

Our lifestyles and healthy behaviours across the life course – Overview of progress and performance indicators

Update to Health and Wellbeing Board,
March 2024



North
Tyneside
Council

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Relevant Partnership Boards:

North Tyneside Drugs Alliance
North Tyneside Healthy Weight Alliance
North Tyneside Living Well and Ageing Well Locally Board
North Tyneside Strategic Alcohol Partnership
North Tyneside Tobacco Alliance
Northumbria Healthcare Inequalities Programme Board

Introduction

The Implementation Plan for the 'Our lifestyles and healthy behaviours across the life course' strand of *Equally Well* sets out several the short term and long-term outcomes and proposed KPIs. As noted in the strategy, major change to reduce health inequalities will not happen overnight, so we will be seeking gradual improvements in these indicators and a reduction in inequalities between different localities across North Tyneside. However, current reporting and data recording arrangements mean that some indicators are only reported at a local authority level, and some indicators are not frequently updated.

Also, progress against these outcomes and indicators is set against the current context of ongoing recovery the COVID-19 pandemic and cost-of-living crisis on people's health behaviours and lifestyles more generally. Our communities were not affected equally by the pandemic and will not be affected equally by the consequences of the cost-of-living crisis.

The Implementation Plan sets out six key performance indicators, however where this data is not available at a recent or granular level, some proxy indicators or anecdotal indicators can provide some local context and detail on progress in disadvantaged groups. This report provides additional detail to supplement the report to the Health and Wellbeing Board in March 2024 and data was taken from the sources listed in that report. For most indicators, more detail is available on request.

Overarching indicators

There are ambitions to improve life expectancy and healthy life expectancy for all our residents and reduce the gap between the most and least deprived areas. 'Life expectancy' is the average number of years a person would expect to live based on current mortality rates. 'Healthy life expectancy' is the average number of years a person would expect to live in good health, based on current rates. It is important to note that these are average values for the population, based on the current context.

The most recent data has already been shared with members of the Health and Wellbeing Board. It shows that that life expectancy is lower in North Tyneside than the England average, but there are differences at a ward-level. Healthy life expectancy is also lower and shows that women in North Tyneside can expect to live longer than men but may spend longer in ill health.

Inequalities in life expectancy and healthy life expectancy are driven by a range of factors, as set out in *Equally Well*. This includes some of the key health behaviours and risk factors covered by the 'Our lifestyles and healthy behaviours across the life course' implementation plan.

Tobacco

There are ambitions to:

- Strengthen treatment pathways for people who smoke to encourage them to quit
- Reduce the exposure of children to second-hand smoke
- Reduce the exposure of residents to illicit tobacco
- See an overall reduction in smoking, particularly across our most disadvantaged areas.

Smoking is one of the biggest drivers of inequality. A partnership approach through the North Tyneside Tobacco Alliance has ensured there is a close alignment between the ambitions of the NHS Long Term Plan and local delivery, particularly around some priority population groups e.g., hospital inpatients and pregnant smokers.

The numbers of people who smoke is falling. Data for 2022 shows that 11.2% of adults in North Tyneside were current smokers, which is less than values for England and the North East. However, rates are not uniform across the population and people are more likely to smoke if they are:

- Male
- Working in a manual occupation
- Renting from the local authority rather than owning their home.
- Living with a serious mental illness or long-term mental health conditions
- Receiving treatment for substance misuse

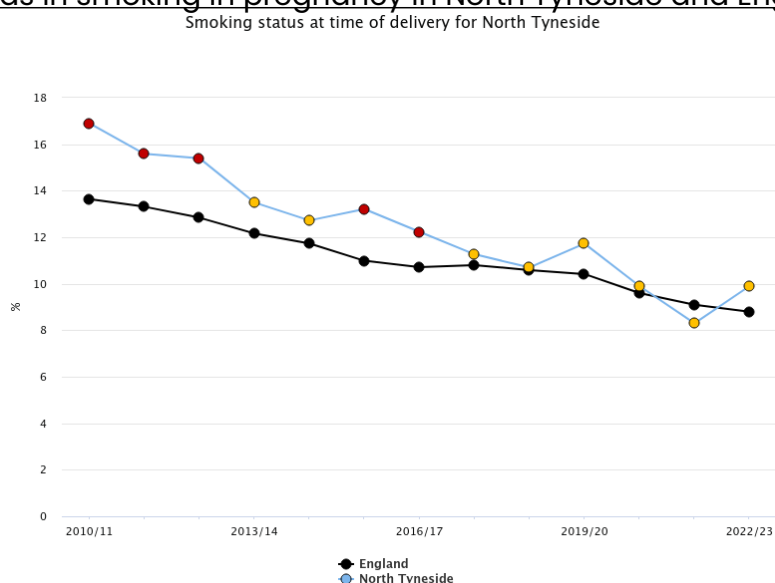
National data also shows that people living in more deprived areas were more likely to smoke than those in the least deprived.

In 2019/20 there were over 2,700 hospital admissions in North Tyneside that were attributed to smoking. Considerable work has been undertaken in Northumbria

Healthcare NHS Foundation Trust (NHCT) and to date in 2023/24 1,132 inpatients identified themselves as smokers. All were given 'Very Brief Advice' and 285 (25%) accepted support to quit.

