

# East Lothian CHP Health Improvement Targets Report - September 2009

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HEAT target	National Indicators	Single Outcome Agreement
<b>Health Inequalities (H1)</b> Reduce mortality from CHD among the under 75s in deprived areas <i>(reviewed in 2008 – see H8 below)</i>	<b>Indicator 21</b> Reduce mortality from CHD among the under 75's in deprived areas	<b>National Outcome 6</b> We live longer, healthier lives <b>National Outcome 7</b> We have tackled the significant inequalities in Scottish society
<b>Child health inequalities (H2)</b> 80% of all three to five year old children to be registered with an NHS dentist by 2010/11 <i>(reviewed in 2008)</i>	<b>Indicator 11</b> 60% of school children in Primary 1 will have no signs of dental disease by 2010	<b>National Outcome 5</b> Our children have the best start in life and are ready to succeed <b>National Outcome 7</b>
<b>Healthy Weight (H3)</b> Achieve agreed completion rates for child healthy weight intervention programme by 2010/11 <i>(revised in 2007)</i>	<b>Indicator 14</b> Reduce the rate of increase in the proportion of children with their Body Mass Index out with a healthy range by 2018	<b>National Outcome 5</b> <b>National Outcome 7</b>
<b>Alcohol (H4)</b> Achieve agreed number of screenings using the setting-appropriate screening tool and appropriate alcohol brief intervention, in line with SIGN 74 guidelines by 2010/11 <i>(revised in 2007)</i>	<b>Indicator 18</b> Reduce alcohol related hospital admissions by 2011	<b>National Outcome 6</b>
<b>Mental health (H5)</b> Reduce suicide rate between 2002 and 2013 by 20%, supported by 50% of key front line staff in mental health and substance misuse services, primary care, and accident and emergency being educated and trained in using suicide assessment tools/ suicide prevention training programmes by 2010 (H5) <i>(revised in 2007)</i>	<b>Indicator 15</b> Increase the average score of adults on the Warwick-Edinburgh mental wellbeing scale by 2011	<b>National Outcome 6</b>
<b>Smoking (H6)</b> Through smoking cessation services, support 8% of your Board's smoking population in successfully quitting (at one month post quit) over the period 2008/9 - 2010/11 <i>(revised in 2007)</i>	<b>Indicator 17</b> Reduce the % of the adult population who smoke to 22% by 2010	<b>National Outcome 6</b> <b>National Outcome 7</b>
<b>Early years (H7)</b> Increase the proportion of new-born children exclusively breastfed at 6-8 weeks from 26.6% in 2006/07 to 33.3% in 2010/11 <i>(revised in 2007)</i>	<b>Indicator 16</b> Increase Healthy Life Expectancy (HLE) at birth in the most deprived areas	<b>National Outcome 5</b> <b>National Outcome 8</b> We have improved the life chances for children, young people and families at risk
<b>Health Inequalities [Revised] (H8)</b> Achieve agreed number of inequalities targeted cardiovascular Health Checks during 2009-10	<b>Indicator 21</b> Reduce mortality from CHD among the under 75's in deprived areas	<b>National Outcome 6</b> <b>National Outcome 7</b>

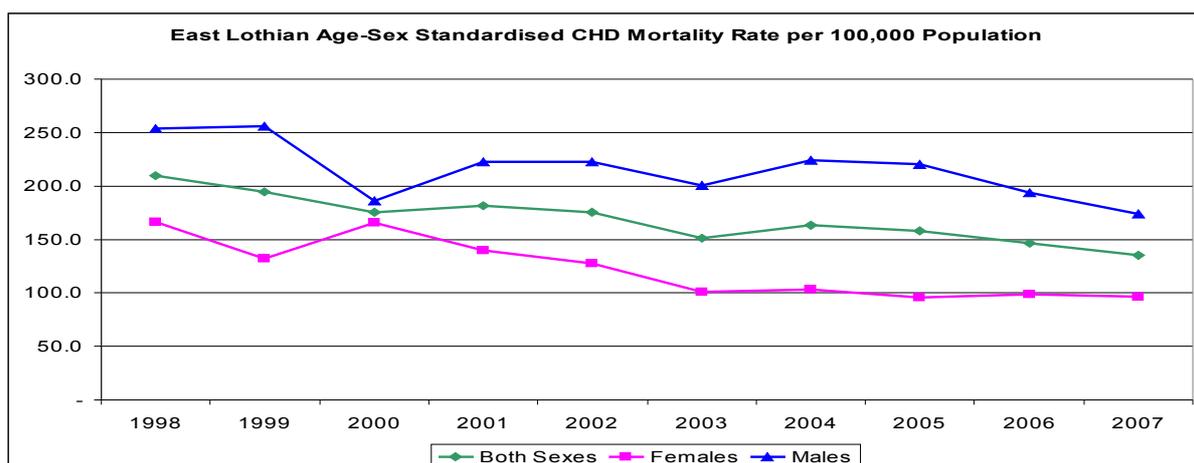
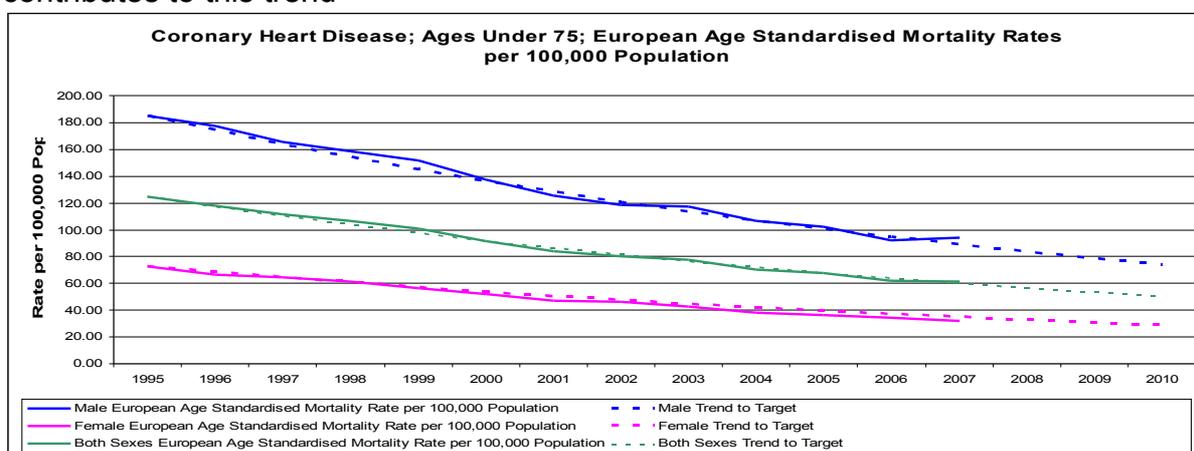
## H8 (H1 Revised) - Cardiovascular health checks

