

Healthy Communities						
Headline Outcome	Sub - Outcome	Owner - Lead	Activities	Partner/Resources	LAA Indicator or output	Target
1 Improve Health and Reduce Health Inequalities through targeted activities in and between local communities where life expectancy is lowest and/or deprivation highest with specific reference to lifestyles which influence the following : ?8CHD ? ^a Stroke ? Cancer ?ŽAccidents ? Mental Health and wellbeing ?rSexual health and teenage pregnancy	1.1 Reduce levels of binge drinking, population drinking in excess of recommended Government targets and under age drinking	HW Project Director	1)Develop Community engagement programmes in local communities where crime due to alcohol highest and deprivation highest 2)Use Employers as focus for other campaigns and workplace policies 3)Support healthy schools programme emphasizing schools in deprived areas 4)Increase and target staff Training programmes	Alcohol Harm Prevention Group; Safer Wiltshire Executive; Limited resources available via Healthier Wilts budget and Safer Wilts executive	1) Number of completed and successful community programmes 2) No of completed campaigns in workplaces 3)% of Schools completing drugs and alcohol theme as part of Healthy schools programme 4) Number of targeted individuals attending tier 2 young people specific training progs	1)3 in target localities by 2010 2)50% of WiSB (by 2007) and 10 other medium/large (100 employees +) organisations(2009) 3)55% by Dec 2007 with focus on schools in deprived areas 4)5% pa increase in attendance

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	1.2a Halt rising trend of obesity in adult population (improve diet)	PCT/ LA Director of Public Health	<p>Review Develop and implement Wiltshire wide Obesity Strategy</p> <p>Amend content of locality training programme to reflect healthy eating issues, and then roll-out to targeted areas as identified through Food Mapping exercise.</p> <p>Commission health services against an agreed care pathway for the prevention of overweight and obesity, the management of adults who are overweight and obese including surgical interventions for the morbidly obese.</p> <p>Monitor compliance with QOF requirements.</p> <p>Through the Exemplar Employer initiative establish a "Healthy Food awards" scheme for employers providing healthy food in the workplace.</p> <p>Pro-active engagement with the food industry</p> <p>Repeat Healthier Wiltshire Survey</p>	<p>Healthy Eating Alliance</p> <p>Private sector (eg not for profit food organisations)</p> <p>Adults</p>	<p>1)All Age All Cause Mortality</p> <p>2) To be developed as Strategy established - will reflect effectiveness of commissioned health services, appropriate use of anti-obesity medicines and outcomes from relevant schemes funded through Big Lottery Fund (if bid(s) approved)</p> <p>3) % employees eating 5 fruit and vegetable portions per day (LPSA)</p> <p>4)Numbers of employers achieving Healthy Food awards</p>	<p>1)AAACM - continue to reduce overall and maintain (or reduce) gap between highest quintile and all other electoral wards</p> <p>2)Establish whether GP practices have sufficient info to create obesity register -2007; set targets with focus on practices serving deprived communities- 2008 and 2009</p> <p>3)Increased self reported consumption of fruit and veg(measured via Healthier Wiltshire survey LPSA target: 5% increase in nos of employees eating 5 a day from 2005 to 2008</p> <p>4) Award designed 2007: 3 large employers achieving award -2009</p>