Published data for 2022/23 shows that 9.9% of pregnant women in North Tyneside were smoking at the time of delivery. Whilst this is slightly higher than the previous year, this not a statistically significant change and remains the lowest rate in the North East. Figure 1 below shows that smoking at the time of delivery rates is falling nationally (black circle) and locally (yellow and red circles) over time. Data held by NHCT shows that rates are currently lower than the published rate as progress has continued in 2023/24, with the use of additional interventions and resources.

Figure 1 – Trends in smoking in pregnancy in North Tyneside and England



As previously reported, the Best Start in Life pathway is now in place in NHCT to support pregnant smokers to quit. Data held by the service shows that, to date in 2023/24, 8.3% of women who booked their antenatal care with the Trust identified as smokers at their booking appointment. However, as expected this was not distributed evenly across all pregnant women. Women aged 20–24 years were most likely to smoke and rates were much higher in women from more deprived areas, with 16% of women from the 20% most deprived areas identifying as smoking at the time of booking, compared to 2% of women from the 20% least deprived areas. At a ward-level, whilst numbers are small, there is also variation, with no women from St Mary’s and Monkseaton North identifying as smokers at their booking appointment, compared to 20% of women from Riverside and Chirton.

Data held by NHCT also shows that 12% of women in the 20% most deprived areas were smoking at the time of delivery compared to 2% in the 20% least deprived areas. Numbers at ward level are too small to provide any robust analysis,

although it does appear that generally rates are higher in wards with higher levels of deprivation, but this was not the case in every ward. Whilst numbers are small, there is also variation at ward level.

Operational work continues locally and regionally to reduce the exposure of residents to illicit tobacco. North Tyneside Council, via Trading Standards and partners operates an intelligence-led approach to seize illicit tobacco (and vape products) and, where appropriate, take regulatory action. The detail of this work is discussed at the Tobacco Alliance and in other forums.

Alcohol

There are ambitions to:

- Support businesses to identify, support and signpost employees drinking at increasing and higher risk levels
- Reduce alcohol-related hospital admissions (adults and under 18s), particularly across our most disadvantaged areas
- Target schools, GP practices and other community services in areas with high rates of people being admitted to hospital due to alcohol to ensure that appropriate support is in place
- Identify people who require specialist alcohol support and ensure that they can access appropriate services
- Take steps to ensure that all residents are less likely to be affected by aspects of alcohol-related harm

People living in the North East tend to experience higher levels of alcohol-related harm than elsewhere in the country. The above areas have all been considered by the North Tyneside Strategic Alcohol Partnership and through contract management arrangements in the past 12 months. An Alcohol Health Needs Assessment provided a very detailed overview of the level of need in North Tyneside in relation to alcohol, including granular data on inequalities. This informed the new Alcohol Strategy for North Tyneside, which was published in December 2023 and will be overseen by the Partnership.

Alcohol-related hospital admissions for North Tyneside residents remain higher than the national average. As set out in the covering report to the Health and Wellbeing Board, the rate of alcohol-specific hospital admissions increased in 2021/22. Rates in adults were the 3rd highest in the region and 6th highest in the country. More recent data shows that admissions have continued to rise in 2023 (this will be published in due course).

The rate of alcohol-specific hospital admissions in under 18s from 2018/19 to 2020/21 was the highest in England and more than double the national average (this data was presented to the Board last year). However, local analysis provided

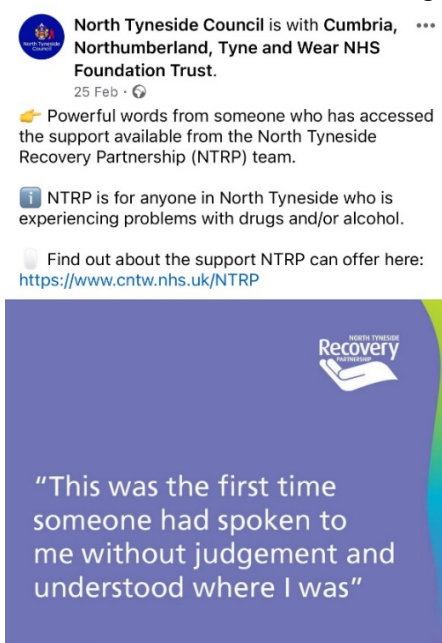
reassurances that this only relates to a small number of young people and admissions. Also, admissions appear to have fallen more recently, but currently there is no national comparator.

The most recently published data shows that there were just under 600 North Tyneside residents in structured alcohol treatment at year-end for 2022/23. This is a decrease from the previous year, where numbers were at their highest level since 2015. Across 2022-23 there were just under 400 new alcohol presentations at North Tyneside Recovery Partnership (NTRP).

Information has previously been shared with the Health and Wellbeing Board about additional funding (known as SSMTRG) to support work around the new national Drug Strategy. Whilst much of this is focused on the drugs agenda (see below), additional funding has been used to increase capacity and options for alcohol treatment. There was an expectation that this would mean that numbers of people in treatment would increase over the 3-year funding period. Relatively early in 2023/24 it became clear that numbers were declining, and action was required to address this.

A detailed improvement plan is now in place and work is underway with multiple stakeholders, including a communications plan, to increase referrals and numbers of residents in alcohol treatment. Figure 2 below shows an example of communications to residents and the voice of people with lived experience is key to progressing this further. Data held locally shows that numbers into treatment for drugs and alcohol are now increasing. The data continues to suggest that residents in treatment continue to receive a high-quality service, with 100% of new referrals waiting less than the 3-week target.