The revised target for this area of work was set in 2008 - Achieve an agreed number of inequalities targeted cardiovascular Health Checks during 2009-10. No such Health Checks occur in East Lothian as no area in East Lothian was deemed sufficiently deprived to merit this intervention. Nevertheless progress on coronary heart disease (CHD) and cerebrovascular disease (CVD) prevention is still being made.

### Coronary Heart Disease

Targets for reductions in deaths from CHD and CVD were set out in the 1999 white paper Towards a Healthier Scotland.<sup>1</sup> This set a target of a 50% reduction in deaths for people aged under 75 in the 15 years between 1995 and 2010. The Coronary Heart Disease and Stroke Strategy Update 2004<sup>2</sup> reset the target to a 60% reduction.

Progress is being made nationally towards meeting this target<sup>3</sup> and East Lothian contributes to this trend<sup>4</sup>

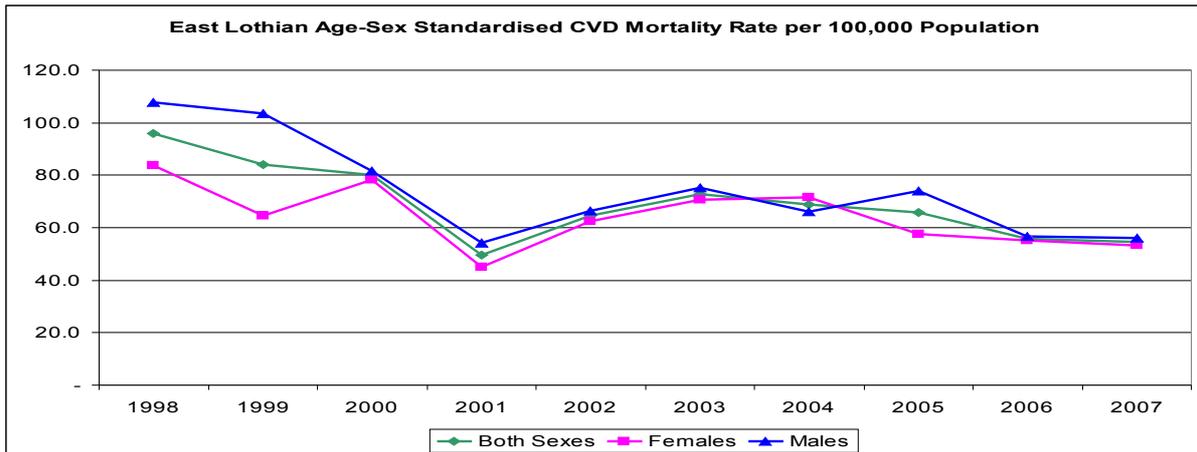


<sup>1</sup> The Stationery Office (1999) Towards a Healthier Scotland – A White Paper on Health. The Stationery Office, Edinburgh.

<sup>2</sup> Scottish Executive (2004) Coronary Heart Disease and Stroke in Scotland – Strategy Update 2004. Scottish Executive, Edinburgh.

<sup>3</sup> ISD Scotland (<http://www.isdscotland.org/5779.html>) Accessed 26<sup>th</sup> May 2009)

<sup>4</sup> ISD Scotland (<http://www.isdscotland.org/5779.html>) Accessed 26<sup>th</sup> May 2009)

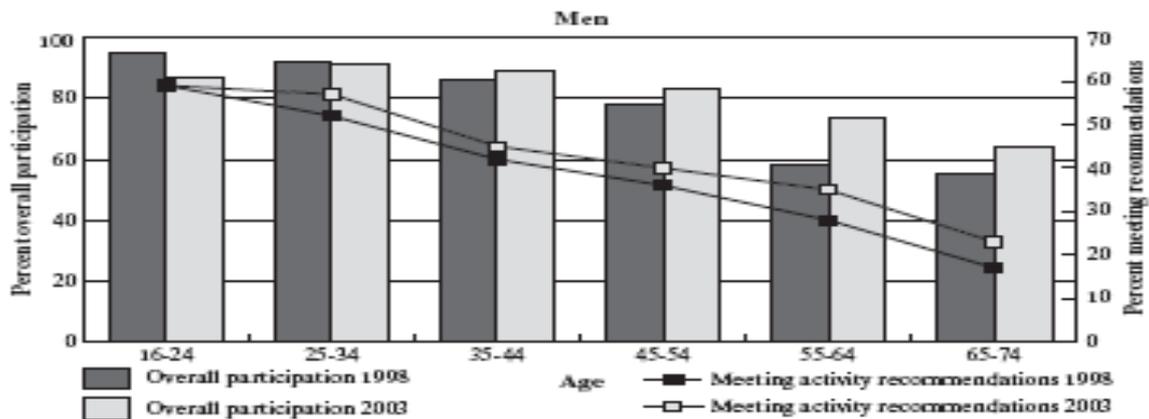


## Physical Activity

### Targets:<sup>5</sup>

- Adults should accumulate / build up at least 30 minutes of moderate activity on most days of the week (five or more).
- Children should accumulate / build up at least one hour of moderate activity on most days of the week (five or more).

