

# Joint Health Improvement Team

Annual Report 2021 - 2022



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# Introduction

As in previous years this year we have aligned our Joint Health Improvement Team (JHIT) Annual Report for 2021-22 to Scotland's six Public Health Priorities while recognising that, given the range of factors that impact on our health and wellbeing, much of our work will influence more than one of these priorities.

While the Public Health Priorities have not changed, Public Health Scotland's Strategic Plan adopted a focus on COVID-19 recovery, mental wellbeing, community and place and poverty and children. The work presented throughout the report also links across these areas of work.

The overall aim of JHIT is to reduce inequalities in health by promoting good health throughout the life stages; building capacity and capability within our communities and workforce and creating a healthier future for all. We know that the impact of COVID-19 will increase inequalities and that our communities will be impacted by the emerging cost of living crisis.

During 2021-22 JHIT continued to work from home for the majority of the time. Whilst we had more of our team based back in their usual jobs we continued to have staff deployed to the Test and Protect Service throughout the year until March 2022. In Winter 2021-22 staff also worked on wards as Health Care Assistants and volunteered to support mealtimes at the BGH and throughout the pandemic our administration team have continued to support the Health Protection Team in particular with their roles. This staff deployment was required to support the wider organisation, however, we recognise the challenge for staff in halting programmes of work and having to rebuild relationships on their return.

Throughout this year we have also tried to support each other as we continue to work from home and overcome the challenges that brings and team members have supported development and implementation of our Staff Charter and improved ways of working. It is not possible to report on all of the work undertaken by the team so I would like to thank the members of the team who have led the work described within the report and all of us who have contributed to make a difference to our communities in Borders.

**Fiona Doig**  
**Head of Health Improvement, Strategic Lead Alcohol and Drugs Partnership**

# Joint Health Improvement Team (JHIT)

JHIT is part of NHS Borders Public Health Department and the staff team includes members from both NHS Borders and Scottish Borders Council.

Our team is led by the Head of Health Improvement/Strategic Lead Alcohol and Drugs Partnership.

We have three lead roles who support their dedicated teams in the following areas:

Public Health Lead for Children and Young People/Child Health Commissioner	Public Health Lead for Mental Health/Wellbeing Service Lead	Health Improvement Lead for Communities
<ul style="list-style-type: none"><li>• Maternal &amp; Infant Nutrition</li><li>• Child Healthy Weight</li><li>• Emotional Health and Wellbeing</li><li>• Children's Rights</li><li>• Substance Use Education</li><li>• The Promise</li><li>• Child Poverty &amp; Financial Inclusion</li><li>• Young People's Engagement</li></ul>	<ul style="list-style-type: none"><li>• Wellbeing Service</li><li>• Adult Mental Health and Wellbeing</li><li>• Health Promoting Health Service (on hold)</li></ul>	<ul style="list-style-type: none"><li>• Health Inequalities and Anti-Poverty Work</li><li>• Food Security, Physical Activity and Diabetes Prevention</li><li>• Communities</li><li>• Older People</li></ul>

This work is delivered with the support of our Administration Team and Data and Performance Officer.



# Public Health Priorities for Scotland

## Public Health Priorities

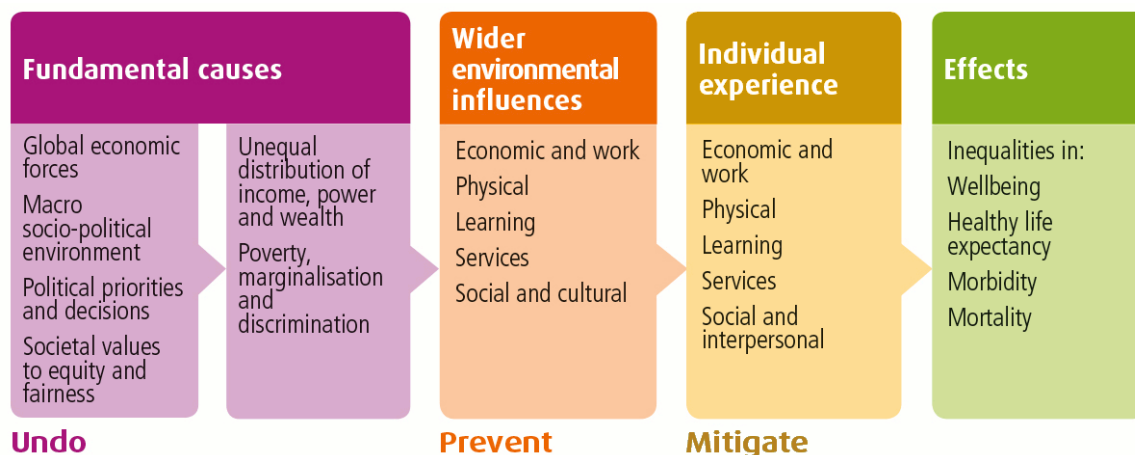
The Scottish Government has agreed a clear set of related and inter-dependent priorities for Scotland which are:

- 1 A Scotland where we live in vibrant, healthy and safe places and communities
- 2 A Scotland where we flourish in our early years
- 3 A Scotland where we have good mental wellbeing
- 4 A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs
- 5 A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all
- 6 A Scotland where we eat well, have a healthy weight and are physically active

The agreed priorities reflect public health challenges to focus on over the next decade to improve the public's health.



Health inequalities are the unfair and avoidable differences in people's health across social groups and between different population groups. The gaps between those with the best and worst health and wellbeing still persist, and some are expected to increase due to the impact of COVID-19 pandemic. For example, in the most recent data at the moment the difference in life expectancy in Borders for women in the most deprived communities compared to least deprived is 13.9 years (76.4 compared to 90.3) while for men it is 10.6 years (83.6 compared to 73).