Figure 2 – Social media post to raise awareness of drug and alcohol support



As part of the work linked to SSMTRG funding, a social work post has been funded to work between Adult Social Care and the NTRP. There has been considerable progress over the past 18 months, particularly around the 'residential rehab' pathway. This work has shown the benefits and impacts of this approach and has added value to existing collaboration. Work has taken a holistic approach, ensuring that those residents who are referred are ready to engage, and supporting those who are not ready to stay in treatment until they are. The work also proactively considered exit routes from the residential rehab pathway to ensure that aftercare is in place to maintain reduced intake or sobriety. Work has also strengthened processes around safeguarding alerts, which is a key intervention to support vulnerable residents with early intervention.

A high-level review of the NHCT Alcohol Care Team has recently been carried out to provide assurances around the service. All inpatients within NHCT are asked about their alcohol consumption by an Alcohol Health Coach (via an 'Audit C' checklist) and within the period under review, 34% of patients disclosed consumption at a level that required a 'brief intervention' (over 2,000 episodes). The nurse specialists within the service also carried out over 2000 assessments on over 1,200 patients (i.e. some had multiple attendances). The review showed that, where appropriate, the service refers residents for further support from NTRP and there are good links between the two services. Work will continue into 2024/25 to build on the findings.

The Integrated Care Board gave all areas in the North East additional funding to reduce the inequalities in access to healthcare faced by people with complex and multiple needs (such as alcohol misuse). Considerable multi-agency work has taken place in 2023/24 and a further update will be shared in the meeting on 28 March 2024.

Healthy weight and physical activity

There are ambitions to:

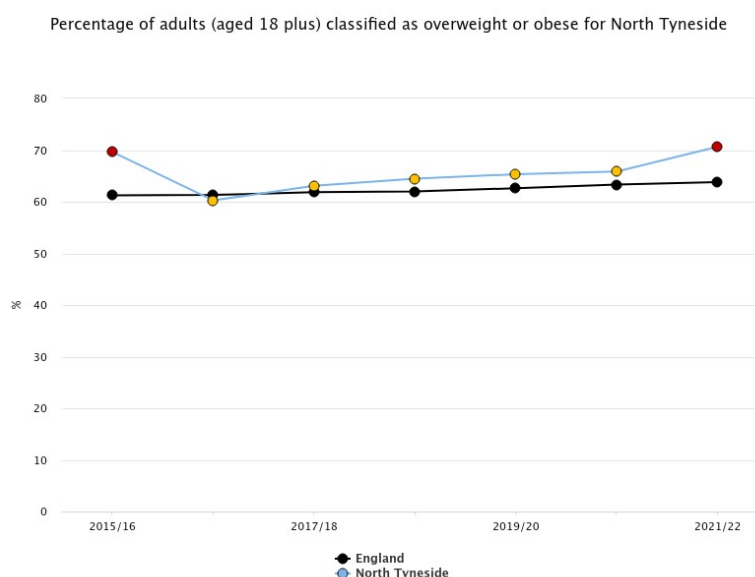
- Provide targeted delivery of bespoke management programmes in communities with inequalities
- Reduce the numbers of children with excess weight, particularly in our most disadvantaged areas. This in turn will support them to be and therefore support them to be less likely to become overweight as adults
- Deliver the Active North Tyneside programme to improve access to free/affordable behaviour change interventions and physical activity
- Embed and sustain learning from NHCT Active Hospitals pilot to increase physical activity in people in hospital and increase the capability and opportunities that health professionals have to do this

- Reduce the inequalities in health outcomes driven by the food environment and wider environment, leading to lower levels of excess weight and cardiovascular disease

Drivers of obesity are complex and involve multiple factors at an individual and environmental level. Tackling excess weight at a population-level is challenging and many of the available interventions focus on individual-level behaviour change when change is needed in the social, environmental, and commercial determinants that influence healthy weight. There are also known inequalities and certain communities are disproportionately affected, including those living in areas of deprivation, minority ethnic groups and people with learning disabilities. In addition, men are more likely to be overweight than women (but levels of severe overweight/obesity are slightly higher in women) but are also less likely to seek support.

The most recent data suggests that 70.7% of adults in North Tyneside are overweight or obese, which is higher than the England value of 63.8% and increasing. Figure 3 below shows the widening gap between adults in North Tyneside (the yellow and red circles) and the England average (the black circles).

Figure 3 – Trends in adults classified as overweight or obese (source, OHID)



Being overweight or obese can considerably impact on someone’s quality of life and is also a risk factor for many other health conditions. In 2022/23 there were 23 hospital admissions per 100,000 of the North Tyneside population where the primary diagnosis was obesity (e.g. people admitted to hospital directly because of obesity). This was higher than the England rate, but lower than the North East rate (the highest rate in the country) and an increase from the previous year. Where admissions included those with a secondary diagnosis of obesity (e.g.

people admitted to hospital for something else where obesity played a part in their condition), the rate increased to almost 2,500 admissions per 100,000 of the population. This was higher than the England and regional values and also an increase on the previous year. Both types of admission were higher in females.