According to the 2003 Scottish Health Survey<sup>6</sup> more than four-fifths of adults aged 16-74 were physically active for at least 15 minutes in the last four weeks. The proportions of men and women aged 16-74 meeting the physical activity recommendations (30 minutes of at least moderate exercise on most days of the week) increased from 41% in 1998 to 44% in 2003 in men, and from 30% in 1998 to 33% in 2003 in women. Increases in physical activity participation were particularly marked for men and women aged 55-74. The charts below show how physical activity decreases with age and the overall levels of participation in physical activity, and the proportion meeting recommendations, 1998 and 2003, by age and sex.<sup>7,8</sup>

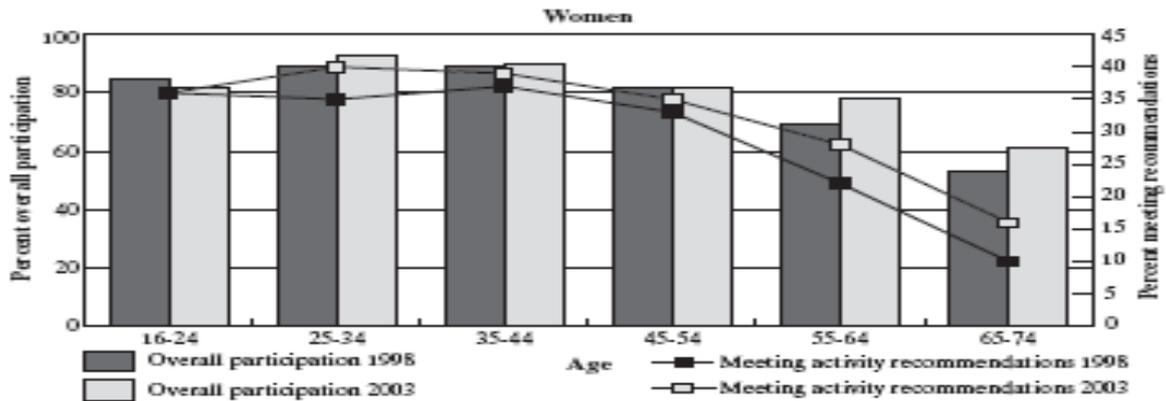


<sup>5</sup> From the Scottish Public Health Observatory website ([http://www.scotpho.org.uk/web/site/home/Behaviour/Physicalactivity/pa\\_intro/pa\\_recommended.asp](http://www.scotpho.org.uk/web/site/home/Behaviour/Physicalactivity/pa_intro/pa_recommended.asp) Accessed 1st Nov 2007)

<sup>6</sup> Scottish Health Survey (2005) *Scottish Health Survey 2003 – Summary of Key Findings*. Scottish Executive, Edinburgh

<sup>7</sup> *ibid*

<sup>8</sup> *ibid*



### **East Lothian physical activity initiatives**

Within East Lothian there is significant promotion of physical activity opportunities through the local authority Community Wellbeing and Education services. This includes led walking programmes through [Walkin' East Lothian](#) and other council services such as countryside rangers ([www.visiteastlothian.org](http://www.visiteastlothian.org)), [Active Schools](#) and active Arts activities such as dance and drama.

There is also a health and council supported project to encourage older people to become more physically active [Ageing Well](#).

### **Healthy Eating**

#### **Targets:**

A review of progress towards the 2005 dietary targets<sup>9</sup> found that none of them had been met. The only target where the trend was in the right direction, although without meeting the 2005 target, was total fat as a source of energy falling from around 40% to 38% (the target was no more than 35%). Meanwhile, there was no change in consumption of fruit and vegetables, saturated fatty acids, total complex carbohydrates, oil rich fish and breakfast cereals all of which were expected to show an increase. Of particular concern were trends in the wrong direction: an increase in non-milk extrinsic (NME) sugar intake and a decrease in consumption of potatoes and bread. Also, consumption of the foods targeted for increased consumption was found to be significantly lower in the most deprived groups of the population.

### **East Lothian healthy eating initiatives**

A food and health development worker supported with Health Improvement Funds is based within East Lothian Council. Their role is to examine, develop and utilise opportunities to facilitate dietary improvement in East Lothian, particularly focussing on improving nutrition in children and young people, as well as specifically targeted groups and focusing on improving health and addressing health inequalities.

Roots and Fruits is a local voluntary sector organisation supported by Health funding which plays a key role in tackling health inequalities within East Lothian. The project improves access to healthier food choices in low income and rural areas of East Lothian by increasing availability of affordable fresh produce as well as developing

<sup>9</sup> Wrieden WL, Barton KL, Armstrong J & McNeill G (2006) A Review of Food Consumption and Nutrient Intakes from National Surveys in Scotland: Comparison to the Scottish Dietary Targets. NHS Health Scotland, Edinburgh.

skills and addressing culture to improve diet. The project has a good track record of working with communities in East Lothian. It has also grown and developed over the years in response to locally identified need and its contributions include:

- a mobile van service to those who cannot access shops easily including families, elderly people and housebound and disabled customers
- setting up food co-ops in deprived areas in response to locally identified need
- delivering fresh fruit to schools accompanied by support with educational activities and tasting sessions
- delivering cooking skills and healthy eating workshops in partnership with local service providers and in response to need
- community gardening work with schools
- working with partners to take part in community consultation and respond to the needs identified, e.g. recent work on Choosing the Right Ingredients has led to plans to establish a food co-op in Wallyford

### Life Expectancy

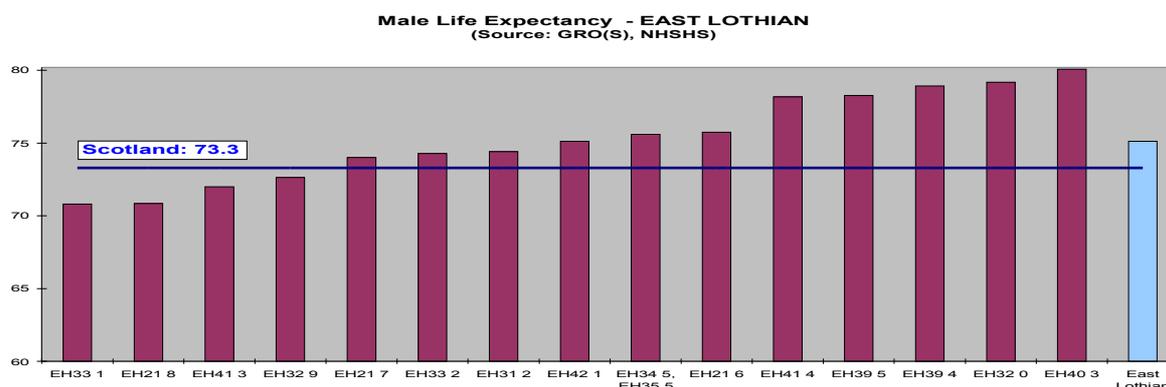
#### Objective for Health Improvement

By 2010-12, improve life expectancy and healthy life expectancy for all men and women living in all areas of Scotland. Also reduce inequalities between the most affluent and most deprived groups.