As the diagram shows, significant influences on health inequalities are due to what is referred to as the 'fundamental causes', or 'structures causes' of inequality such as geopolitical, environmental; and income distribution and unlikely to be impacted at a local level. However, at a local level, including within JHIT, we can seek to prevent wider environmental influences (e.g. through employment practices, planning services) or mitigate the experience for individuals (e.g. access to services, skills building.)

# Activities Overview

## Mental Health Improvement / Suicide Prevention

- **202** people took part in digital mental health improvement and suicide prevention training
- **6** rugby clubs in Borders supported mental health improvement and suicide prevention approach. Three videos were produced in partnership with Kelso RFC which have had hundreds of views across the rugby community
- **£1.1 million** from Scottish Government's Communities Mental Health and Wellbeing Fund allocated to 41 community organisations

## Quit Your Way (Apr - Dec 21)

- Quit attempts **525** (491 in 2020-21)
- Successful quits at three months post quit date **150\*** (144 in 2020-21)

### Data for 40% most deprived areas in Borders

- Quit attempts **315** (278 in 2020-21)
- Successful quits at three months post quit data **97\*** (79 in 2020-21)
- Three month quit rate: **31%** (28% in 2020-21)

(\*Number of successful 3 month quits subject to change due to reporting lag for quit dates set February-March 2022)

## Breastfeeding in the Borders (BiBs)

- Volunteers **22**
- BiBs requests at discharge **321**

## JHIT Training

- Participants **463**
- Courses **42**

## Healthy Start Vitamins

- Women's **1846**

## New Vitamin D

- Women's **958**
- Children's **2082**

## Wellbeing Service

- New referrals **1491**
- Average **124** per month
- Consultations **10,176**

## Walk It

- Walks **772**
- Walk Leaders trained **84**
- Participants **7552**
- Dementia Friendly Walks **26**



# Training and Capacity Building

Building community capacity is a core health improvement function. Our 'Learning and Skills for Health' training programme is for everyone; staff, partners and the wider community. Learning and Skills for Health has a specific focus on wellness and what we can all do to help build a culture of health.

Health improvement training equips participants with the knowledge and skills to raise and discuss a health and wellbeing issue with confidence, so that they can support people to make small changes which cumulatively can make a big difference.

Participants come from a variety of organisations including local authority, NHS, third sector, volunteers, private individuals.

**2021 - 22 Data**  
**463**  
**individual attendances**  
**compared to 515 in 2020-21**

The table below presents the range of programmes and number of people who attended across the Public Health priorities recognising that much of the training will cover more than one priority area.

Public Health priority area	Courses delivered & participants
<b>1 - A Scottish Borders where we live in vibrant, healthy safe places and communities</b>	<b>Participants - 2</b>
<b>2 - A Scottish Borders where we flourish in our early years</b>	<b>Participants - 193</b> <ul style="list-style-type: none"> <li>• Child healthy weight toolkit</li> <li>• Breastfeeding and relationship building</li> <li>• MAP health behaviour change training</li> </ul>
<b>3 - A Scottish Borders where we have good mental wellbeing</b>	<b>Participants - 202</b> <ul style="list-style-type: none"> <li>• Exploring experiences of people of colour in Scottish Borders</li> <li>• Men's mental health - hearing the voices of the men in the Scottish Borders</li> <li>• United to prevent suicide – bitesize</li> <li>• Mental health improvement and suicide prevention – skilled level</li> <li>• Mental health improvement and suicide prevention – informed level</li> <li>• Be suicide alert</li> <li>• Supporting people at risk of suicide</li> <li>• Support people at risk of harm</li> <li>• Living Works START</li> </ul>
<b>6 - A Scottish Borders where we eat well, have a healthy weight &amp; are physically active</b>	<b>Participants - 66</b> <ul style="list-style-type: none"> <li>• Microwave cookery</li> <li>• Nutrition and wellbeing</li> </ul>

# Training and Capacity Building

## Skilled Level - Best Practice Learning Network

In the continued absence of being able to deliver the Scottish Mental Health First Aid (SMHFA) and Applied Suicide Intervention Skills Training (ASIST), the demand for alternative suicide prevention training was sustained into 2021-22. We continued to build our capacity in line with the national NHS Knowledge and Skills Framework for Mental Health Improvement and Suicide Prevention.

We piloted a new 'Best Practice Learning Network' for the Skilled Level of the Knowledge and Skills framework, to supplement the five new online self-directed learning modules released by NHS Education Scotland. The aim of the network was to engage 20 'non-specialist' frontline staff in a blended model of learning over a period of five months. Five sessions were scheduled between August and December 2021 – four sessions went ahead. Between 22 and 25 people signed up to each session from a range of statutory and third sector services.

Between 9 and 17 people attended each session – non-attendance was high for final two sessions. When apologies were sent for non-attendance, reasons given were often that they had got caught up with a patient/client, which is perceived to be a barrier in engaging frontline workers. Of the people who attended the network sessions and provided feedback, it was clear from their comments that they felt that the network sessions had added value to their learning and that they valued the opportunity to take part in discussion about the topic in order to reinforce their learning.

**"The network helped to refresh and consolidate my learning"**

**"A good opportunity to learn from peers"**

**"It was good to be able to reinforce the learning by having discussion with others and looking at examples"**

## Child Healthy Weight (CHW)

### Healthy Beginnings

We are now in year 2 of the Healthy Beginnings: MAP of Behaviour Change Learning Programme. The training programme developed by NHS Education for Scotland (NES), with support from teams at NHS Borders, and Scottish Borders Council. This training provides practitioners working in Early Years services with the opportunity to enhance existing skills and learn new behaviour change skills and techniques around child healthy weight, physical activity and good oral health.

