



# **Healthier City Framework and 2010 / 2011 Healthier City Plan**







## **CONTENTS**

|  |                |
|--|----------------|
| <b>1. Foreword</b>   | <b>page 2</b>  |
| <b>2. Purpose</b>  | <b>page 2</b>  |
| <b>3. Context- The meaning of health and why the Council has a role</b>                      | <b>page 3</b>  |
| <b>4. What the Council will do</b>   | <b>page 5</b>  |
| <b>5. Healthier City Framework - Structure</b>   | <b>page 6</b>  |
| <b>5.1 Political engagement</b>  | <b>page 6</b>  |
| <b>5.2 Officer engagement</b>  | <b>page 7</b>  |
| <b>5.3 Monitoring and reporting</b>  | <b>page 7</b>  |
| <b>5.4 Accountability</b>  | <b>page 8</b>  |
| <b>5.5 Membership</b>  | <b>page 9</b>  |
| <b>6. Officer contact details</b>  | <b>page 9</b>  |
| <b>7. Healthier City Action Plan 2010 / 2011</b>   | <b>page 11</b> |
| <b>8. Appendices</b>   |                |
| <b>Appendix 1 - Internal Mapping<br/>    Interdepartmental Group on Health and Wellbeing</b> | <b>page 28</b> |
| <b>Appendix 2 – External Mapping<br/>    Health Strategies</b>                               | <b>page 35</b> |

## **1.0 Foreword**

Belfast City Council's (BCC) overall purpose is to improve quality of life now and for future generations. One of the greatest quality of life issues in the city is the health and wellbeing of our people. Despite investment in health, there continues to be a significant difference between the health of those living in deprived areas and those living in more affluent areas. This health gap and indeed the general health of the population in the City is worse than in many other UK cities. Whilst our City Health Profile indicates that there have been improvements in the last decade in better overall life expectancy, lower unemployment, better educational attainment and better housing, we still have many challenges ahead.

The Council delivers a diverse range of services and activities which impact upon the health and well-being of our residents. For the first time, this document brings together those areas of the Council's work which impact on health and well-being into a single framework. This framework and plan will guide the Council as it tackles our major public health and well-being challenges, such as smoking, physical activity, healthy eating and access to services.

We will continue to work closely with all our partners to improve the health and well-being of those who live and work in Belfast. Indeed, partnership working has never been more important, as we have recently entered into an innovative partnership arrangement with the Public Health Agency (PHA) and the Belfast Health and Social Care Trust (BHSCT) to create the Belfast Health Development Unit (BHDU). The new Unit, which is located within the Council and has staff from all three organisations, will support the establishment of a city wide partnership and drive forward its work in tackling health inequalities and improving the health and wellbeing of the people of Belfast.

This Healthier City Framework and one year plan, which has been put together by the interdepartmental Healthier City Group, gives us a mechanism and key actions to help us jointly plan and deliver services, implement projects and activities, communicate and share information and manage our performance.

It is of relevance to everyone in the Council, so we would encourage you to read it and to become involved in what your Department is doing to contribute to a Healthier City. We are developing new mechanisms for performance management which will tell us how well we are all performing against the actions and targets set. Chief Officers and Members will be reviewing this regularly which will ensure that a Healthier City is always high on all of our agendas.

We look forward to seeing real progress on shaping a Healthier City during 2010 and beyond.

## **2.0 Purpose**

The purpose of this framework is to clearly lay out how we will deliver and contribute to developing a healthier city. It describes the delivery, leadership and accountability mechanisms that we will need, to achieve a 'One Council' approach to developing a healthier Belfast.

Creating a healthier city is a key priority for us. To achieve this we need to ensure co-ordination and integration of key services which have an impact on the health of our people.

## 2.1 Vision and mission

### Vision

Our vision is Belfast City Council delivering integrated services, creating a city where people are healthier, more active and where opportunities are provided for people to improve their wellbeing, particularly amongst disadvantaged groups.

### Mission

Our mission is to achieve an integrated and co-ordinated 'one council' approach to creating a Healthier City by establishing and maintaining open communication and effective joined up working. It is also to monitor and challenge current activity and performance enabling us to deliver our corporate priorities

The Healthier City Framework and Healthier City plan are the platforms we will use to develop and maintain this integration, ensuring we meet our corporate priorities.