By 2020-22, further improve life expectancy and healthy life expectancy of men and women living in all areas of Scotland. Scottish life expectancy over time is shown below<sup>10</sup>

Life Expectancy from birth over time							
		1980-82	Gap in years	1999-01	Gap in years	2000	Gap in years
Males	Affluent	71.5	5.3	76.7	7.8	77.6	8.5
	Deprived	66.2		68.9		69.1	
Females	Affluent	77	4.3	80.7	4.8	81.1	4.7
	Deprived	72.7		75.9		76.4	

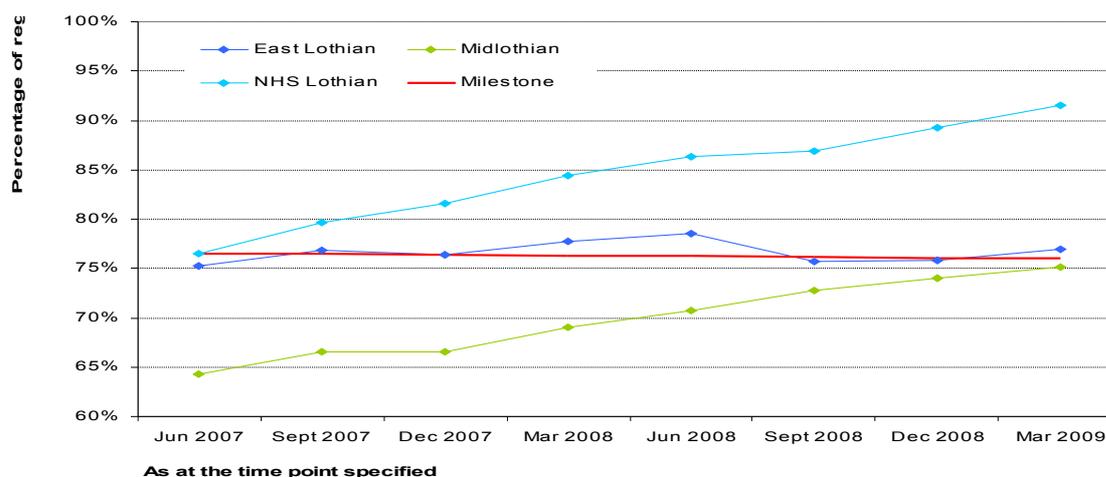
Within East Lothian overall Life Expectancy in 2000 was 75.1 for males and 79.3 for females. This masks significant local variation.<sup>11</sup>



<sup>10</sup> Information taken from - Clark D, McKeon A, Sutton M & Wood R (2004) Healthy Life expectancy in Scotland. HLE Measurement in Scotland Steering Group (Available online at: <http://www.scotpho.org.uk/nmsruntime/saveasdialog.asp?IID=3349&SID=2927> Accessed 31<sup>st</sup> Oct 2007)

<sup>11</sup> GROs <http://www.gro-scotland.gov.uk/statistics/publications-and-data/life-expectancy/le2003-05/further-information.html#section6.2>

## H2 – Childhood Dental Registrations



The graph above shows the percentage of 3-5 year old children registered with an NHS dentist from June 2007 to March 2009.<sup>12</sup> This illustrates progress in across Lothian towards this target over the last two years. Clearly East Lothian, while having a high level of registration generally, has shown no significant rise over the last couple of years.

As well as current activity in dental health promotion undertaken by dental health promotion, community nursing and the local education authority nurseries there is an opportunity to develop a additional general paediatric dental service targeted at particular communities through the Support from the Start programme. A new programme called Childsmile Practice is about to be rolled out across Lothian. This programme is universal in its reach and involves dental services in providing an oral health promotion service to the 0-3 age group and includes dietary advice, dental hygiene advice, and fluoride painting.

A programme is under development for Wallyford and Whitecraig and possibly Tranent which will be based in the community and will involve oral health promotion and fluoride tooth painting, but not dental inspection or treatment. The service will be aimed at increasing the engagement of parents in oral health issues, and increasing the number of children accessing fluoride painting in these communities. There remain issues in meeting this target generally due to the dearth of NHS dentists available with whom young children and their families can register.

## H3 – Child Healthy Weight

The original HEAT target for Child Healthy Weight (H3) focused on weight management for overweight children, young people and their families. This approach has been revised across Lothian following concerns about stigma, harm and the logistical problems of recruiting a sufficient number of families. The revised target takes a more holistic approach of health improvement/prevention at a whole school level, with some additional support for families as required (e.g. support for physical activity, healthy eating, smoking cessation or weight management).

<sup>12</sup> Source: Management Information and Dental Accounting System (MIDAS), ISD Scotland Population: Mid-year population estimates, General Registrars Office Scotland (GROS)

In East Lothian a parent consultation session and school health evening were held in May 2009 in Cockenzie. These two sessions provided information about the health and wellbeing of families in the community, their hopes for a health improvement programme, and also raised awareness of the programme planned for the next two school years (2009/10 and 2010/11).

The findings will be used to develop a programme of work over the next two years, particularly focusing on the primary school and community centre. The main requirements for such a programme of work are coordination and communication and resources to support the community centre and Active Schools Coordinator. This programme of work needs to meet the needs of all pupils and their families, regardless of income, ability or ethnicity.

