourhood and community development. The Bristol Dementia Inclusion Programme has published a Vision - a new perspective which begins to develop a collective theory of dementia. The Vision draws on the ideas and learning from social inclusion, citizenship, ageing well and disability equality. The Vision has also informed a set of important and innovative neighbourhood and community projects which promote better inclusion. |
| **Devon’s approach to becoming a dementia-friendly county**The Devon Dementia Care and Support Partnership was established in early 2013 and is committed to improving the lives of people with dementia and their families living in Devon by sharing, learning and collaborating across our diverse organisations and communities and the many organisations providing services within them. Its aims are to: |
| • Develop Devon as a dementia-friendly County • Facilitate improved collaboration, shared learning & communication across all sectors involved• Provide and/or promote the voice of people with dementia and their carers• Improve awareness and understanding of dementia• Improve training, quality and practice in key areas within and across these sectors• Communicate and encourage Partnership activity through a variety of media.Devon’s work as a Partnership has been recognised at a national level and will shortly be published as an exemplar of good practice by the Civil Society and Voluntary Sector group of the Prime Minister's Champion Group on dementia-friendly communities. |
| **Workshop leaders:**Ian Popperwell, Bristol Dementia Inclusion Programme Gill Brookman, Health Improvement Projects Manager, Bristol City CouncilJenny Richards, Joint Commissioning Manager, Devon CCG/Devon County Council |

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| **3C – Permitting and prohibiting the use of electronic cigarettes** |
| **Aim:** To share key learning points in considering and applying the evidence of the use of electronic cigarettes in employment and workplace policies to support smokers to stop or reduce their use of tobaccoEmployers are facing a range of challenges in developing a local policy on how to manage the use of electronic cigarettes in the workplace. Many people wish to use these products at work and in public places to quit or temporarily abstain from smoking, but allowing this can pose challenges which need to be considered and managed. There are also situations where it would not be practical or sensible to permit the use of e-cigarettes, but deciding on these and securing agreement and compliance requires a careful consideration of the available evidence. To support local authorities in addressing these issues ASH and the CIEH have been working with a number of pilot councils through the process of policy development and implementation on the use of electronic cigarettes and other nicotine containing products (NCPs) in the workplace and public places. |
| Through interactive involvement with the participants we will:* identify the evidence upon which policies on NCPs should be based
* explain the role of NCPs in supporting tobacco harm approaches
* explore options for policies on the use of NCPs in the workplace and public places in the context of other personnel and public health policies.
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| **Workshop leaders:**Ian Gray, Principal Policy Officer, Chartered Institute of Environmental HealthHazel Cheeseman, Policy and Campaigns Manager, Action on Smoking & Health  |

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| **3D – Making public health intelligence work for you – we are all responsible** |
| **Aims:** * To explore how participants can gather intelligence through PHE networks to inform public health practice
* To explore how participants might usefully contribute to improving access, use and design of PHE’s public health intelligence systems
 |
| **Learning Outcomes:** * Raised awareness regarding PHE’s public health data tools and knowledge intelligence networks
* Raised awareness regarding the valuable role participants can play in improving PHE’s public health intelligence systems

Participants will work first in teams to brainstorm the sorts of information required to address selected topic areas and where this might be obtained. There will then be a presentation on PHE’s public health data tools and knowledge intelligence networks |
| Participants will go on to explore in teams what needs to improve regarding signposting, content and presentation of public health intelligence. This will be followed by a presentation on the components of an ideal knowledge transfer process and examples of PHE initiatives to improve public health intelligence systems. Feedback from the participant discussions will contribute to this on-going improvement process. |
| **Workshop leaders:**Wendi Slater, Senior Analyst, PHE Knowledge and Intelligence Team (South West)Nicky Bowtell, Principal Knowledge Transfer Facilitator, PHE KIT (South West)Debbie Stark, Public Health Healthcare Consultant, PHE (Devon, Cornwall and Somerset Centre)  |

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| **3E – Increasing drug misusers’ uptake of Hepatitis B immunisation** |
| **Aims:** To share the findings of a recent study in B&NES to increase Hepatitis B immunisation within the substance misusing population. National data has shown that there has been an under performance against Blood Borne Virus Key Performance indicators regionally and locally for over 10 years.**Learning Outcomes:** * Attendees of the workshop will gain a valuable insight into the challenges of encouraging this client group to accept and take up the offer of Hepatitis B immunisation; alongside tips and hints on how to improve process and practice
* Shared learning of the study carried out in B&NES; how it improved the rates of immunisation in high risk drug users to 74% (double the national average); and take home messages that can be implemented in other areas.