As previously shared with the Board, there is a tiered approach to adult weight management. Tier 2 services are commissioned by the Local Authority (via the Public Health Grant) to provide more specialist or intensive support over a defined period (e.g., 10-12 weeks) to people meeting certain criteria. Following the withdrawal of additional Government funding, several local authorities opted not to commission Tier 2 services in 2023/24. However, there is an ongoing commitment to support this key area and continue to tackle inequalities in North Tyneside. By year-end in 2023/24, there will have been delivery of, or planned delivery of:

- Six cohorts of bespoke and co-designed Body Benefits programmes delivered by Active North Tyneside to people with learning disabilities and areas of deprivation (supporting approx. 90-100 residents to date)
- Three cohorts of the 12th Man programme, a bespoke programme for men, delivered by the Newcastle United Foundation (supporting 50 residents to date)
- An offer of funded places for 12-weeks of Slimming World membership for residents. To date in 2023/24 408 residents have activated a membership (based on a combination of surplus places from the 2022/23 allocation and the entire 2023/24 allocation)

Figure 4 – Social media post to raise awareness of the Body Benefits programme for people with learning disabilities



Tier 3 weight management support is commissioned and delivered by the NHS. As with most other areas, demand in North Tyneside far exceeds capacity, which means that residents must wait to access support. Additional funding has been secured from NENC ICS to deliver additional capacity from April 2024 to target inequalities. Whilst there was considerable media interest in new injectable therapies for weight management, the treatment is not yet available in Tier 3 services. Therefore, work has been undertaken to provide consistent information and manage the expectations of residents and primary care.

The most recent update of the 'Best start in life' workstream of *Equally Well* described the most recent data on excess weight in children in Reception. The National Child Measurement Programme (NCMP) provides data at ward-level, school-level and Borough-level on the percentage of children in Reception and Year 6 living with excess weight (overweight or very overweight/obese).

In 2022/23, over 1 in 5 children in Reception were living with excess weight (22.1%). This is a decrease from the previous year but remains higher than the England average (21.3%) and is still higher than pre-pandemic levels. However, it is the lowest prevalence in the North East. Levels of excess weight rose to over 1 in 3 children (36.1%) in the Year 6 cohort. This is also a decrease from the previous year and is slightly lower than the England average (36.6%). Again, this is the lowest rate in the North East.

As with previous years, the data shows that excess weight is not evenly distributed across the borough. Variation (and therefore inequalities) is generally more pronounced at the Year 6 stage, but some of the key differences are:

- Gender: Girls were more likely to be living with excess weight in Reception and boys in Year 6
- Deprivation: Children living in more deprived areas were more likely to be living with excess weight (45.3% (most deprived) vs 26.9% (least deprived) in Year 6)
- School level differences: When 3-years of measurement data is combined for the Year 6 stage, the school with the lowest prevalence had 9% of children living with excess weight and the school with the highest prevalence had 51.6%. Generally, schools in more deprived areas have a higher prevalence of excess weight, but not always.
- Ward-level differences: Generally, more deprived wards have higher levels of excess weight, with almost 50% of children in Year 6 in the Collingwood ward living with excess weight compared to 21.4% in Cullercoats. Figure x below shows this in more detail.

Figures 5 and 6 below show these differences in excess weight by ward in 2022/23.

Figure 5 – Prevalence in excess weight by ward in Reception, 2022/23

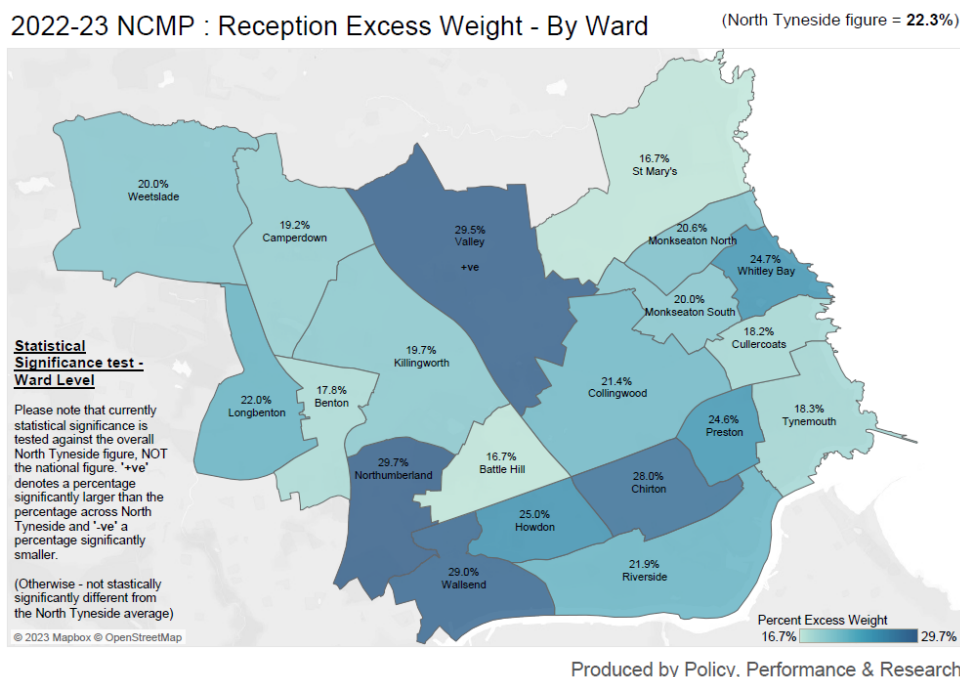
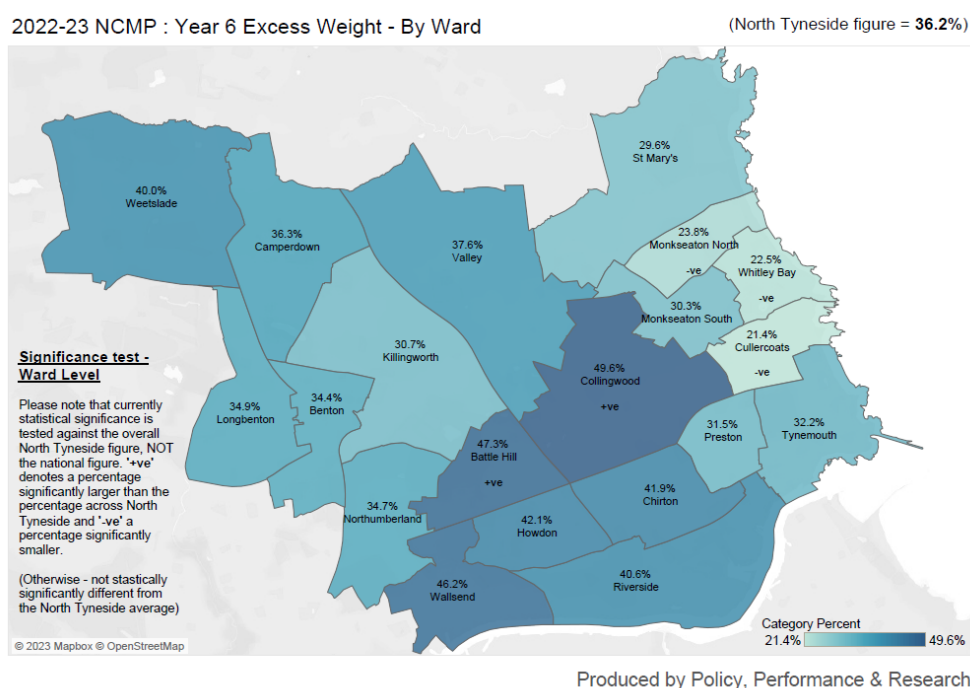