The findings may well have wider relevance for other parts of East Lothian and this approach could be repeated in other communities (e.g. those involved in the Equally Well test site).

#### **H4 – Alcohol Brief Interventions**

The introduction of Alcohol Brief Intervention (ABI) screening is a pan-Lothian led programme designed to meet the target of 23,594 ABIs over three years with delivery of 10% in year 1, 40% in year 2 and 50% in year 3. Lothian as a whole is on course to reach these targets. There has been a positive uptake to ABI as part of Locally Enhanced Service (LES) LES with some 86% (108 out of 126) of GP practices in Lothian signed up. All participating practices have received training. NHS Lothian monitors this through LES and an electronic audit and reporting system.

As of Dec 2008 NHS Lothian were on target to achieve the Year 1 target of 2,359 brief interventions in 08/09 with first reporting of activity in year 1 (Oct – Dec 08) showing that 1,186 brief interventions had been delivered. There are no East Lothian specific figures currently available.

#### **H5 - Mental Health**

This target to reduce the suicide rate by 20% is supported by local activity co-ordinated by Choose Life East Lothian (CLEL) and the delivery of a Lothian-wide training programme to 50% of key front line staff in mental health, substance misuse services, primary care and A&E. The training programme focuses on suicide risk assessment and suicide prevention.

##### ***Choose Life East Lothian***

CLEL has supported the delivery of a range of training over the last few years to a wide range of multi-agency and multi-disciplinary staff. The training has included:

ASIST (suicide intervention skills)	11 courses, 197 participants
MHFA (awareness and initial generic help)	12 courses, 186 participants
SafeTALK (suicide 'alertness')	1 course, 9 participants
SuicideTALK (suicide awareness)	2 courses, 20 participants

CLEL has also supported a wide range of work including: CHANGES Mental Health Project targeted at young men; CAB advice service for mental health clients in

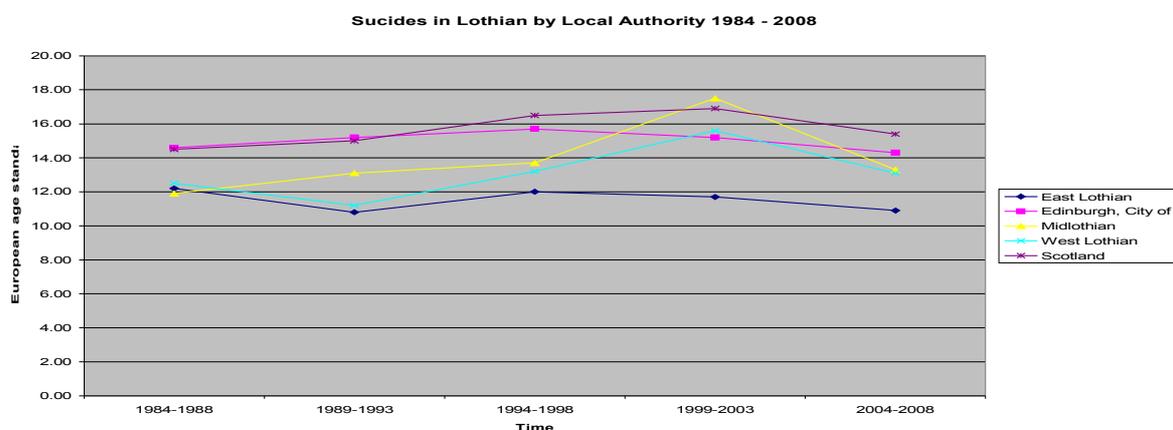
Herdmanflat; Tynepark Resource Centre multimedia group mental health awareness raising and a MH Directory; CAMHS parenting support; the school nurse service Headstrong programme; Stepping Out Supper Club; Headway development worker; Befriending Scheme; Library Book Prescription scheme; Support from the Start Service Development fund.

### Training

Lothian's Joint Mental Health and Wellbeing Strategic Programme has led on the development of the Lothian Suicide Awareness Raising and Education Programme, a tailored, tiered programme to address Commitment 7 of Delivering for Mental Health and HEAT 5. The programme has drawn on a number of the courses introduced as part of Choose Life including Mental Health First Aid, STORM, SafeTALK and ASSIST and on the skills and experiences of practitioners.

No figures are currently available to indicate what progress is being made across Lothian or within East Lothian towards achieving this training target.

The suicide reduction target is reported on nationally annually by ISD and is currently on a trajectory to meet the target set. However the issue of small numbers make this a difficult target to meet locally. Very small changes in very small numbers make for very large percentage swings on a year to year basis. For example over the last three decades the average annual rate has been 10 suicides per annum but the range is from 3 to 18 per annum. This can be evened out statistically by using a rolling average over a 4 year period as has been done in the chart below.<sup>13</sup>



### H6 - Smoking (& Drugs & Alcohol for young people)

There has been a decline nationally in regular smokers in young people since peaks in 1996 and 1998. The proportion of girls who regularly smoke continues to decline although this is not mirrored by boys (13yr olds are static, 15yr olds have increased slightly).<sup>14</sup>

**The target for Scotland is to reduce the percentage of school children aged 12 to 15 who smoke to 11% by 2010.**<sup>15</sup>

<sup>13</sup> ISD Scotland (<http://www.isdscotland.org/isd/5997.html>) Accessed 12<sup>th</sup> August 2009

<sup>14</sup> SALSUS 2008 (2009) Scottish Adolescent Lifestyle and Substance Use Survey. ISD Scotland. ([http://www.drugmisuse.isdscotland.org/publications/local/SALSUS\\_2008.pdf](http://www.drugmisuse.isdscotland.org/publications/local/SALSUS_2008.pdf))

SALSUS - the Scottish Schools Adolescent Lifestyle and Substance Use Survey (2006) was last published with local data in May 2007<sup>16</sup> and shows some positive signs of a downward trend among young people in their use of alcohol, tobacco and drugs in East Lothian. For example the headline figures in the table below show significant reductions in all of these activities for both 13 and 15 year olds.<sup>17</sup>