The workshop will include a presentation which summarises why the study was carried out; how the findings influenced an easy to follow risk screening flow chart aimed at key workers and health professionals; and feedback from the Blood Borne Virus nurse on its application.  |
| **Workshop leaders:**Amanda Davies, Drug and Alcohol Team Officer, Bath and North East Somerset CouncilJoe Rowan, Blood Borne Virus Nurse |

**THURSDAY 25TH SEPTEMBER**

**WORKSHOP INFORMATION**

**WORKSHOP SESSION FOUR**

**13:15 - 14:45**

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| **4A – Child Poverty in the UK** |
| **Aims:** To provide a summary of the history, legislation, indicators and strategies in the UK for Reducing Child Poverty. In addition, the workshop aims to allow participants to understand how reducing child poverty at the local area can be approached and to stimulate discussion on how the profile of child poverty can be raised within the local authority agenda. |
| **Learning Outcomes:** * To gain an overview of the current requirements on Local Authorities in relation to reducing child poverty
* To learn how reducing child poverty can be approached at the local level
* To discuss further opportunities/possibilities to raise the profile of child poverty and reduce the level of child poverty
 |
| The workshop will start with an introductory presentation on Child Poverty in the UK (history, guidance, indicators, current consultation). There will be an interactive exercise in small groups with the agenda led by the participants to focus upon the following questions:* What are the data sources that could be used to build the evidence base of child poverty within an area?
* What are the levers within the system to help reduce child poverty?

There will also be a short presentation highlighting the experience in Wiltshire Council of developing a Child Poverty Needs Assessment, Strategy and Implementation Plan. The workshop will conclude with small group discussions on raising the profile of child poverty within the local authority. |
| **Workshop leaders:**Kate Blackburn, Public Health Specialty Registrar, Wiltshire CouncilAmy Bird, Public Health Consultant, Wiltshire Council |

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| **4B – Developing local liver disease needs assessments** |
| **Aims:** * To provide participants with an overview of current knowledge and evidence about liver disease in England
* To introduce the upcoming national Liver Disease Profiles and how they can be used locally to develop a health needs assessment to inform commissioning and prevention initiatives.

**Learning Outcomes:** Participants will understand -* The importance of tackling liver disease in the South West
* What liver disease intelligence is available and how the SW KIT can help local areas to identify relevant local data
* How to go about planning a health needs assessment for liver disease
* The role of Public Health England, NHS England, Local Authorities and Clinical Commissioning Groups in supporting local needs assessment and commissioning of services to meet identified needs
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| The session will begin with an overview of liver disease evidence and intelligence. Participants will then split into groups to discuss how they would develop local health needs assessments and how they could use them to inform local commissioning and prevention initiatives.  |
| **Workshop leaders:**Julia Verne, Director, PHE – SW Knowledge & Intelligence TeamLiz Rolfe, Interim Associate Director, PHE – SW Knowledge & Intelligence TeamRebecca Maclean, Public Health RegistrarSarah Weld, Public Health RegistrarRachel Clark, Public Health Registrar |

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| **4C – What can GPs in Public Health do for Public Health - What can Public Health do for GPs?** |
| **Learning Outcomes:** * How it came to be that GPs were involved in Public Health in Wiltshire
* Consideration of a series of case studies