Figure 6 – Prevalence in excess weight by ward in Year 6, 2022/23



Parents and carers of children who are weighed and measured as part of the NCMP receive a letter detailing their child's height, weight, and weight category. These details are not shared with schools or directly with children (it is a parent's choice to discuss the results with their child). Families of children living with excess weight receive details of activities in the borough to support families to increase physical activity and support healthier eating. Families living in the most deprived parts of the borough with children categorised as very overweight also

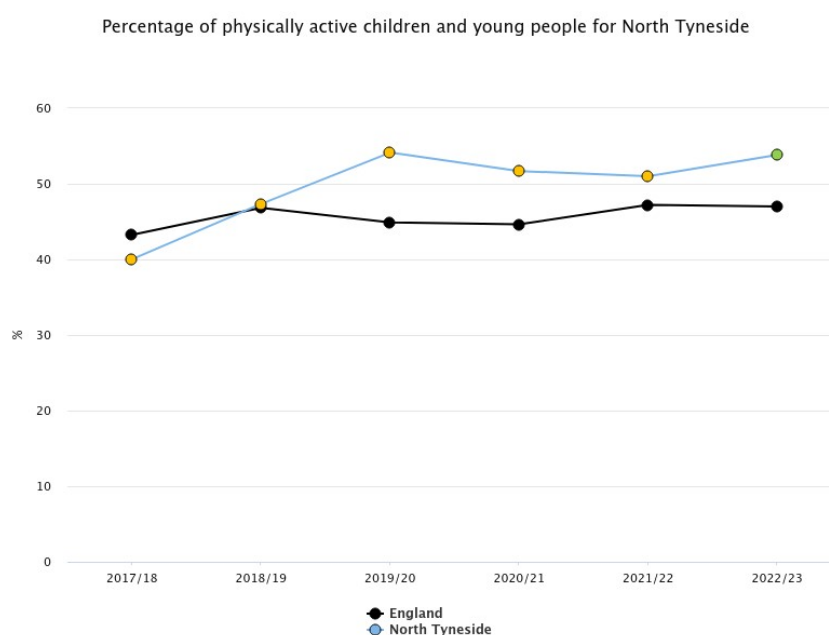
received a proactive phone call from staff in the 0-19 Children’s Public Health Team to discuss the support available.

In line with the Local Plan, NCMP data is used to shape the food environment. New ‘hot food takeaways’ will not be permitted in wards where more than 10% of children in Reception or 15% in Year 6 are classified as very overweight/obese. To determine this, 3-years’ rolling data from the NCMP is used (e.g. currently, data from 2019/20 to 2022/23 is used). Whilst this only applies to premises applying for A5 use planning permission, it means that new hot food takeaways will not be permitted in 15 out of 20 wards.

Low levels of physical activity and increased sedentary lifestyles are known to exacerbate the problems of poor diet and nutrition. Physical activity also provides social benefits, and research suggests that children’s academic achievement and behaviour can also improve with physical activity.