<b>East Lothian smoking prevalence (regular smokers) - SALSUS 2006</b>		
	<b>2002</b>	<b>2006</b>
<b>13yr olds</b>	11%	4%
<b>15yr olds</b>	21%	14%
<b>East Lothian alcohol prevalence (have had a drink) - SALSUS 2006</b>		
	<b>2002</b>	<b>2006</b>
<b>13yr olds</b>	77%	63%
<b>15yr olds</b>	91%	87%
<b>East Lothian drug prevalence (offered drugs) - SALSUS 2006</b>		
	<b>2002</b>	<b>2006</b>
<b>13yr olds</b>	35%	18%
<b>15yr olds</b>	68%	48%

### **Smoking Prevention**

In May 2008 the Scottish Government launched a national smoking prevention action plan which aims to reduce the prevalence of young people who smoke. The plan contains 27 specific measures which fall into 4 main categories:

- Educate and promote healthy lifestyles: making clear to children and young people the risks associated with smoking
- Reduce the attractiveness of cigarettes: countering positive images of cigarettes in the media and at points of sale and reducing the opportunities for children and young people to be exposed to smoking
- Reduce the availability of cigarettes: enforcing the law vigorously to avoid cigarette sales to minors and prevent access to smuggled/counterfeit cigarettes
- Reduce the affordability of cigarettes: ensuring cigarette prices are sufficiently high to discourage children and young people from smoking

Targets have been set to reduce the prevalence of regular smoking in 3 age groups:

- 13 year old girls from 5% in 2006 to 3% in 2014
- 13 year old boys from 5% in 2006 to 2% in 2014
- 15 year old girls from 18% in 2006 to 14% in 2014
- 15 year old boys from 12% in 2006 to 9% in 2014
- 16 to 24 year olds from 26.5% in 2006 to 22.9% in 2012

<sup>15</sup> The Scottish Executive (2004) *A breath of fresh air for Scotland. Improving Scotland's health: the challenge tobacco control action plan*. Edinburgh: The Stationary Office. Available from: <http://www.scotland.gov.uk/library5/health/abfa-00.asp> [accessed 1st Nov 2007]

<sup>16</sup> SALSUS 2006 (2007) Scottish Adolescent Lifestyle and Substance Use Survey. ISD Scotland. (<http://www.drugmisuse.isdscotland.org/publications/abstracts/salsus.htm>)

<sup>17</sup> Ibid

In March 2007, the Scottish Executive notified NHS Boards of additional funding for smoking prevention services. This funding is related to achieving the above targets. Across Lothian it has been agreed that:

- there will be locally based posts creating a resource to help drive forward the implementation of the action plan in each area
- the posts will forge strong links with and between local agencies
- the post holders will accumulate greater in-depth knowledge about issues relating to young people's smoking in their local areas which in turn will be valuable in achieving successful outcomes
- a local focus will create a greater sense of ownership for the work in each area thereby contributing to the sustainability of the work longer term through smoking prevention being embedded into the work of local agencies

This East Lothian post is currently vacant but should be filled by October 2009.

### **Adult Smokers (16+)**

1. *Reduce smoking prevalence in the Scottish adult population (16+) from 26.5% in 2004 to 22% by 2010.*<sup>18</sup>

<b>East Lothian smokers by age over time (Scottish Household Survey)</b>					
	<b>16 to 34</b>	<b>35 to 44</b>	<b>45 to 59</b>	<b>60 plus</b>	<b>All ages</b>
1999-2000	34.4%	25.6%	25.6%	21.8%	26.8%
2003-2004	32.3%	24.1%	23.6%	16.1%	22.8%

East Lothian has very nearly met this target for the overall population.<sup>19</sup>

2. *Through smoking cessation services, support 8% of your Board's smoking population in successfully quitting (at one month post quit) over the period 2008/9 - 2010/11 (NHS Lothian has set a higher local target of 10%).*

This target (H6) requires East Lothian to get some 93 smokers per month through audited smoking cessation services service. We currently average 22 per month so far for 2008/9. This compares to a 2006/7 average of 11. We had hoped to increase the numbers through services much more significantly in 2008 through the centralisation of stop smoking service delivery and the commencement of a pharmacy delivered scheme. Although the figures are up they remain well below target.

Smoking cessation has become a Lothian led area of work. There is now a centrally managed and locally delivered stop smoking service available across East Lothian in group settings and one to one through pharmacists to complement the service provided within Primary Care. Current figures through services remain below that required to achieve the target set. Work is continuing to find ways to improve numbers through services. A key element of this is for Primary Care to access and refer to local services whenever possible and appropriate and to record and audit

<sup>18</sup> The Scottish Executive. 2005. *100 days to go to no smoking law*. [online] Clearingtheairscotland.com. Available from: <http://www.clearingtheairscotland.com/news/item.php?id=37> [accessed 1<sup>st</sup> Nov 2007]

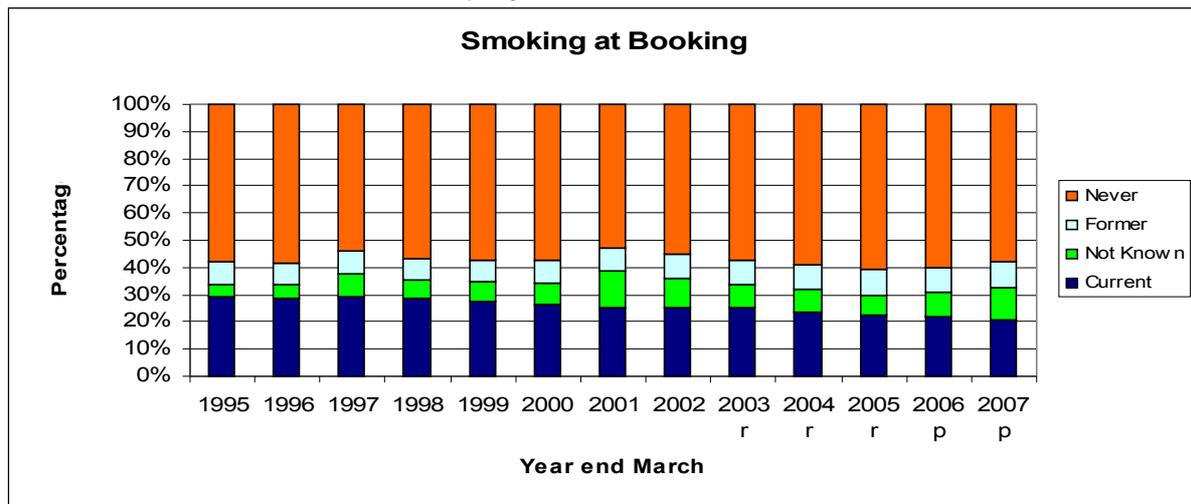
<sup>19</sup> Scottish Household Survey ([www.scotland.gov.uk/Topics/Statistics/16002/shs-search](http://www.scotland.gov.uk/Topics/Statistics/16002/shs-search) Accessed 31st October 2007)

