



Public Health
England

Protecting and improving the nation's health

Cumbria and Lancashire Centre Prospectus 2014/15

Archived December 2017

About Public Health England

PHE exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. It does this through advocacy, partnerships, world-class science, knowledge and intelligence, and the delivery of specialist public health services. PHE is an operationally autonomous executive agency of the Department of Health.

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Introducing the Cumbria and Lancashire Centre

Welcome to the Cumbria and Lancashire PHE Centre prospectus 2014-15. In this document we will set out what the PHE Centre is, national priorities and the work of our local teams. In this way we will contribute to better health and reduced inequality for Cumbria and Lancashire.

During 2013-14, the first year of PHE, we started conversations with our public health partners on what PHE will contribute to the public health system in Cumbria and Lancashire. We recognise that the system will develop and change over time.

We want to work with our stakeholders to develop one public health system for a healthier future for the people of Cumbria and Lancashire. We will do this by:

- adding value to the many excellent initiatives and interventions currently underway in our public health system by providing expert advice, intelligence and practical support to local authorities, helping them to protect and improve the health of their population
- acting as the local voice of Public Health England
- providing specialist staff to NHS England, to lead on the commissioning and monitoring of public health programmes including screening and immunisation, and dental public health
- providing local health protection services and leading the public health response to emergencies that need specialist expertise
- contributing to a local whole systems planning approach by working with individual local authorities, the Cumbria and Lancashire health and well-being boards, and the Cumbria and Lancashire Public Health Collaborative
- developing and supporting the people who work in public health through our relationship with local education and training boards and working with academic networks to help spread innovation
- acting as a signpost to PHE work programmes and ensuring that matters of local concern are heard at a national level

To strengthen our contribution to the wider social, environmental and economic priorities of Cumbria and Lancashire, we want to fully understand and add value to the plans of others so that we are all working in a joined-up way. Where necessary, we will act as a critical friend to partners, to address areas of challenge through benchmarking, researching alternatives and using evidence of proven success from other settings and areas.

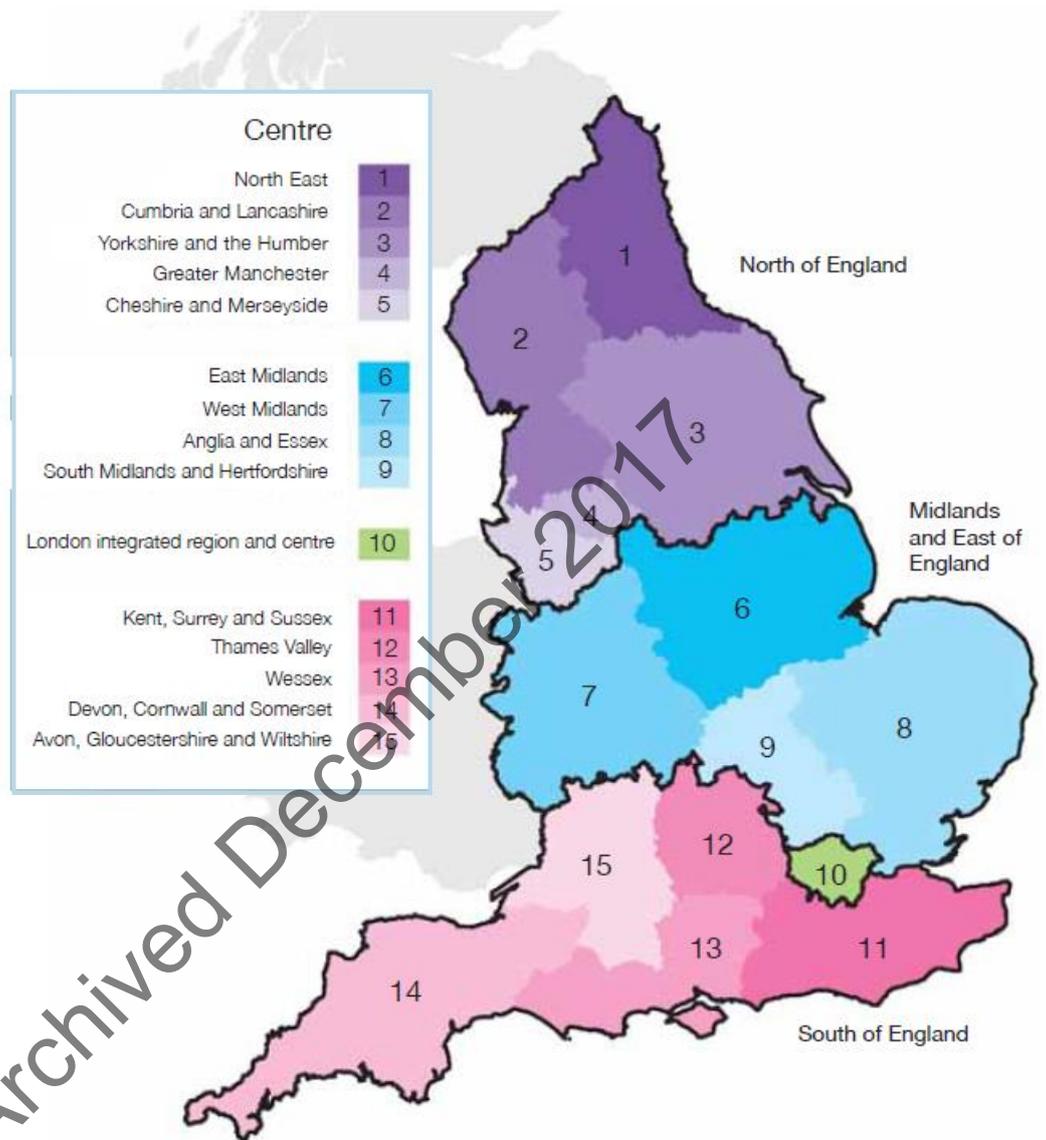
Our focus is local and is tailored to serve the priorities and needs of Cumbria and Lancashire.