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	1.2b Halt rising trend in obesity in the 0 - 19 population (improve diet)	PCT/ LA Director of Public Health	<p>Introduce new school food standards through appropriately commissioned school meals services.</p> <p>Implement Wiltshire Healthy School programme</p> <p>Complete annual weight and height measurements of Reception Year and Year 6 within national timescale</p> <p>Ensure maintenance of the schools fruit and vegetables scheme.</p> <p>Increase breast feeding initiation rate by 2% per annum, targeted at women from disadvantaged groups.</p>	<p>Healthy Eating Alliance</p> <p>Private sector (e.g. not for profit food organisations)</p> <p>WCC – Education, Healthy Schools Team, school meals strategy co-ordinator</p> <p>PCT – midwives, school nurses, public health/health promotion</p> <p>Parents and children</p>	<p>1) Number of schools implementing nutrient based standards by 2009</p> <p>2)% of schools engaged in the Healthy Schools programme</p> <p>3)New school meal contract in place with appropriate quality standards</p> <p>4)All 4 – 6 year olds attending an LEA maintained primary or special school receive a free piece of fruit / veg. every school day.</p> <p>5)Monitor incidence of <19 year olds presenting with Type I and Type II diabetes.</p> <p>6)Height and weight measurements of children in reception</p>	<p>1)Increased self reported consumption of fruit and veg (Healthier Wiltshire survey) LPSA target: 5% increase in nos of year 10 pupils eating 5 a day from 2005 to 2008</p> <p>2)75 % of schools achieving Healthy Schools status 2008 100% 2010</p> <p>3)In place by 2008</p> <p>4)Continuation of programme</p> <p>5)Establish whether GP practices have sufficient info to create obesity register for under 19s - 2007; set targets with focus on practices serving deprived communities- 2008 and 2009</p> <p>6)i) Increased coverage of children year in Reception</p>

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	1.3 Halt rising trend of obesity in population (increase physical activity)	HW Project Director/WASP Chief Exec	1) Improve recreation and sports facilities and access in target communities where rate of participation lowest and deprivation highest 2) Use schools as focal point via Schools Sport Partnerships and Travelwise 3) Develop active aging programme for older people 4) Develop community programmes which encourage greater use of existing facilities in clubs and elsewhere 5) Review and standardise (best practice) GP exercise referral programmes	WASP/Health Development group DCs WCC/LEA Age Concern/Community First; PCT; WCC/DACS Resources limited – application to Lottery Wellbeing Fund planned	1) Increase in activity levels 2) i) Schools achieving 2hrs high quality Sport/PE per week 2) ii) Schools and others offering 4hrs sports to all children 3) Number of defined community programmes (see older people's block ref 2.1) 4) Number of referrals from appropriate schemes	1) i) 1% pa increase in nos achieving 1/2 hour per day moderate intensity activity; 4 % + over 3 years in target areas 1) ii) LPSA targets - 2% increase in nos of children in year 10 achieving 1 hour per day moderate intensity activity from 2005 to 2008 3% increase in nos of employees achieving 1/2 hour per day moderate intensity activity from 2005 to 2008 2) i) 86 % of pupils by 2008 2) ii) All schools by 2010 3) (see older people's block ref 2.1) 4) Baseline established for number of people accessing exercise referral schemes 2007, increase in numbers attending in 2008 and 2009

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	1.4 Reduce the incidence of CHD, Stroke and cancers through reducing the incidence of smoking and the harmful effects of smoke	PCT/LA Director of Public Health	1) Deliver smoking cessation services targeted to manual workers, pregnant women and other people living in deprived areas 2) Promote Smoke Free Wiltshire Awards 3) Support employers introducing smoke free premises and sites ahead of proposed legislation. 4) Work with Healthy School Team to deliver smoking prevention messages to young people. 5) Work with retail outlets to prevent sales of tobacco products to children and young people	NHS – PCT, GPs District Councils – Environmental Health and Trading Standards WCC – Education, Healthy Schools Team Economic Partnerships	1) Smoking prevalence 2) Number of people who have quit smoking 4 weeks since their quit date 3) Numbers of premises and businesses achieving Platinum and Gold smoke free awards 4) % of schools achieving Healthy Schools status. 5) Number of prosecutions arising from sales to underage young people	1) Number of adults / young people smoking (Healthier Wiltshire Survey): LPSA target 2% reduction in both nos of employees and nos of year 10 pupils from 2005 to 2008 2)i) Achieve 4 week quit targets as per PCT LDP for 2006/07 and 2007/08 (targets not yet set for 2008/09) 2)ii) Wiltshire quit rate in line with national average 3) Number of premises with Platinum or Gold Smoke Free Award 4) 75% of schools achieving healthy schools status 2008; 100% 2010 5) Prosecutions as a result of underage sales of tobacco - set target 2007; reduce 2008 and 2009