### Trauma Informed Practice

**55 participants**

**School Nurses, JHIT Staff, CHW Dietitian's and Health Visitors**

### CHW Toolkit Training - Mop up Sessions

**14 practitioners**

**School Nurses, Nursery Nurses and Health Visitors**



# Priority 1

## A SCOTLAND WHERE WE LIVE IN VIBRANT, HEALTHY AND SAFE PLACES AND COMMUNITIES

### Justice Service: Wellbeing Officer

People in the community justice system are likely to have poorer health outcomes than the general population with higher rates of premature death. They are more likely to experience the impact of poor mental health and engage in substance use. People often face issues of continuity of care between custody and community. Reducing inequalities by improving physical and mental health outcomes for people in the community justice system is a key priority, as well as helping to reduce re-offending.

A partnership between JHIT and the local Community Justice Board has led to the recruitment of a fixed-term post within the Justice Social Work Team to improve health outcomes for people in the community justice system, in particular those who are at risk of offending or who have a community payback order of 12 months or less.

#### Engagement Data for the period 7.09.21 to 31.12.21 demonstrates:

101

Productive engagements between Wellbeing Officer and Justice Service users

- Telephone calls were the most common method of engagement due to Covid-19 restrictions

The Wellbeing Officer has supported the Reconnect Women's Service to facilitate presentations including:

- Healthy eating
- Sexual health & screening
- Mindfulness and self-care
- Oral health

#### Referral & Signposting Data for the period September 2021 to March 2022 demonstrates:

- 62 referrals were made to other support services/organisations
- 25 referrals to Oral Health
- 11 referrals to Wellbeing Service and Renew
- Referrals were also made to:
  - Borders Addiction Service
  - We Are With You
  - Penumbra
  - Thistle Foundation
  - Wellbeing Scotland & other Voluntary organisations

#### Contact with service users between January and March 2022 has focussed on:

- Providing emotional and wellbeing support
- Recognising people are struggling with long waiting lists for referrals to services
- Developing an offer of 4 counselling sessions with a good level of uptake

# Priority 1

## A SCOTLAND WHERE WE LIVE IN VIBRANT, HEALTHY AND SAFE PLACES AND COMMUNITIES

### Whole Systems Approach (WSA) Eyemouth



Scottish Borders is one of three Early Adopter Areas who have been identified to develop and test a whole systems approach to diet and healthy weight. The WSA methodology has been used successfully in England and Scottish Government has provided funding to access training from Leeds Beckett University for early adopter sites.

A WSA is one method of delivering on these ambitions and can be defined as applying systems thinking and tools that enable an ongoing, flexible approach by a broad-range of stakeholders to identify and understand current and emerging public health issues where, by working together, we can deliver sustainable change and better lives for the people of Scotland<sup>1</sup>.

This work is intended to promote healthy weight and make a contribution to reducing childhood obesity, mitigating health inequalities and improving community health and wellbeing. Phase 1 funding focussed on community engagement to develop a shared understanding of the WSA agenda and identify community priorities.

Phase 2 funding is in place to enable the Eyemouth community to lead on activities that meet these priorities.

Following delivery of three (digital) workshops with local stakeholders and development of a prioritised action plan a further £50,000 grant for Phase 2 was approved in December 2021 to deliver on the following themes:

- Communication
- Family participation and learning
- Outdoor activities

The work has been driven by a local multi-agency Working Group and is supported by a partnership Governance Group. The Working Group met weekly until Spring 2022 when it reduced to fortnightly meetings following the development of themed locality working groups that are now leading on specific actions linked to the priority themes outlined below.

#### The Locality Working Groups include:

##### Communication

- Eyemouth Living magazine

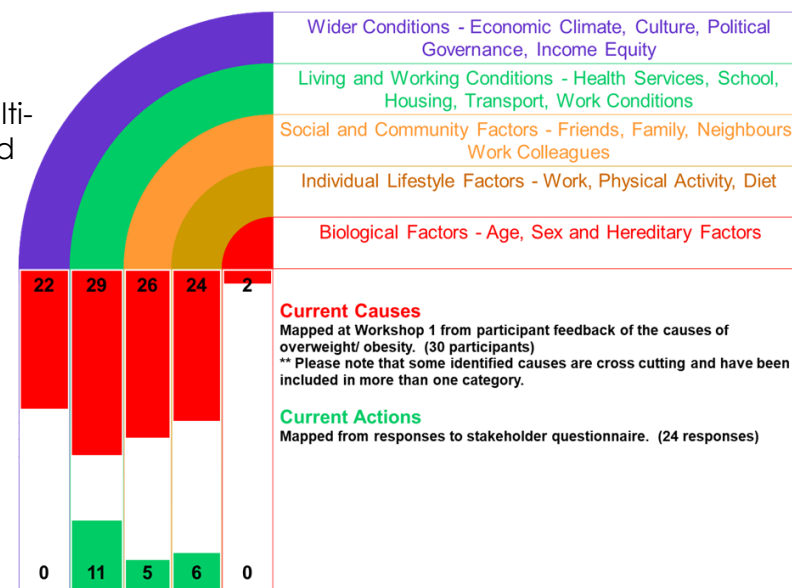
##### Family participation and learning

- Book boxes
- Play spaces
- Community lunch/café
- Visual map (featuring walks, access to drinking water etc.)