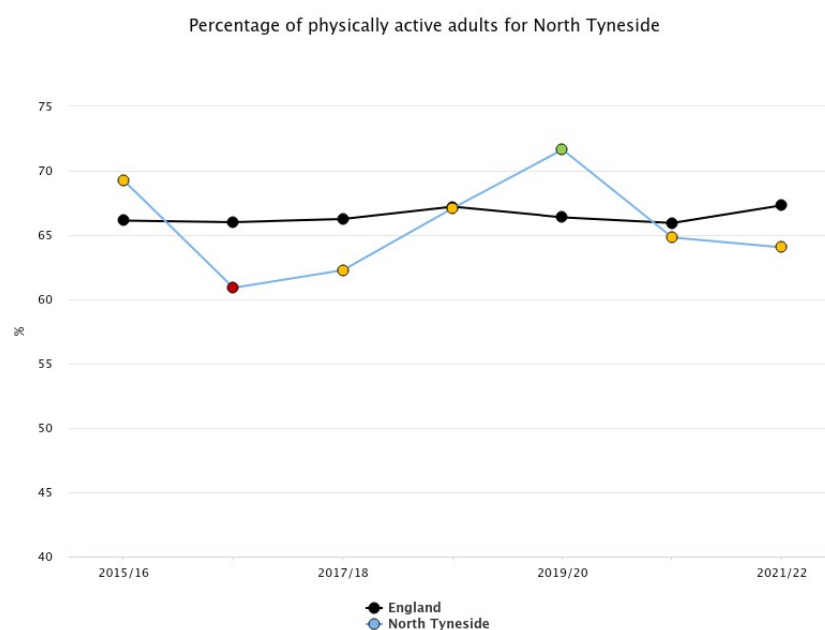
In North Tyneside 53.8% of children and young people were classed as physically active in 2022/23. This is higher than the England average and represents an increase from the previous two years. It is also the highest rate in the North East. Figure 7 below shows this in more detail (where the black circles represent the England values) and shows that local activity levels are almost back to pre-pandemic levels. There is no published local inequalities data for this indicator, but nationally there were differences by age, gender and ethnicity, and children from lower income houses are less likely to be physically active.

Figure 7 – Trends in the percentage of physically active children in North Tyneside (source, OHID)



Whilst at a population level, children in North Tyneside are more physically active than England overall, adults are less active. In 2021/22, 64.0% of adults in North Tyneside were classed as physically active, which is lower than both the England and the regional values, and a slight decrease from the previous year. The England and North East values showed an increase over the same period. Figure 8 below shows this in more detail, where the local values are the green and amber circles and show that activity levels nationally are back to pre-pandemic levels, but locally they have not yet recovered and continue to decline. Again, there is no local inequalities data for this indicator, but national data shows similar inequalities to those seen in children.

Figure 8– Trends in the percentage of physically active adults in North Tyneside (source, OHID)



Active North Tyneside is part of North Tyneside Council’s Sport and Leisure Service and receives funding from the Public Health Grant to deliver a range of programmes to adults and children in the borough. Programmes aim to support behaviour change and increase physical activity at low or no cost to residents. Many programmes are co-designed with service users to ensure they meet needs and avoid barriers to access. Most are open to all residents but targeted in areas of deprivation or communities affected by inequalities.

In the first three quarters of 2023/24, there were almost 30,000 attendances at Active North Tyneside programmes. Across the life course, programmes and events include:

- Programmes for new parents – Programmes such as **Bump, Birth and Baby** and **The Walking Dad** support pregnant women, new mothers and new dads to be more active (as appropriate), make social connections and

address other key areas of their lives. For example, over the past 12 months the team have also been working to support families to access the Healthy Start Offer which provides eligible families with a child under 4 with £4.24 to £8.50 a week towards milk, fruit, and vegetables

- **Mini-Movers** – This is a new programme for families with children aged 2-4 and has been piloted at various sites across the borough this year. The programme develops key literacy and numeracy skills, as well as encouraging healthy eating and physical activity.
- **Healthy4Life Festival** – Almost 300 Year 5 students from nine primary schools attended an event in September for the first time since 2014. The day included in a range of sessions and workshops on physical activity and healthy lifestyles, including cheerleading, football, rugby and cookery. The aim was to support children to try new sports and signpost them to opportunities to continue to participate in things they enjoy. Active North Tyneside and school sports teams worked in partnership with Bike4Health, Skip4Fit, Net 360, Newcastle Falcons, Newcastle United Foundation and others to deliver an excellent event. The event was also supported by 15 young volunteers from Norham High School, who showed excellent leadership skills and commitment. See Figure 8 below
- Other programmes for young people – Programmes such as **No Limits**, **Teenage Gym** and **Club Elevate** have been strengthened over the year and many have been co-produced with young people to improve outcomes and engagement.
- **Grow and Eat** – this programme supports community organisations with, as the name suggests, growing food for the community. To date, 14 organisations have received a Grow and Eat grant and have been supported to develop their gardens/green spaces
- Other large events – There were over 3,200 attendances across four **Family Fun Days** over the summer. Unfortunately, numbers were lower than last year due to the weather. Over 200 residents also attended the Mayor's **Stride Out to the Lighthouse** walk in August

Active North Tyneside also deliver the child weight management programme, Healthy4Life. Whilst it is recognised that there is a gap between the numbers attending this programme and the numbers of children who are living with obesity and/or not physically active, this is a key intervention to support families. To date in 2023/24, 78 children were signposted to the programme (via their GPs, health visitors, hospital doctors, school nurses and family members). In total, 56 children completed a pre-assessment and joined the programme.

Figure 8 – Healthy4Life Festival, September 2023



What have you learnt from today?