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	1.5 Reduce sexual health inequalities	PCT/ LA Director of Public Health	<p>Introduce targeted training of professionals working within identified communities/localities in order to access "hard to reach and/or most vulnerable groups" within those areas.</p> <p>After 3 and 6 months evaluate the impact on the health of these client groups of training prior to developing a roll-out programme of training to other areas.</p> <p>Details of the training programme and standards for evaluation</p> <p>Undertake a health equity audit gaps in service provision.</p>	<p>PCT – Health promotion, school nursing and health visiting</p> <p>WCC – YOT, Teenage pregnancy co-ordinators, Youth Development Service, Children Looked After, Education</p> <p>District Councils – leisure services, trading standards, environmental health (licensing)</p> <p>Non statutory organisations – Gay Men's Health, Terence Higgins Trust</p> <p>Service Providers – NHS Trusts, voluntary agencies Service users</p>	<p>Increased number of young people aged 16-24 being screened for Chlamydia</p> <p>Increased number of people accessing treatment for sexually transmitted infections</p>	<p>Reduction in teenage pregnancy (see Children's block)</p> <p>GUM 48 hour waiting time achieved</p> <p>?Reduce numbers of people aged <24 years treated for STIs by 10% by 2009</p>
	1.6 Reducing the incidence of all accidents in people under 19 years	PCT/ LA Director of Public Health PCT/LA Director of Public Health	<p>Target interventions to reduce risk taking behaviours by young people (cross reference Children's Block)</p> <p>Understand accident data (accidental, non-accidental, in the home, road traffic collisions)</p> <p>Using relevant data, implement action plan that supports the Wiltshire Childhood Injury Prevention Strategy according to identified priority areas.</p>	<p>NHS – PCT, public health, NHS Trusts, health visitors and school nurses, Ambulance Trust</p> <p>WCC – Education, road safety,</p> <p>Wiltshire Police</p> <p>Wiltshire Fire Service</p> <p>Network Rail and British Transport Police</p>	<p>Agreed standard for robust data collection and information during Year 1</p> <p>Year 2 / 3 indicators to be determined once above agreed</p>	see indicator

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	1.7 Increase the awareness of mental health problems within communities	PCT/LA Director of Public Health	<p>Implement local alcohol and drugs harm reduction programmes, for all ages (cross reference Safer and Stronger block).</p> <p>Increase awareness of work related stressors by Exemplar employers, and ensure development of local policies and procedures that support affected members of staff.</p> <p>Increase awareness of the potential impact of deprivation and health inequalities on the mental health status of individuals (all ages) - Cross reference Children's block for bullying.</p>	<p>Employers</p> <p>NHS – PCT, Mental Health Trust, health promotion</p> <p>WCC – SWEx</p> <p>Healthier Wiltshire</p>	<p>Number of workplaces engaged in:</p> <ul style="list-style-type: none"> • Improving mental health awareness • Identifying and reducing work related stress • Reducing drugs and alcohol is the workplace <p>Numbers of <19s requiring treatment for illegal drug taking and/or binge drinking or alcohol misuse</p> <p>To amend</p>	<p>To achieve activities</p> <p>To add target</p>
	1.8 Reduce the incidence of CHD and Stroke through effective prescribing	PCT/LA Director of Public Health	<p>Monitor prescriptions of statins, cholesterol lowering drugs and anti-hypertensives</p> <p>Use QOF data to measure prevalence and incidence in populations</p> <p>Target interventions according to above.</p>	<p>PCT – GPs, Pharmacists</p> <p>Service Users</p>	TBC	TBC