##### Outdoor activities

- Junior parkrun
- Cycling
- Outdoor activities including cooking

#### Current Causes of Obesity and Current Actions



<sup>1</sup>Public Health Reform. 2019. *Enable a Whole System Approach to Public Health*. Available from: <https://publichealthreform.scot/media/1520/phob-enabling-the-whole-system-to-deliver-the-public-health-priorities-paper-22.pdf> [Accessed 12 October 2019]

# Priority 2 A SCOTLAND WHERE WE FLOURISH IN OUR EARLY YEARS

## Maternal and Infant Nutrition Breastfeeding in Borders (BiBs)

In 2021, after consultation with current BiBs volunteers, we re-branded 'Breastfeeding in the Borders Support' to 'Breastfeeding in the Borders' (BiBs) and created a new logo to fit the service. The consultation identified that the word 'support' could hold negative connotations for mothers so we removed this from the title. We asked the volunteers if they could make any changes to the logo what would they like to see. Responses came back highlighting that having more than one 'person' would give the impression that mother and baby are not alone, from this the new logo was developed.

22  
Local BiBs



864 births  
Of which 514 were breastfeeding  
321 saying yes to receiving  
BiBs support  
182 women received support

Follow up communication was sent out to all mothers who used the service 26% responded. From that:

- 50% said they found the service useful
- 27% said it was great to know the service was there if needed
- 17% said it helped them feed for longer
- 4% said it gave them reassurance

Moving forward into 2022/23 the BiBs service will aim to reinstate face-to-face breastfeeding groups across the Scottish Borders and reintroducing volunteers onto the postnatal ward.

Quotes from service users:



## Breastfeeding Friendly Scotland



Breastfeeding Friendly Scotland provides businesses with information and resources to support women to feed their babies in their premises.

28  
Local businesses signed up as breastfeeding friendly



# Priority 2 A SCOTLAND WHERE WE FLOURISH IN OUR EARLY YEARS

## Community Food Work

We have continued to work digitally to support wellbeing in the early years. Following the changes in COVID-19 restrictions we were able to restart our in person Breastfeeding Groups. Feedback from breastfeeding mums is that this is the preferred option, however, we will continue to offer virtual weaning groups as these are helpful for people who live further from town or who have other circumstances which make it difficult to attend in person.

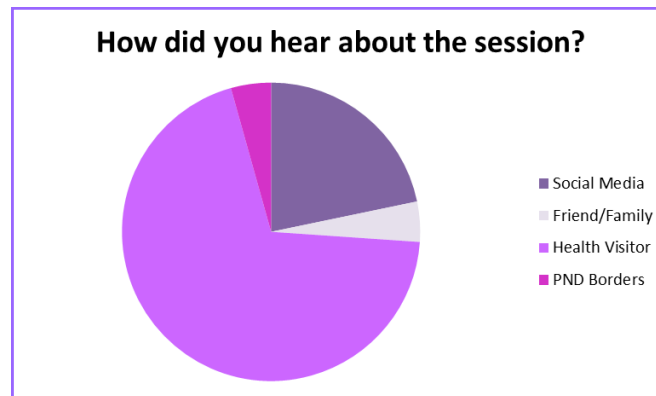
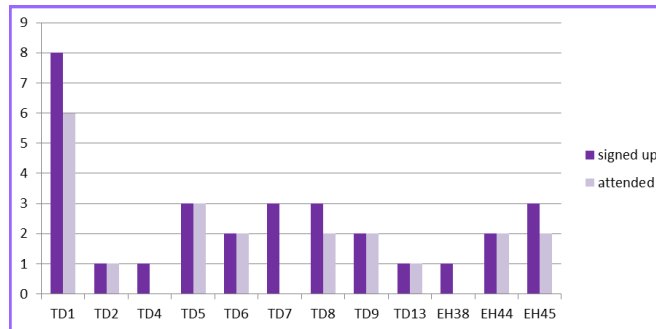
We are also continuing to offer health and wellbeing messages through our Bumps, Babies and Beyond Facebook page and we are growing our audience over time.

## Virtual Weaning

100% of families who completed an on-line or verbal evaluation said 'yes' when asked if they found the session helpful.

Signed up - 31  
 Attended - 23 families +  
 9 student nurses

Attendance from postcode area can be seen in the graph below.



Quote from service user:

"I was glad to have the opportunity to ask questions about my baby's weaning issues and receive strategies to support"

## NHS Borders Bumps Babies and Beyond Facebook Page



Posts  
119

Engagement  
64,745

Likes & Reactions  
669

Shares  
298





# Priority 3 A SCOTLAND WHERE WE HAVE GOOD MENTAL WELLBEING

## Partnerships Adults Mental Health Improvement and Suicide Prevention Steering Group

This multi-agency group is chaired by the Public Health Lead for Mental Health / Wellbeing Service Lead.

### The outcomes worked on by the group were:

1. Promote (increase) good mental health and wellbeing, in partnership
2. Reduce inequalities in wellbeing
3. Reduce the number of completed suicides in the Borders

### Some key actions in support of those outcomes were:

- Through our partnership with Breathing Space we strengthened the link to NHS24 help and support for people experiencing low mood, depression or anxiety, supporting the launch of a further two 'Breathing Space benches' across the Borders, at Borders College Galashiels campus, and Newcastleton
- Working alongside Breathing Space and Scottish Rugby, we built up an effective

partnership to support the mental health improvement and suicide prevention approach at six rugby clubs across the Borders

- We worked with Alchemy Film and Arts and the After A Suicide Working Group to co-produce a film about being bereaved by suicide, which premiered at the Scottish Mental Health Arts Festival in May 2021
- Supported LGBT Equality to re-establish and develop 'Café Polari', regular meetings for LGBT people to connect, in recognition of this group being more at risk of poor mental health and suicide
- Conducted a literature review and stakeholder workshop to explore the mental health experiences of communities of colour in rural areas
- Connected with a number of other partners to bring Andy's Man Club to the Rugby Club in Galashiels to provide a monthly peer to peer support meeting for men in the Borders, following the Men's Mental Health Survey
- We are participating in a national pilot to develop a multi-agency suicide review process with partners aimed at disseminating of learning around

suicide prevention and developing a local evidence base for targeted interventions

### New Partnerships Covid-19 Response

We were a key partner in the allocation of the Adult Communities Mental Health and Wellbeing Funding that was part of the Scottish Government's response to the mental health impacts of Covid-19. Alongside Third Sector Dumfries and Galloway who were administering the fund, we contributed to both the Steering Group and Scoring Panel that distributed over £1.1 million to grassroots organisations in the Borders, targeting all areas and key groups of vulnerable people. Over forty groups and organisations received funding which ranged from £500 for Duns Senior Citizens Club to £99,725 for the Cyrenians OPAL (Older People, Active Lives) project.