PHE's local presence

As part of the PHE operations directorate, the Cumbria and Lancashire Centre is one of five PHE centres that make up the north region and one of fifteen PHE centres across England.

PHE has a number of directorates who co-ordinate the national agenda, providing public health professional leadership and expertise.

The directorates for Health Protection, Health and Wellbeing and Knowledge support the organisation's ambition for knowledge and research to enable outstanding delivery.



Complemented by directorates for Strategy, Programmes, Finance and Commercial, Human Resources and Communications, collectively, national, regional and local teams strive to ensure integrated working across all areas of public health.

The PHE centre is often described as the front door of PHE – the first point of access between national, regional and local PHE and the health system led by local government, NHS England area teams and a range of other key stakeholders with a local presence, including Health and Wellbeing Boards, Clinical Senates, Health Education England, Academic Health Science Networks and the Local Government Association.

The area we cover

The Cumbria and Lancashire Centre is co-terminus with four local authority areas: Cumbria, Lancashire, Blackpool and Blackburn with Darwen.

Cumbria and Lancashire are top tier authorities, with six and twelve district councils respectively. Blackpool and Blackburn with Darwen are unitary authorities.

We work with two NHS England local area teams: Lancashire and Cumbria, Northumberland, Tyne and Wear, (Cumbria only).

Cumbria and Lancashire forms a geographical area of 3,820 square miles, with a population size of 1.96 million people that increases throughout the year due to tourism.

With the Lake District, England's largest national park, Blackpool, the nation's most popular seaside resort, urban Preston, the historic city of Lancaster, countryside and farmland, as well as numerous towns that grew from the Industrial Revolution, shipbuilding and nuclear industries, the area is incredibly diverse.



The people, health and wider determinants

There are proportionately fewer people aged 25-39 years and proportionately more people aged over 55 years than the national average living in Cumbria and Lancashire. In general the area is less ethnically varied than the England average but 28% of Blackburn with Darwen's population classify themselves as Asian/Asian British.

The proportion of our working age population who are economically active is significantly lower than the England average and more economically inactive adults are long term sick than is the average. A lower proportion of the population are qualified to NVQ4+ than across England. Although the proportion of working age adults who are claiming benefits are in line with the England average, there are some high claimant rates and there is great variation across the whole area.

Health is mixed, but is generally poorer than the England average. Male and female life expectancy is significantly lower than average across all local/unitary authority areas. The gap in life expectancy between the most and least deprived areas of each local authority district is as high as 13.7 years in Burnley for males and 9.7 years in Pendle for females.