those patients who access support entirely within the Primary Care Team in order to accurately record those supported to quit and improve numbers through the service.

Figure are available from ISD Scotland and the national NHS Scotland Smoking Cessation System database for numbers through services, quit attempts and successful quit attempts over time.

### Smoking in Pregnancy

The target here is to reduce the proportion of pregnant women smoking to 23% by 2005 and 20% by 2010.<sup>20</sup> The most recent national statistics from ISD Scotland taken from SM02 records are displayed below.<sup>21</sup>



Local East Lothian figures are not currently available. Across Lothian an estimated 14% of pregnant smokers attempted to quit using NHS cessation services.<sup>22</sup>

### Deprived Communities

In Scotland's most deprived communities, smoking rates are much higher than the national average. In light of this, the Scottish Executive has established separate targets for people living in deprived communities.

### Pregnant Women

Reduce the rate of smoking during pregnancy for the most deprived communities from 35.8% in 2003 to 32.2% in 2008.<sup>23</sup> The most recent national statistics are displayed below.<sup>24</sup> There are no local figures available for this target.

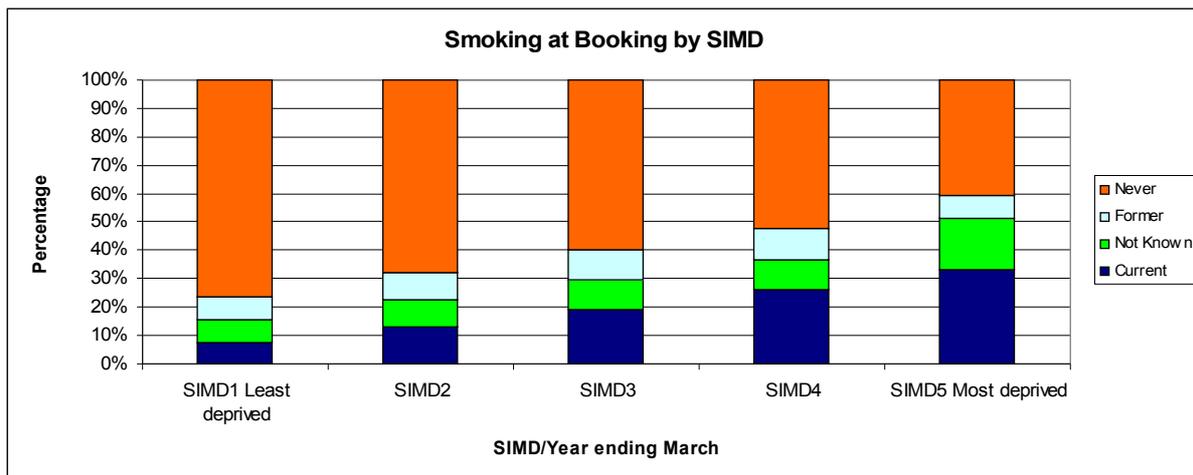
<sup>20</sup> The Scottish Executive (2004) A breath of fresh air for Scotland. Improving Scotland's health: The challenge tobacco control action plan. Edinburgh: The Stationary Office. Available from: <http://www.scotland.gov.uk/library5/health/abfa-00.asp> [accessed 1st Nov 2007]

<sup>21</sup> ISD Scotland ([www.isdscotland.org](http://www.isdscotland.org) Accessed 31<sup>st</sup> Oct 2007)

<sup>22</sup> Galbraith, L. & Heeley, C. (2009) NHS Smoking Cessation Service Statistics (Scotland) 1st January to 31st December 2008. ScotPHO, Glasgow. (<http://www.scotpho.org.uk/smokingcessationstats20088>) Accessed 26<sup>th</sup> May 2009

<sup>23</sup> Scottish Executive (2004) **Building a better Scotland: spending proposals 2005 - 2008: enterprise, opportunity, fairness: Technical Notes.** [online] Edinburgh: The Scottish Executive. Available from: <http://www.scotland.gov.uk/library5/finance/srtn04.pdf> [accessed 1st Nov 2007]

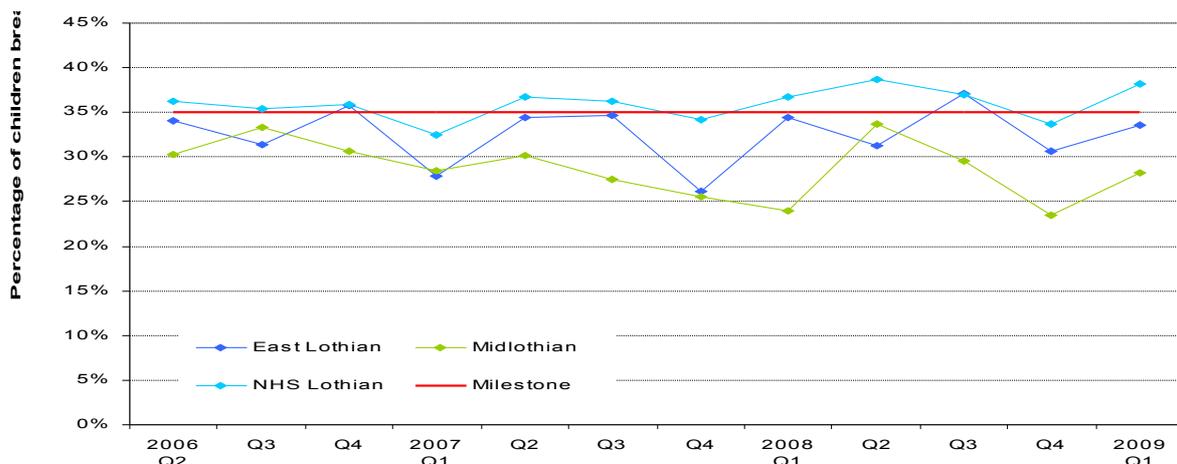
<sup>24</sup> ISD Scotland (<http://www.isdscotland.org/isd/2911.html>) Accessed 24<sup>th</sup> Aug 2009)