Dance
how to make a pizza!
Don't have a lot of sugar.
don't have a lot of sugar
that some good food has sugar.
ALSO
eat healthy for you
LOW PIZZA
DONT EAT AS MUCH SUGAR
Arlo

everyone has
You do can only
Rugby
A lot.

ed Sheeran
Does hockey
Sugar is in lots of things
that sugar is in lots of things
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Sometimes things can be what you think. don't

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TO stay healthy

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Figure 9 – Promotional materials for Active North Tyneside programmes in 2023/24

Club Elevate
 Make a change to your lifestyle with
Club Elevate
 Get active, try something new and improve your physical and mental wellbeing.
 So what's involved? FREE Contours membership (access to gym, swim, exercise classes and spa facilities at five leisure centres), weekly sport sessions, 1-1 support, residential trips and more!
 *Club Elevate is for residents of North Tyneside. Eligibility and referral criteria applies.
 Email sport@northtyneside.gov.uk
 For young people aged 16 to 25

Bumps and Buggies Walk
 Scan the QR code for more information and session times:
 For expectant and new mums wanting to introduce physical activity and learn about a healthy lifestyle.
 The session at **Richardson Dees Park** in Wallsend, includes a healthy snack, a weekly recipe and nutritional information.
 www.activenorthtyneside.org.uk

Healthy 4 Life
FREE
 Do you want to improve your child's health?
 Our 10 week programme supports you and your family to make healthy lifestyle changes together.
 Interactive sessions are delivered by an expert and friendly team and focus on nutrition and physical activity to give you and your family a real boost.
 The team delivers family programmes for two different age groups:
 Ages 4-7 years old
 Ages 8-14 years old
 Register:
 In 10 weeks we cover:
 • Simple food swaps to reduce fat and sugar intake
 • The right size portions for children and adults
 • How to understand food labels and afford healthy options
 • Opportunities to add run and play into your daily routine
 Eligibility criteria applies, please ask for more details.
 0191 643 7454
 CHAT@northtyneside.gov.uk
 www.activenorthtyneside.org.uk

Sessions take place once a week, after school

Joint work has been undertaken by NHCT and Active North Tyneside, with support from Public Health to support patients on certain pathways with increased opportunities to engage in physical activity (in an appropriate way). For example, patients on some cancer and other pathways will be supported to access “pre-hab” activities at several community venues prior to surgery as there is evidence that this can support recovery. Work is also underway to strengthen staff knowledge of the Active North Tyneside offer so they can signpost and support a range of residents accordingly.

The Health and Wellbeing Board previously received details of the HowFit programme, which aimed to increase physical activity levels for people in care homes. This is no longer operational in North Tyneside, but discussions are underway in terms of a further pilot of a similar intervention, with support from Newcastle University.

A whole system North Tyneside Physical Activity Strategy will be developed in 2024/25 and shared with members of the Health and Wellbeing Board.

North Tyneside Council and NHCT adopted the Healthy Weight Declaration in November 2022 to support a whole systems approach to addressing some of the multiple environmental factors that contribute to an individual's weight and the prevalence of obesity in an area. This approach was endorsed by the Health and Wellbeing Board and is being overseen by the Healthy Weight Alliance. A detailed action plan is in place and progress is monitored at each meeting of the Alliance. This ongoing work will support the ambition to reduce the inequalities driven by the food environment and wider environment and hopefully in time will reduce the prevalence of excess weight and cardiovascular disease (CVD).

Within NHCT, work is underway to develop a new framework for the procurement of services to align with the Healthy Weight Declaration. New menus have also been implemented in Trust restaurants to increase the number of healthy options available. Eight new vending machines with healthy options have been purchased and are in place across the Trust, and there is a staggered approach to replacing the existing vending machines. There has also been activity to support underweight patients, including additional training and work around care plans.

The Trust have continued work in 2023/24 on weight stigma. Interactive training has been delivered to improve staff confidence and motivation to initiate conversations about weight. A tool has also been launched to support this work. People living with obesity have also supported the development and pilot of an environmental weight stigma checklist. This has been embedded in all relevant NHCT policies and will be incorporated into a wider checklist for new builds and refurbishments from 2024/25 onwards.

Work is ongoing to develop a local Food Strategy. In addition to setting the strategic direction for work to address food insecurity and sustainability, there will also be a focus on food and health in the borough. There is also an ongoing programme of regional work around this key issue. The new Food Strategy and an update on Good Food Local: North East will be shared with Board members in due course.

Cancer screening and prevention

There are ambitions to:

- Increase uptake of cancer screening programmes, particularly in our most disadvantaged areas
- Develop a partnership approach with the VCS to reach vulnerable groups with cancer outcomes
- Improve awareness of cancer in residents so that they are supported to receive earlier diagnoses to promote the best possible outcomes
- Facilitate access to cancer services and interventions to support earlier diagnosis to promote the best possible outcomes

Data on the four cancer screening programmes is presented in the covering report to the Health and Wellbeing Board. Work continues locally and regionally to improve the uptake of screening programmes. There continues to be variation by programme and by Primary Care Network (PCN). Close working with the VCS and other members of the North Tyneside Cancer Prevention Network continues to provide local insights and target efforts to improve screening rates and reduce inequalities. The network has developed a cancer champions approach whereby GP practice staff will receive cancer awareness training so that they can provide a local focus. Local programmes of work with members such as Healthwatch have highlighted barriers associated with national screening programmes, and the network has liaised with commissioners in NHS England to attempt to address any difficulties.