PHE's core functions

Protecting the public's health from infectious diseases and other hazards to health

Improving the public's health and wellbeing and reducing inequalities

Improving population health through sustainable health and care services

Building the capability and capacity of the public health system

PHE's key priorities

In 2014 PHE set out seven key priorities that will reflect the NHS five year plan and that we believe, from the evidence, will make the greatest difference to improving public health and narrowing health inequalities over the coming three, five and ten years. These are:

- Antimicrobial resistance
- Alcohol
- Dementia
- Every child ready to learn
- Obesity
- Tobacco
- Tuberculosis

The areas we have chosen are based on the scale of impact we can have on health outcomes and health inequalities and where the public health community can uniquely add value by providing multi-disciplinary expertise and leadership.

For each theme, we want to build a coalition of partners in each locality to agree how together we can achieve our 3, 5 and 10 year ambitions.

PHE North Region

Public Health England has a north regional team, based in Leeds. Complementing the work of the centre on a local level, the job of this team is to provide support to the region's public health system to deliver on the public health outcomes framework by:

- ensuring development of the public health workforce in the north of England
- identifying priorities and opportunities for effective collaboration across the north of England in order to most effectively meet the health challenge and reduce health inequalities in the north
- providing system assurance of emergency planning systems and response across the north
- assisting the five PHE centres in the north in delivering evidence-based professional advice in support of local government
- assuring PHE nationally and partners locally on the delivery of public health services in the north of England
- challenging, developing and improving the public health system to be the best it can be in the north of England

The Cumbria and Lancashire PHE Centre teams

The Cumbria and Lancashire PHE centre has four teams who are co-located at our main centre base in Chorley:

- Health Protection
- Health Improvement
- Healthcare Public Health
- Centre Management and Business Support

We have a further two teams co-located with the NHS England Lancashire Area Team and based in Preston:

- Screening and Immunisation
- Dental Public Health

Hosted by other centres in the north but working with our population are:

- Alcohol and Drugs
- Health and Justice
- Sexual Health

Also providing capacity to the centre but delivered regionally or nationally:

- Emergency Planning and Management
- Workforce

- Knowledge and Intelligence
- Field Epidemiology
- Specialist Microbiology
- CRCE
- Communications
- Social Marketing
- Corporate support, including HR, Finance etc

Health protection

The primary responsibility of the health protection team is to identify, prepare for and respond in a timely manner to different types of public health threats, to minimise risk to the local population.

The health protection team is the front line of a national service which includes specialist laboratories, epidemiologists, and experts in radiation and chemicals. Our team provides an acute 24 hour health protection service to the population of Cumbria and Lancashire. This entails the effective surveillance and public health management of cases, incidents and outbreaks to prevent and reduce the impact of infectious diseases, chemical and radiation hazards, and major emergencies.

We provide this service in conjunction with local stakeholders including NHS England and local authority public health teams. We also provide advice and training to stakeholders such as care homes, schools and practice nurses, NHS commissioners and local authorities.

We work in partnership with members of the Local Resilience Forum (LRF) and Local Health Resilience Partnership (LHRP) to plan for and respond to a range of risks where the health of the population is threatened.

We have mutual aid arrangements within and between other PHE centres to deal with major incidents and would expect to work with local authority public health colleagues to deal with local health protection issues. Members of the team contribute to policy formation at a local national and regional level and then use this to develop our local service.

Health improvement

The health improvement team's aim is to improve health and reduce health inequalities so that the poorest and most vulnerable children and adults in our communities benefit most.

Our health improvement team builds partnerships and engages a wide range of stakeholders to develop and implement robust, effective health programmes and to address the factors that affect people's health. We work with local government, the NHS and other partners to protect and improve health and wellbeing, reduce inequalities and help people make healthier choices. We support local government and their directors of public health in their leadership of the place-based public health system and enable them to access specialised advice and support when required.

Our team provides specialist technical and professional public health leadership, advice and support based on best evidence of what works and cost effectiveness. We lead and manage

delivery of core Public Health England health improvement programmes and support services and use health impact assessments and health equity audits to assess the impact of policies and programmes on health.

Healthcare public health

The aim of population healthcare is to maximise prevention, quality, value and equity in healthcare pathways to improve health across society.

The consultant in healthcare public health oversees, coordinates and delivers public health professional leadership, support and advice to the NHS England Lancashire area team to drive improvements in outcomes and reduction in health inequalities across the population in a way that is cost effective.

She provides support to the area team in developing their overall strategy for improving population health at a local level, their direct commissioning responsibilities for primary care (including medical services; Ophthalmic services; community pharmaceutical services etc.) and their public health service commitments defined through the Section 7a agreement.