### Adults (16+)

Reduce the rate of smoking amongst adults aged 16+ in the most deprived communities from 37.3% in 2004 to 33.2% in 2008.<sup>25</sup> There appear to be no recent figures breaking down smoking by deprivation in Scotland. Nor is it possible to determine the current smoking rates for adults (16+) from deprived communities in East Lothian.

## H7 – Breast feeding rates



As can be seen from the graph above which shows the percentage of children recorded as exclusively breastfed at 6-8 weeks from April 2006 to March 2009<sup>26</sup>, breast feeding rates across East Lothian are good but this hides substantial variation across the county. The percentage of those children in East Lothian overall who are exclusively breastfed at 6-8 weeks currently stands at 32.33%.<sup>27</sup> This is very close to the current HEAT target set but it is not a rate which is achieved in all parts of East Lothian. Health Improvement Funds and CEL 36 monies allow for an Infant Feeding Advisor (IFA) to be recruited covering East and Midlothian CHPs. They will promote

<sup>25</sup> Scottish Executive (2005) *100 days to go to no smoking law*. [online] Clearingtheairscotland.com Available from: <http://www.clearingtheairscotland.com/news/item.php?id=37> [accessed 1<sup>st</sup> Nov 2007]

<sup>26</sup> Child Health Systems Project - Pre-school (CHSP-PS), ISD Scotland

<sup>27</sup> NHS Lothian HIU (<http://intranet.lothian.scot.nhs.uk/NHSLothian/Healthcare/A-Z/PublicHealth/HealthIntelligenceUnit/Indicators/HEAT/Pages/HEAT.aspx>) Accessed 1<sup>st</sup> Aug 2009

evidence based practice in relation to infant feeding practice and to increase and sustain breast feeding rates and reduce health inequalities across East Lothian & Midlothian by:-

- Providing educational programmes in relation to infant feeding for staff from both the statutory and voluntary sector throughout East Lothian & Midlothian
- Promoting, developing, supporting and delivering a programme of breast feeding activities that addresses health inequalities and complies with local and national priorities
- To work in collaboration with local health professionals to improve peer and professional support and develop services which support breastfeeding
- To achieve HEAT Targets for Breast Feeding
- To report to NHS Lothian/Mid/East Lothian re targets/progress
- Facilitate community and inter-agency action to improve accessibility to the above services taking into account rurality of area

The IFA post is currently vacant but should be filled by October 2009.

**John Boyce**  
**Public Health Practitioner**  
**East Lothian Community Health Partnership**  
**August 2009**

### Summary of progress

HEAT target	Progress summary to date
<p><b>Health Inequalities (H1)</b> Reduce mortality from CHD among the under 75s in deprived areas <i>(reviewed in 2008 – see H8 below)</i></p>	<p>Heading in the right direction to meet earlier target. Still work required on supporting and promoting physical activity and healthy eating across the population and in more deprived communities.</p>
<p><b>Child health inequalities (H2)</b> 80% of all three to five year old children to be registered with an NHS dentist by 2010/11 <i>(reviewed in 2008)</i> 60% of school children in Primary 1 will have no signs of dental disease by 2010</p>	<p>These targets are likely to be met across East Lothian overall but work is still required to ensure that all areas of East Lothian benefit from these high levels of registration and lack dental disease.</p>
<p><b>Healthy Weight (H3)</b> Achieve agreed completion rates for child healthy weight intervention programme by 2010/11 <i>(revised in 2007)</i></p>	<p>This work is on target to date.</p>
<p><b>Alcohol (H4)</b> Achieve agreed number of screenings using the setting-appropriate screening tool and appropriate alcohol brief intervention, in line with SIGN 74 guidelines by 2010/11 <i>(revised in 2007)</i></p>	<p>This work is on target to date.</p>
<p><b>Mental health (H5)</b> Reduce suicide rate between 2002 and 2013 by 20%, supported by 50% of key front line staff in mental health and substance misuse services, primary care, and accident and emergency being educated and trained in using suicide assessment tools/ suicide prevention training programmes by 2010 (H5) <i>(revised in 2007)</i></p>	<p>Local Choose Life supported work continues but more work is required to ensure the 50% target of key front line staff trained is met across Lothian.</p>
<p><b>Smoking (H6)</b> Through smoking cessation services, support 8% of your Board's smoking population in successfully quitting (at one month post quit) over the period 2008/9 - 2010/11 <i>(revised in 2007)</i></p>	<p>Though the initial target of a reduction in the population percentage of smokers is likely to be met the revised target of a proportion of smokers through smoking cessation services is not. Work is under way through the Lothian managed cessation service to address this. Work is also under way to reduce the numbers of young people who commence smoking in the first place through smoking prevention work</p>
<p><b>Early years (H7)</b> Increase the proportion of new-born children exclusively breastfed at 6-8 weeks from 26.6% in 2006/07 to 33.3% in 2010/11 <i>(revised in 2007)</i></p>	<p>There is a local strategy in place to achieve this target. The current rate in East Lothian is 32.33%</p>
<p><b>Health Inequalities [Revised] (H8)</b> Achieve agreed number of inequalities targeted cardiovascular Health Checks during 2009-10</p>	<p>Not applicable in East Lothian</p>