# Priority 3 A SCOTLAND WHERE WE HAVE GOOD MENTAL WELLBEING

## Partnerships (cont.) Mental Health and Wellbeing for Children and Young People

### Community Mental Health and Wellbeing Supports and Services Framework

#### Objectives:

- Every child and young person in Scotland will be able to access local community services which support and improve their mental health and emotional wellbeing
- Every child and young person and their families or carers will get the help they need, when they need it, from people with the right knowledge, skills and experience to support them

This will be available in the form of easily accessible support close to their home, education, employment or community.

Within The Scottish Borders the work is led by multi-agency partners within the Project Board and Operational Team; JHIT sit on both groups. The governance and decision making sits within Scottish Borders

Children and Young People's Leadership Group.

The areas of work being progressed and implemented are as follows:

- Create a Service Directory that ensures clear pathways to mental health support in the Scottish Borders
- Conducted a training needs analysis
- Development of training calendar
- Commissioning additional services for Young Carers/LGBT/BAME
- Independent Social Research Survey
- Implementation of Kooth & Togetherall digital platforms covering 11-18 year old age group & 16+ age group, respectively



### Early Intervention & Prevention Emotional Health & Wellbeing

The Children and Young People's Early Intervention and Prevention Emotional Health and Wellbeing Group is a partnership group chaired by JHIT. Our overall aim to embed the Taskforce

and Scotland's Youth Commission on mental health recommendations with a focus on early intervention and prevention for children & young people aged 3 - 18yrs.

Our outcomes are two fold:

- To have good mental health & well-being in our children and young people
- Build capacity and capability within our communities and workforce, creating healthier future and life chances

The governance of the group sits with the Children and Young People's Leadership Group

Scottish Borders are the first local authority in Scotland which has committed to taking a whole authority approach and are working with partners across Scottish Borders to deliver a number of projects. These include work on See Me, Mental Health Awareness, Self-Harm Awareness and Growing Confidence.

# Priority 3 A SCOTLAND WHERE WE HAVE GOOD MENTAL WELLBEING

## Work in Schools The See Me Schools Mental Health Initiative

See Me Toolkit: Tackling Mental Health Stigma and Discrimination in Schools. The ambassador in schools model enabled young people to become Mental Health Ambassadors/Peer Supporters across all of our 9 high schools.



2021—2022

41 staff

78 young people  
participated in the programme

90

Mental Health  
Ambassadors / Peer  
Supporters across 9 high  
schools

## Mental Health Awareness Sessions

An introduction to Mental Health Awareness Session delivered to all S6 pupils between June - September 2021, supported by our local ambassadors.

## Self-Harm Awareness

All of us in Scottish Borders who work with children and young people are committed to keeping them safe and promoting their wellbeing. The revised 2022 multi-agency self-harm guidelines are intended to assist professionals through the process of supporting a child or young person who may be at risk of self-harm or suicide.

## Growing Confidence

Growing Confidence offers complementary training courses across all of the Scottish Borders to promote positive mental health and emotional wellbeing. Our aim is to enable individuals to promote emotional health and wellbeing (EHWB) in themselves and the children and young people they are responsible for:

- **Parents**

- Raising Children with Confidence: Parents with Primary aged school children
- Raising Teens with Confidence: Parents with Secondary aged school children

- **Staff**

- Confident Staff, Confident Children: Staff working with Primary aged Children: Supporting Young People: Staff working with Secondary aged children

- **Children and Young people**

- Building Resilience Year 4 (2021/22): Primary children P1 - P7
- Cool Calm and Connected: resource for S2 young people



# Priority 4

## A SCOTLAND WHERE WE REDUCE THE USE OF AND HARM FROM ALCOHOL, TOBACCO AND OTHER DRUGS

### Wellbeing Service

The service provides evidence based, early interventions to support lifestyle change to increase physical activity, reduce weight and eat healthily, quit smoking and improve emotional wellbeing. The service is currently delivered via telephone, video call and face to face in GP surgeries. During COVID-19 all consultations have been offered by telephone or video call.

#### Referrals

The Wellbeing Service is embedded into primary care and operates across the Borders. We received 1754 new referrals from 1 April 2020 to 31 March 2021 and 1491 from 1 April 2021 to 31 March 2022. Both years were impacted by COVID and in 2021-22 the Renew Service was introduced into Primary Care which removed a proportion of our mental health referrals. This change can be seen in table 1 across which shows the distribution of referral by topic.



### Wellbeing Service

Live Well Feel Better

**Table 1: Referrals by Topic 2020-2022**  
(based on data where a referral reason is known)

Discharge date	Mental Health	Smoking	Lifestyle
2020/21	66%	22%	12%
2021/22	55%	29%	16%

April 2021 - March 2022  
**10,176 consultations**

#### Patient Experience

Care Opinion is an online platform which allows people to share their experiences of using our service in a safe and simple way. We use these stories to help inform service improvements. Care Opinion builds on our existing patient feedback methods.