Further workstreams include supporting the work of clinical networks and the clinical senate and working on identified programmes with the Cumbria and Lancashire Public Health Collaborative.

Centre management and business support

The centre's corporate agenda and internal governance are co-ordinated by the centre management and business support team, who are responsible for facilitating business and resource management. Supporting all the centre's functional teams, we aim to develop a culture of continuous improvement in the centre and to develop effective links with key partners in Cumbria and Lancashire.

Screening and immunisation

Our specialist screening and immunisation team is embedded in NHS England Lancashire Area Team and on their behalf commission all national screening and immunisation programmes for the population of Lancashire.

The team oversees the monitoring and surveillance of existing programmes, in partnership with the national and regional quality assurance and health protection teams. They facilitate the safe and effective implementation of new programmes and provide specialist advice and support to the area team, local authorities, primary care practitioners and other service providers.

The screening and immunisation team ensure the effective functioning of programme boards, focusing on quality, safety and the effective delivery of the programme standards and intended outcomes. They oversee all serious incidents ensuring that they are investigated appropriately and that look-back exercises are undertaken if required.

The team ensures that all service providers are appropriately trained and provide training opportunities for public health professionals.

Dental public health

The dental public health team provides professional leadership to enable NHS England to commission effective and preventively-focussed dental services, that address inequalities and focus on good oral health as an outcome. Informed by our Smile4Life branded approach and by our knowledge and expertise in epidemiology, the team provides support and advice to enable local authorities to commission appropriate and effective dental public health services.

To complement their local work, our dental public health team work at a national level with colleagues from PHE's health and wellbeing directorate on specific projects for example the re-establishment of water fluoridation in Cumbria and the development of Commissioning Better Oral Health, which is new national guidance on oral health improvement.

They also work with colleagues from the knowledge directorate to develop and deliver the National Dental Public Health Intelligence Programme.

As part of the implementation of oral health strategies, the team works with local dental networks to support dental workforce planning that includes delivering teaching and training for all members of the dental team, from pre-registration to specialty training.

Alcohol and drugs

The alcohol and drugs team promotes evidence-based and coordinated practice, by distilling and disseminating relevant guidance, evidence and best practice. The team promotes user and carer involvement and supports the development of the alcohol and drug treatment workforce.

They provide data on key aspects of treatment provision, bench-marked where appropriate, to enable local areas to assess how effectively they meet local needs and to support them to develop plans and improve practice. They also support local areas and treatment services to utilise nationally developed data reports, tools and clinical resources.

The team promotes collaboration and the sharing of good practice to support local strategic planning, partnership and service integration.

Health and justice

The health and justice specialist works in partnership with health and social care commissioners and service providers to identify and meet the health needs of people in prisons and other prescribed detention settings as well as those in contact with the criminal justice system in the community.

Sexual health

The role of the sexual health facilitator is to work with other specialised colleagues within PHE such as the field epidemiology service, health and wellbeing and health protection colleagues to offer a package of support aimed at those responsible for commissioning sexual health services and providers of those services.

Emergency planning and management

Under the Civil Contingencies Act 2004, PHE is a Category 1 responder in an emergency and as such shares information, cooperates and collaborates with other local responders, to warn and inform the public as part of duties under the Civil Contingencies Act 2004.

The Emergency Preparedness Manager (EPM) attends the Local Resilience Forums to contribute to the formulation of local contingency plans and guidance, through liaison with the emergency services, government departments, local authorities and other responder agencies (utility companies, voluntary aid societies, industrial and commercial organisations).

Working collaboratively with the health protection team, the EPM develops, manages and provides expert and high quality specialist Emergency Preparedness, Resilience and Response advice function for the centre.

Part of the role is to ensure that plans and response systems are validated through exercises and that PHE has appropriate involvement in national and local multi-agency exercises

Workforce

The workforce team works alongside both PHE and wider public health staff to oversee the delivery of the PHE North Region's Workforce Development Programme. The Workforce Development Manager for the North West is responsible for ensuring that the three PHE centres within the sub-region are able to deploy, develop and shape public health staff for maximum benefit and impact.