The NHS England Health Equity Audits into breast screening and cervical screening are being used to inform local practice and service improvements. Internal analysis of local screening programmes highlighted inequalities across the Borough, which remain the focus of the Cancer Prevention Network.

NHCT has recently been part of a pilot of lung cancer case finding whereby current or ex-smokers are offered CT scans to detect early signs of cancer. To date, 609 scans have been completed, with 26 cases of lung cancer detected. The programme will be rolled out more broadly in 2024/25 and links with smoking cessation services have been strengthened.

Drug-related deaths and drug misuse

There are ambitions to:

- Reduce drug-related deaths and unmet need, particularly across our most disadvantaged areas
- Identify and support people using drugs, and their families
- Ensure those with lived experience of substance misuse can change and influence services

- Reduce harm from illicit drug use in line with the findings of the Dame Carol Black Review

Whilst illicit drug use does not affect as many people in North Tyneside as alcohol, tobacco or obesity, the impact for the people using drugs and their wider networks can be significant.

The North Tyneside Drug Alliance is aligned to the new national Drug Strategy, with several areas of focus. Work with professionals and the wider public continues in relation to awareness of drug-related deaths, near misses and the risks. This includes work to increase the availability of naloxone, which is an antidote to opioid overdoses. There is no inequalities data regarding unmet need, but this is an area that the Drugs Alliance and relevant officers will consider if data becomes available.

There are several indicators used to understand the scale of drug-related deaths. As set out in the covering report to the Health and Wellbeing Board, numbers are small, but the North East has had the highest rates of drug poisoning deaths in England for the last 10 years. Rates in North Tyneside are higher than the England rate but lower than the regional rate. There is no local inequalities data, but nationally there is a clear relationship between deprivation and deaths from drug misuse, with twice as many deaths in the 10% deprived areas than the 10% least deprived.

In 2023/24 work to support family members of people affected by substance misuse continued. This includes the work of PROPS, a specialist service for people whose lives are affected by someone else's alcohol or drug use. They are commissioned via the Public Health Grant to deliver this service in North Tyneside and the service specification was extended in 2023/24 to include young people aged 5+.

Cardiovascular disease

There are ambitions to:

- Deliver a community offer for blood pressure, atrial fibrillation (AF) and diabetes checks
- Reduce the inequalities in health outcomes driven by the food environment and wider environment, leading to lower levels of excess weight and cardiovascular disease

CVD is an umbrella term used to refer to conditions that affect the heart and blood vessels e.g., angina, heart failure, heart attacks, strokes, and vascular dementia. Several high-risk conditions also contribute to CVD, including hypertension (e.g., high blood pressure) and AF (which is an irregular and often

abnormally fast heart rate). Many people do not initially develop symptoms from hypertension or AF, which means that there are likely to be around 23,000 people in North Tyneside with undiagnosed high blood pressure and 1,200 people with undiagnosed AF. Without effective management these people are at increased risk of a heart attack or stroke.

Programmes such as NHS Health Checks and opportunistic testing mean that some people with high blood pressure and AF are identified and supported before symptoms occur. However, only around half of the people invited for an NHS Health Check take up the offer. Whilst there are issues with the quality of some of the data, it appears that women and people from less deprived areas are more likely to attend, whereas men and people from more deprived areas are generally at an increased risk of CVD.

It was previously shared with the Health and Wellbeing Board that data suggests that North Tyneside residents may have higher rates of CVD than England overall. For example, the percentage of residents with a diagnosis of high blood pressure or AF on their GP record is higher than the England value. There are also higher rates of admissions to hospital for heart attacks and strokes than the England average and more deaths from CVD and 'deaths considered preventable' than would be expected. For all these indicators there is also variation and inequity across the borough, and wards with higher levels of deprivation tend to have the highest rates of hospital admissions etc., as previously shared.

Due to the concerns about higher rates of CVD and inequalities in who was affected and who was engaging with risk detection programmes, funding was secured to pilot a programme of blood pressure and AF testing in community venues. Led by North Tyneside Council Public Health, a multi-agency project group developed a model that offered community testing in Wallsend and shared results with participating GP practices. Residents with raised blood pressure were offered the use of loan equipment to monitor their blood pressure at home in advance of speaking to their GP practice.

The Active North Tyneside team engaged with over 130 residents across nine sessions. They carried out 46 blood pressure checks and found nine possible cases of high blood pressure and six possible cases of AF that had not been previously diagnosed. Feedback on the sessions was largely very positive, and 100% of residents who completed a survey said they'd have their blood pressure checked at a community event in the future.

The funding from the pilot programme was also used to purchase equipment to allow the Tyne and Wear Fire and Rescue Service and Newcastle United Foundation to offer AF and blood pressure checks to residents. The Fire Service

incorporated the tests into their home safety checks and the Newcastle United Foundation continued with their previous workplace offer.

Using insights from staff and residents from the pilot, the 'How's your Heart' programme has now been rolled out to include people registered with GP practices in North Shields and Whitley Bay (e.g. three of the four PCNs). To date, the team have engaged with over 470 residents, carried out over 160 checks, and identified 55 people with high blood pressure or AF that had previously been undiagnosed. Staff have also been trained to carry out cholesterol tests and this will start in March 2024.

Figure 9: Materials from 'How's your Heart', the community case finding programme



As above, work continues via the Healthy Weight Alliance and other forums to address the inequalities in health outcomes driven by the food environment and wider environment that contribute to excess weight and cardiovascular disease.