*“My problem is communicating with my daughter. Trying to reassure her and help her seemed impossible. It had been going on for years. I asked her to get help, but I wasn’t sure if she would, so I decided I also needed help in order to help her through this. I did this in November last year, which I must say was the best thing I have ever done. Talking to someone who listened and understood what I was going through was quite an eye opener. I found her guidance helpful. She suggested things to help me deal with the situation and I finally found a way to cope, clear my head of the muddle, function on a daily basis without breaking into tears and sleeping through the night. I was better able to see my way forward with hope that things could get resolved, It may take a long time but at least I’m in a better place, mentally and physically, to deal with this and get back on track with my daughter. I would like to thank those at wellbeing service for all the support I have had”*



# Priority 4

## A SCOTLAND WHERE WE REDUCE THE USE OF AND HARM FROM ALCOHOL, TOBACCO AND OTHER DRUGS

### Wellbeing Service (cont.) Improved Health Outcomes



**Wellbeing Service**  
Live Well Feel Better

### Improved Health Outcomes

**April 2021 — March 2022**

<p><b>Improved mood</b> — moderate low mood to mild low mood <b>PHQ9</b> (- 3.5)</p>	<p><b>Reduced Anxiety</b> - moderate to mild <b>GAD7</b> (-2.1)</p>
<p><b>92 Smoking Quits</b> (57 in 40% most disadvantaged areas) (6 months data)</p>	<p><b>Psychological Therapies delivered</b> <b>680</b></p>
<p><b>Alcohol Brief Interventions</b> <b>121</b></p>	<p><b>Physical Activity</b> More people meeting CMO guidance</p>
<p><b>BMI &amp; Weight</b> Decrease in mean weight by 3kg</p>	<p><b>37%</b> people reported having a good diet following support vs. 6% at start</p>

**Need to contact us**

@	wellbeing@borders.scot.nhs.uk
www	www.nhsborders.scot.nhs.uk/wellbeing
☎	01896 824502

NHS

Borders

### Smoking Cessation

We identified 3 small projects to achieve improvements in our quit rates across the Borders

- Smoking in pregnancy - a small working developed a range of support on offer to pregnant smokers. This included improved liaison with midwifery teams, an improved referral procedure and training for wellbeing advisers. Data coming through for the year ahead shows more than twice as many quits are being achieved than in 2020/21
- Improving data collection – through training, regular CPD and the creation of standard operating procedures we have sustained improvements in both data collection locally and the recording of within the national database
- Supporting Community Pharmacies - Following up on 12 week quits 'lost to follow up' contributed 8 additional quits in the LDP target in 2020/2021. We increased contact

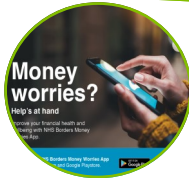
with pharmacies, put in place joint social media promotions and provided promotional materials to help increase referrals into Pharmacy smoking cessation services. In addition, we offered training to pharmacies to upskill staff in smoking cessation

This work has helped us increase the number of successful quits overall but has shown a marked increase in the number of successful quits at three months in our 40% most deprived communities from 79 in 2020-21 to 97 in 2021-22. The number of successful 3 month quits subject to change due to reporting lag for quit dates set February-March 2022.



# Priority 5

## A SCOTLAND WHERE WE HAVE SUSTAINABLE, INCLUSIVE ECONOMY WITH EQUALITY OF OUTCOMES FOR ALL



### NHS Borders Money Worries App

NHS Borders have continued to work in partnership to build on the successful launch of the Money Worries App. The App is a digital directory with links to help with:

**Money - Health - Housing - Work**

#### Data for 2021-2022

We had a total of 444 downloads between 1<sup>st</sup> April 2021 and 31<sup>st</sup> March 2022. People using the App are engaging in more than one session, this suggests they are accessing support in more than one area.

April 2021 - March 2022	
Activity	Amount
<b>Total Users / Downloads</b>	<b>444</b>
<b>Screen Views</b>	<b>1494</b>
<b>Sessions</b>	<b>736</b>

We have invested time in the development of a 20 minute information session to:

- Raise Awareness of the App

- Encourage 'real-time' download
- Enable staff to signpost people to the App

#### Information sessions have been facilitated with:

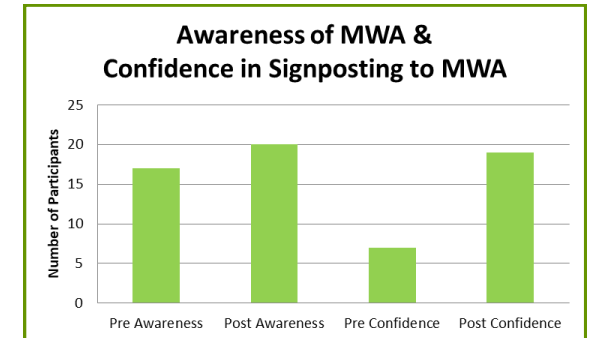
- Scottish Borders Council Community Hubs
- NHS Borders Contact Tracing Team
- NHS Borders Community Testing Team
- Live Borders Library Services
- Scottish Borders Council CLD Youth and Adult learning services
- Home Energy Scotland
- Elected Members

#### Real time evaluation has confirmed staff:

- Are confident to talk about money
- Sessions have raised awareness of income maximisation support

#### The chart across demonstrates pre and post session impact:

- Staff are more aware of the App post session
- Staff have increased confidence to signpost people to the App post session



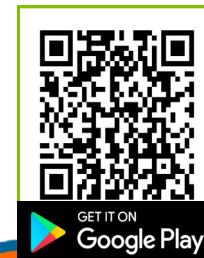
#### Feedback from partners about the App

"If a family express concern about money, I will signpost them to the App"

"Really useful tool"

"It takes little storage space and offers a wealth of information at your fingertips"

#### Download the Money Worries App here





# Priority 5

## A SCOTLAND WHERE WE HAVE SUSTAINABLE, INCLUSIVE ECONOMY WITH EQUALITY OF OUTCOMES FOR ALL



### Low and Slow A holistic approach to address food and fuel poverty

NHS Borders JHIT worked in partnership with Changeworks, Morrisons Supermarket and Burnfoot Community Futures to launch a successful Low and Slow project across Hawick and Newcastleton. This eight week project aimed to reduce fuel and food bills by providing a home energy assessment, advice & support and slow cooking recipes.