Some examples of the workforce team's core functions include:

- understanding the workforce needs of both PHE and local government
- supporting the development of local professional networks
- developing the practitioner, specialist and wider public health workforce
- supporting medical appraisal and revalidation networks
- developing relationships with the local education and training board (LETB)
- developing and delivering a range of training and development opportunities across the public health system
- managing Director of Public Health vacancies, in collaboration within the national team
- planning for the future demands on the public health workforce

Knowledge and intelligence

The Knowledge and intelligence team provides specialist surveillance and intelligence for localities as well as access to and support for local use of national products (indicators, profiles, tools and reports, evidence resources, data gateway). They undertake an analytical work programme to meet the priority needs of local stakeholders.

In addition, they provide education, training and Continuing Professional Development (CPD) support to the North West Public Health Intelligence Network and access to public health intelligence and evidence expertise across the national PHE Knowledge & Intelligence Service.

Field epidemiology

The Field Epidemiology team serves the north west, providing expertise in the investigation of outbreaks of infectious disease, infectious disease surveillance, research and development, and training.

Specialist microbiology

Public health laboratory services

PHE's network of eight public health laboratories, working closely with national centres at Colindale and Porton and a number of key NHS and academic collaborating centres, provide a total clinical microbiology service. This includes routine diagnostic testing, results interpretation, and consultant microbiologist clinical advice and liaison. PHE also offers a number of novel and proprietary molecular tests e.g. for rare, unusual, imported and emergent pathogens. PHE reference laboratories are also established centres of excellence in their designated fields.

Food, water and environmental services

PHE also has five dedicated food, water and environmental (FW&E) laboratories. They undertake the microbiological testing of food, water, and environmental samples on behalf of, e.g., local authorities, port health authorities, the NHS, and the food industry. The services provided include a wide range of accredited tests for statutory microbiology testing, the interpretation of test results, support for food-borne outbreak investigation, and the provision of expert advice and training.

Centre for radiation, chemical and environmental hazards (CRCE)

The CRCE are a specialist resource to anticipate and prevent the adverse effects of acute and chronic exposure to hazardous chemicals and poisons. They provide specialist authoritative scientific public health advice to the centre and wider stakeholders. They will use the information from incidents and their health impacts to identify, in advance, potential incidents and be able to respond to these.

Communications

PHE has a national social marketing and campaigns team and provides public health communications advice at a national and regional level. The PHE north west communications team works closely with the centre.

Working with local partners and stakeholders, the north west PHE regional communications team provides:

- 24/7 proactive and reactive media response
- leadership and expertise in crisis communications during emergencies
- stakeholder engagement/ liaison
- close liaison with partners to develop communications strategies in response to specific public health issues
- support to health improvement advocacy and campaigns.

The communications team support us in managing our centre twitter account and in producing our quarterly newsletter, both key mechanisms in developing and maintaining a dialogue with stakeholders.

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Some of our centre's achievements in 2013 – 14

Responded to health protection incidents across the patch, including body piercing incident

Supported nasal 'flu vaccine pilot for primary school age children in Cumbria

Commissioned programme of population science master classes

Co-ordinated ongoing planning for next 'flu pandemic

Agreed roles and responsibilities with partners for dealing with outbreaks of infectious disease

Undertook scoping of a liver strategy for Cumbria and Lancashire

Participated in four multi-agency emergency exercises

Provided 24 hour acute health protection response

Established Fairness Commission for the north

Implemented fluoridisation of water in Cumbria

Rolled out bowel scope screening programme in Lancashire

Pre-distribution of potassium iodate tablets to premises near Heysham nuclear facility

Collaborated in development of health impact assessment for shale gas extraction

Planned response to extreme weather events, including heatwave plan

Established health check steering group in Cumbria and Lancashire

Implemented four new vaccine programmes in Lancashire

Hosted EU youth study visit attended by public health colleagues from across Europe

Set up our centre, establishing internal governance and structure

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Cumbria and Lancashire PHE centre delivery plan - summary 2014 -15

1) Programmes and Projects

Accident Prevention

1.1) Contribute to accident prevention agenda locally

Alcohol and Liver Disease

1.2) Facilitate local action on price and availability of alcohol

1.3) Develop and facilitate Liver Network for Cumbria and Lancashire

1.4) Develop academic links with local universities undertaking research into alcohol treatment

Best Start in Life - Maternal Health, Children & Young People

1.5) Understand the national children & young people's programme in relation to infant mortality and low birth weight and the work locally, including the work on transition to adolescence

1.6) Support work on the transfer of health visitor commissioning to local government