The workshop will start with a brief introduction, breaking into 3 small groups to be facilitated by one of the GPs. There will be discussion of the case studies with time for questions. After this, we will join together as a group to discuss the advantages and limitations of GPs working directly with the public health team.  |
| The case studies will include: * Being a GP in Public Health with reference to Diabetes
* The GP Trainee with a focus on Gypsy, Traveller, Boatpeople and Showpeople Health
* The GP trainee within the Public Health team

The workshop will consider how working within a public health team provides the opportunity for valuable insight into primary care that can help to shape projects. There will be a focus on specific projects that provide examples of how GPs working with the public health team can be beneficial, including:* Diabetes awareness for taxi drivers’ project.
* Developing a protocol for GP practices to follow-up babies who are not registered with a GP and/or have not attended 6-8 week baby checks
* Development of the referral guidelines and GP information for the launch of the SHINE programme (exercise programme for overweight children)
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| **Workshop leaders:**Daz Harding, GP, Wiltshire Council public health team Alex Thomson-Moore, GP registrarEmma McEvoy, GP registrar |

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| **4D – Advocacy skills in the era of internet and social media** |
| **Aim:** To enhance attendees’ existing knowledge of how to conduct public health advocacy**Learning Outcomes:** The acquisition of practical knowledge and skills in advocacyThe workshop will decide on a current hot topic (a previous session looked at the Lobbying Bill and its effect on NGOs and professional groups) and explore, in a very hands-on way, how to conduct advocacy on the issue. It will include gaining knowledge of political processes and communication with legislators, use of social media and interaction with mass media.  |
| The session will include a brief introduction to advocacy and to the topic selected. There will then be agreement on the distribution of tasks to small groups that will plan and conduct some advocacy activities. |
| **Workshop leader:**Gabriel Scally, Visiting professor, University of the West of England |

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| **4E – New immunisations and developments – how can we make the systems work better?** |
| **Aims:** * To provide updates on the new immunisation programmes and developments
* To consider improvements to the existing systems

**Learning Outcomes:**The workshop will provide a series of updates on the implementation and successes of last year’s new programmes, including:• Rotavirus, Shingles & Men C |
| Horizon scanning into 2015 will include a look at forthcoming programmes and the rationale for changing existing schedules. This will include a review of:• Childhood flu, Pertussis & HPV |
| Participants will discuss and explore how the immunisation programmes are delivered locally and consider how success and efficiency can be maximised.In addition to the updates and review of the new programmes, this workshop will encourage participants to consider how the current systems are working. They will explore how the systems could be improved and look at the local impacts. Recommendations and suggestions for improvements developed during the workshop will be fed back directly into the current system.The workshop will provide a mix of information provision and discussion with facilitated input from the participants. |
| **Workshop leaders:**Julie Yates, Screening and Immunisation Lead for BNSSSG & DCIOS, PHE and NHS EnglandMatthew Dominey, Screening and Immunisation Manager, BNSSSG Area Team |

**THURSDAY 25TH SEPTEMBER**

**PLENARY DEBATE**

**14:45 – 16:00**

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| **Collaborating with Business – Can Public Health Make It Work?****Examples of collaboration for the early years** |
| **Aim:** To consider the opportunities and challenges for public health professionals of strengthening collaborations with the commercial food industry.**Learning Outcomes:*** To gauge the views of public health professionals in the South West with regards to developing collaborative ways of working with the commercial food industry
* To share case studies and examples of good practice relating to early years
* To highlight the key issues to be considered by public health professionals when collaborating with the food industry
* To debate the benefits and challenges of working alongside the food industry to improve the public’s health
* To consolidate views from public health professionals and agree next steps for further action
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| **The session will include:*** Introduction

*Clare Pettinger, Senior Lecturer in Public Health Dietetics, Plymouth University* * Danone and the ‘Hey!’ Programme

*Ann Evans, Social Innovation Manager, Danone* * The Local Authority Public Health experience of the ‘Hey!’ Programme

*Amy Bird, Consultant in Public Health, Wiltshire Council* * The Infant and Toddler Forum (ITF)

*Olivier Lechanoine, Medical Director, Danone**Judy Moore, Paediatric Dietician, ITF* * Question and Answer session and debate
* Chair’s summary and identification of the next steps
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