#### Outcomes

*Feedback from participants suggests Low & Slow demonstrates a collective impact:*

- The project led to food and fuel savings
- Increased confidence to cook using a slow cooker
- Having more time to spend with family

*Low & Slow also impacted on individuals*

- 1 participant has been awarded £1200 towards energy debt
- 1 participant has been signposted to Citizen's Advice Bureau

#### Example in action

A Low & Slow participant was signposted to Changeworks following an unexpected rise in their energy bills. Changeworks contacted their energy supplier and shared feedback with the participant about small changes they could make. As a result of these changes their energy bills dropped by 50%!

#### Key Facts

- Slow cookers cost as little as 5p/hour compared to an electric oven at 44p/hour
- There are lots of small ways to save on your energy and food bills here:

#### Top Ten Energy Saving Tips

### Community Benefits Gateway



#### Is now live in the Scottish Borders!

The Gateway aims to connect Third Sector organisations and NHS Scotland suppliers who may be able to support local project needs with an 'in kind' offer.

An 'in kind' offer could include: volunteering, work placement opportunities, professional advice, capacity building training, assistance to build community facilities and much more!

A partnership group has been established to review applications on the basis of three priorities:

- Reducing Health Inequalities
- Contributing to Anti-Poverty Work
- Improving health & wellbeing

The Gateway is part of NHS Scotland's ambition to ensure that through all of our areas of work we bring maximum benefits to the people of Scotland.

#### Access the portal

[https://nhsns.service-now.com/community\\_benefit](https://nhsns.service-now.com/community_benefit)

#### See the short animation

[https://www.youtube.com/watch?v=RyeU\\_4-Ztg0](https://www.youtube.com/watch?v=RyeU_4-Ztg0)

# Priority 5

A SCOTLAND WHERE WE HAVE SUSTAINABLE, INCLUSIVE ECONOMY WITH EQUALITY OF OUTCOMES FOR ALL

## Financial Inclusion in Early Years

Financial Inclusion work is supported by the Money Worries Leaflet (2019) which is used by Health Visitors and Midwives. Referrals to Financial Support Team and total gains are noted below.

April 2021 - March 2022

**500 referrals**

A 35% increase in last years figures

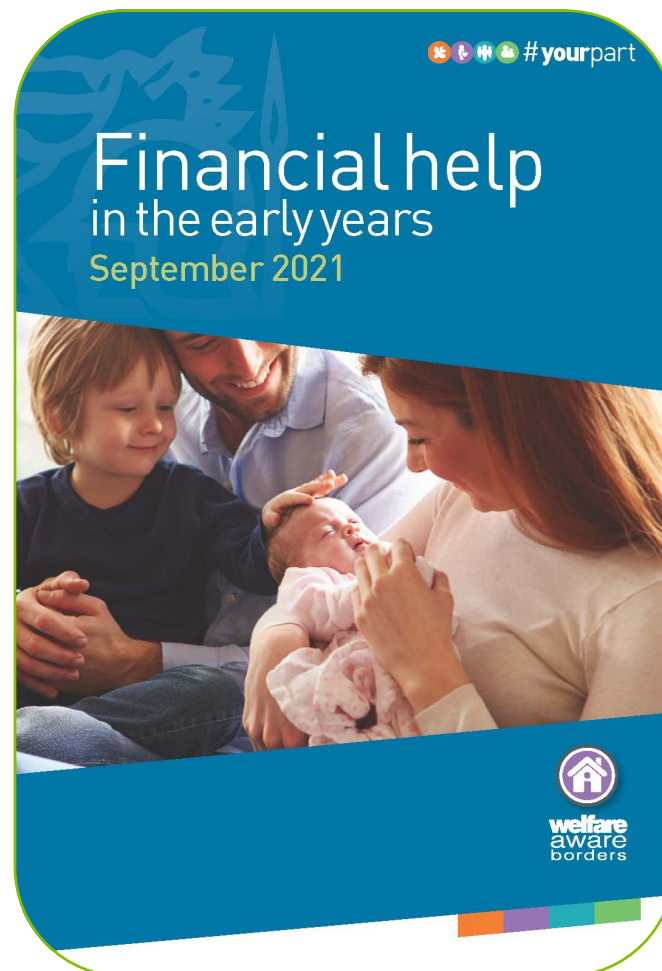
April 2021 - March 2022

total gains for pregnant women and families with young children

**£1.25 million**

Financial Help in Early Years leaflet was updated in September 2021

<https://www.scotborders.gov.uk/downloads/download/879/financial-help-in-the-early-years>



## Best Start Grant



We continue to support the Best Start grant scheme.

March 2021 - March 2022

**1385**

Best Start and Best Food Grant applications made

72% of these applications were authorised in Scottish Borders, this is above the average for Scotland.