1.7) Work with partners to explore and develop a systematic approach to improving the health of children and young people in Cumbria and Lancashire

Dementia

1.8) Undertake initiatives to support national and local work to support those affected by dementia

Healthcare Associated Infections

1.9) Optimise efficacy of partnership working in relation to HCAs

1.10) Increase knowledge and skills of workforce in relation to HCAs

1.11) Contribute to management of antimicrobial resistance

1.12) Clarify understanding of roles and responsibilities in relation to HCAs

Health Inequalities

1.13) Support the Blackpool Fairness Commission Conference

1.14) Contribute to development of Lancashire Healthcare Strategy

Influenza

1.15) Support implementation of nasal flu vaccine pilot for school children in Cumbria

1.16) Participate in Exercise Cygnus

Mental Health

1.17) Support local work to reduce Self Harm & Suicide

1.18) Promote 5 Ways to Wellbeing in local patch

Obesity

1.19) Develop a physical activity network in Cumbria and Lancashire

1.20) Support the development of the National Child Measurement Programme (NCMP) in Cumbria and Lancashire

1.21) Work with partners on the sugar reduction agenda

1.22) Host physical activity workshop

Reducing Early Mortality

1.23) Increase uptake of Health Checks

1.24) Reduce variation in COPD clinical outcomes in Primary Care

1.25) Support the reducing premature mortality work programme initiated by the Cumbria and Lancashire public health collaborative

1.26) Support the review and improvement of service quality across Cumbria & Lancashire

1.27) Improve the physical health of people with mental health conditions

1.28) Support PHE reducing premature mortality work by working with local system leaders to improve detection and management of hypertension

Sexual Health & Teenage Pregnancy

1.29) Improve access to Sexual Health Services

1.30) Support work in Cumbria and Lancashire to reduce the numbers of teenage pregnancies

Tobacco

1.31) Support work in Cumbria and Lancashire to reduce the number of women smoking at the time of delivery

1.32) Maximise the impact of the Stoptober campaign in Cumbria and Lancashire

Tuberculosis

1.33) Improve public facing communications regarding T

1.34) Support reconfiguration of TB services across the Centre patch

1.35) Support North West TB Cohort Study

Unconventional Gas

1.36) Advise Lancashire and Cumbria on the development of an HIA for shale gas extraction

1.37) Provide technical advice to local public health workforce regarding shale gas extraction

Violence and Unintentional Injuries

1.38) Lead for PHE centres on national VUII programme

2) Place Based Work, Stakeholder Links and Partnership Working

2.1) Participate in Joint Health and Wellbeing Strategic Groups in each of the local authorities of Cumbria and Lancashire

2.2) Contribute to work programme of the CLPH collaborative

2.3) Develop and articulate consultancy model of working for CLPHEC health improvement team

2.4) Lead the development of a programme of sector led improvement activities in Cumbria and Lancashire with the Cumbria and Lancashire Public Health Collaborative

2.5) Promote PHE Health & Wellbeing Framework

2.6) Ensure health protection team participate in relevant external for a

2.7) Identify team leads for health protection programmes to feed into national programme work

2.8) Establish remit and ToR of Cumbria and Lancashire Health Protection Forum

2.9) Align portfolios of health protection consultant and practitioner staff to CCG footprints

2.10) Co-ordinate and lead Patient Group Direction (PGD) group for Cumbria & Lancashire

3) Centre Development

3.1) Develop and implement a communication strategy for the centre

3.2) Develop internal governance framework for the centre

3.3) Undertake team development and staff engagement activities

3.4) Develop PHEC dashboard with KIT/FES

3.5) Establish and maintain workforce standards for centre staff

3.6) Develop the Cumbria and Lancashire PHE Centre as a recognised centre of excellence for public health training

3.7) Develop a learning and development strategy for the Cumbria and Lancashire PHE Centre

3.8) Participate in PHE north region advisory groups

3.9) Move to new accommodation

3.10) Contribute to PHE Operations Directorate savings plans

3.11) Ensure all health protection staff are up to date with developments in the field

3.12) Standard operating procedures for all health protection and admin activity in place

3.13) Implement replacement system for HPZone

3.14) Build surge capacity within Centre

3.15) Develop centre emergency response and STAC activation plans

3.16) Ensure all health protection staff and appropriate other centre staff are appropriately trained to respond to emergencies and incidents

3.17) Develop agreed and defined corporate responsibilities for embedded staff teams

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