March 2021 - March 2022

Total gains for Scottish Borders families

**£379,070.00**

Best Start and Best Food Grant applications made



# Priority 6

## A SCOTLAND WHERE WE EAT WELL, HAVE A HEALTHY WEIGHT AND ARE PHYSICALLY ACTIVE

### Borders Child Healthy Weight Service

#### Fit4Fun Families



A new healthy lifestyle programme has been launched in the Scottish Borders; NHS Borders Child Healthy Weight Service: Fit4Fun Families.

This is a free family focused healthy lifestyle programme which offers practical tips to help support children, young people and their families aged 0 -18 years eat well and be active.

We work with individuals and families to identify specific goals that they would like to achieve, to give them the best support.

Children, young people and families can either be referred into the service by their GP, Health Visitor, School Nurse or another health professional or they can self-refer directly. Once referral received the Child Healthy Weight Management Team will triage into the most appropriate programme and level of support.

Fit4Fun Families is delivered by an experienced team in either a group or 1:1 setting depending on requirements and is available both face to face and via NearMe.

The feedback received from families who have participated in the programme include:

#### Family Quote

**“We have really enjoyed the Fit4Fun Families programme. It was arranged at a time that was convenient so we could both participate. Sessions have been fun and informative and at a level that suits the age of any child. The pack we received is full of useful information and recipes. We also received bats, balls, bean bags and skipping ropes which my daughter is thoroughly enjoying playing with.”**

Communications regarding the service and how to refer has gone out to health professionals and training for health professions on the Borders Child healthy weight toolkit, pathway, referral process and programme is on-going.

All parents/guardians of primary and secondary school aged children will receive information about the service in May 2022.

**We have received 72 referrals into the service.**

By Age			
Under 5	6 to 11	12 to 17	18
18	29	25	0

By Source		
AHP	CAHMS	Consultant
8	3	18
Education	GP Practice	Health Visitor
1	15	12
Other Health Professional	School	Self
2	5	8

By Participation		
Active	Complete	Declined
18	29	25

# Priority 6

## A SCOTLAND WHERE WE EAT WELL, HAVE A HEALTHY WEIGHT AND ARE PHYSICALLY ACTIVE

### School Holiday Programmes

#### Langlee Youth Club

School holiday programmes are available for children, families and young people across the Scottish Borders. Building on the success of previous years, programmes have been led by our Local Authority and Third Sector partners in a range of settings. Health Improvement have added value to the work of partners in localities where possible. One example is Langlee Youth Club who supported young people to engage in new outdoor activity experiences. JHIT have supported this approach providing healthier snacks for the 31 participating young people.

#### Direct feedback from partners demonstrates the impact

*Thank you so much for your support for our youth club this year. The donation of the fruit and water was very much needed after a busy day at Blair Drummond Safari Park. We took 31 young people on a bus trip, which was a first for some of them.*

This example demonstrates value, with a high impact and low cost health improvement contribution to an existing community led summer programme. This has enabled young people to eat well, have a healthy weight and be physically active, while having fun at the same time.



### Paths to Health - Walk It

Walk It - The aim of the Paths to Health Walk it Project is to support and develop walks in all locations in the Scottish Borders. Walk-It forms part of the national initiative to improve Scotland's health. The project is co-funded by NHS Borders and Scottish Borders Council. Walk-It aims to:

- Encourage exercise as part of a healthy lifestyle
- Promote walking as a way of getting fit & managing stress
- Create a safe, social and inclusive walk
- Build links with partners and networks
- Recruit, train & support volunteers
- Have fun!

In 2021-2022 Walk It was delighted to gain additional; funding from Paths for All to deliver two brand new projects: -

#### Walk It – 1-1 Buddy Walking

1-1 with a client and a Walk Leader.

#### Walk It Easy

Small groups set up for those for whom half an hour would be a long enough walk, those with reduced fitness, confidence or a decline in Mental Health, anxiety, wellbeing (post covid) or those with a mobility issue (wheelchair, scooter, walking sticks) or those with a learning disability or dementia diagnosis. We are half way through this project and are delighted to have opened in Kelso, Lauder, Duns and Ayton so far with Galashiels next in plan.



# Looking Forward / Next Steps

**Key pieces of work for 2022-23 build on our existing work to include:**

## **Mental Health Improvement and Suicide Prevention**

### • **Children & Young People**

Implement a programme of information and training related for everyone who works with children and young people and develop a training for trainers model to support implementing and use of self harm guidelines and co produce a community asset map

### • **Adults**

- Embed a Public Mental Health approach in our new Mental Health Improvement and Suicide Prevention action plan. Themes for this have been co-produced with stakeholders including partners and people with lived experience and are:

- \* Promoting mental health and wellbeing
- \* Preventing suicide and self-harm
- \* Reducing mental health inequalities
- \* Improving the lives of people experiencing and recovering from mental ill health

- We are building better links and increasing engagement with the locality structures in the Borders

## **Children's Rights**

The Maternal & Child Health Committee (MCHC) has agreed as part of their workplan to implement the UNCRC (Article 12: All children have the right to have their view heard and for it to be taken seriously), and fundamental of The Promise 2021-24 Plan (Listening). This will include identifying routes for children's voices to be heard within NHS Borders and building awareness throughout the organisation.

## **Substance Use Education**

In partnership with Education implement a tobacco related programme for all Primary 1 pupils using the Jenny and the Bear resource which raises awareness of the health and wellbeing challenges of second-hand smoke through the story of a little girl (Jenny) and her Bear.

## **Whole Systems Approach (WSA)**

Support implementation, evaluation and sustainability planning for WSA in Eyemouth.

## **Need to contact us**

@ health.improvement@borders.scot.nhs.uk

✉ Joint Health Improvement Team, The Old School Building,  
Scottish Borders Council HQ, Newtown St Boswells, TD6 0SA

☎ 01835 825970