## 3.0 The meaning of 'health' and 'health inequalities' and why Belfast City Council has a role

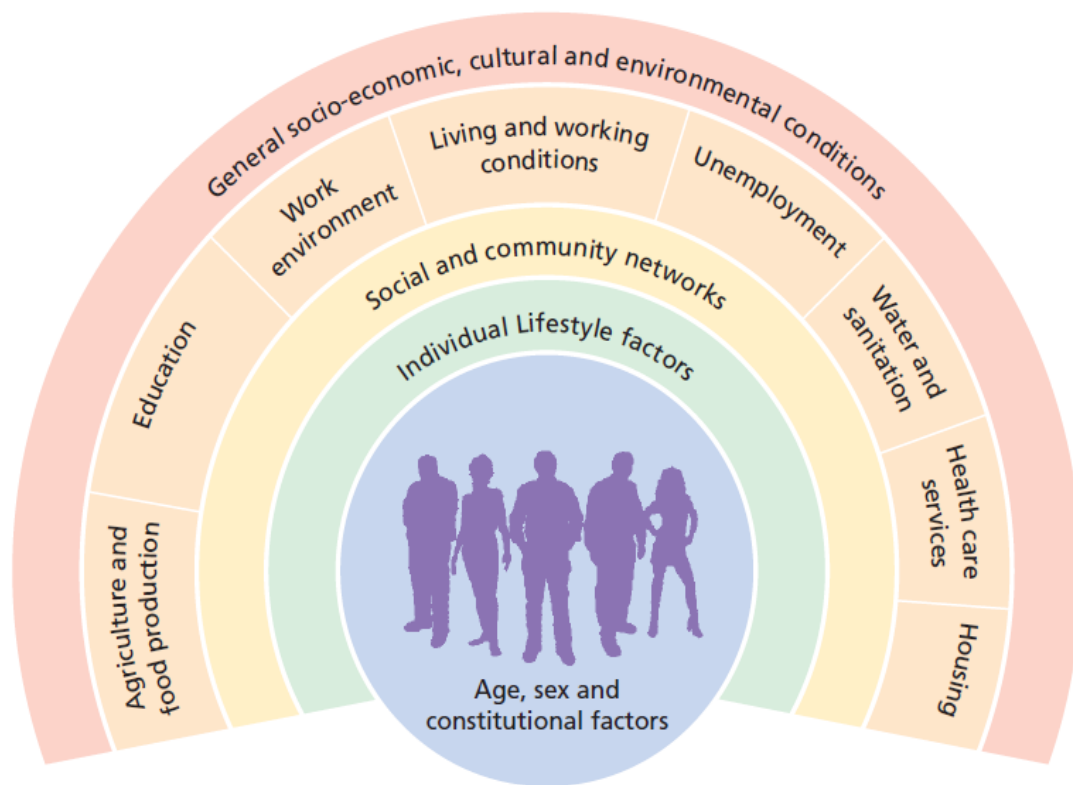
It is well known that the higher the level of deprivation in an area, the less chance people have of living a long and healthy life as their social and economic circumstances can lessen their aspirations and choices. This is known as health inequality and is particularly evident in Belfast. Health inequalities have not lessened and it is not acceptable for people living in deprived areas to have shorter life expectancy and higher levels of preventable illness than those living in more affluent areas.

This 'health gap' and indeed the general health of the population of Belfast is worse than many other UK cities

- Smoking levels remain high and smoking is still one of the main causes of preventable death
- Economic inactivity in Belfast is among the highest in the UK and obesity is increasing.
- Misuse of alcohol continues to place an enormous burden on the health and wellbeing of the people of Belfast. Alcohol misuse kills more people directly than illegal drugs; it is closely related to crime and contributes to mental illness.

The Northern Ireland public health strategy *Investing for Health* (2002) has been adopted fully by Belfast City Council. It recognises that health and well-being is largely determined by the social, economic, physical and cultural environment. Health policy has so far tended to concentrate on the treatment of ill health rather than on its prevention. This framework and plan seeks to shift that emphasis by taking action to

tackle the factors which adversely affect health and perpetuate health inequalities – known as the Social Determinants of Health (Figure1).



Source: Dahlgren G and Whitehead M, Health Inequalities, London HMSO, 1998

**Figure 1: Social Determinants of Health**

The Council has a key role to play in addressing these issues, which is why it has included the development of a healthier city as one of its key priorities under the Supporting People and Communities theme of the corporate plan. Its role can be considered in three ways:

- Civic leadership
- Service delivery
- Advocacy

### **Civic Leadership**

The Council has the democratic legitimacy and services that can tackle social disadvantage and improve people’s health and wellbeing. The new partnership arrangements with the health sector; elected members involvement in local health commissioning and the advent of community planning all present the Council with an excellent opportunity to take a key role in leading the inter-sector approach needed to tackle the wider issues that impact on people’s health.

### **Service Delivery**

In terms of delivery, the Council currently provides a wide range of services within communities which impact on or have the capacity to impact on people’s health and wellbeing. These include leisure services, community services, environmental health,

good relations, community safety, city development, parks and open spaces, services for children and young people, economic development, regeneration and culture and arts. However, in order to ensure that the Council's current work maximises its impact on health and wellbeing it is essential that this cross-council framework is utilised effectively in business and resource planning.

### **Advocacy**

The Council has an increasing role in liaising with Government in relation to the health and wellbeing of communities. This role can involve giving advice, influencing in relation to policy and responding to consultations. It is also likely that the Council's developing role in relation to health and wellbeing will be enhanced further by the Review of Public Administration (RPA) under which it is expected the Council will acquire responsibility for community planning and a new power of wellbeing.

Given the increasing role of the Council in improving health and wellbeing it is essential that the healthier city plan reflects what the Council can do to meet its corporate and civic responsibilities and supports the Councillors in this new role, particularly those appointed to the local health commissioning group.

## **4.0 What the Council will do**

Belfast City Council's Corporate Plan (2008 – 2011) includes a focus on Health and Wellbeing under the Supporting People and Places theme.

Our corporate action to achieve this objective is to develop and implement, in partnership with others, a Healthier City plan that encompasses and integrates all council services which directly support the objective of making people feel healthier.

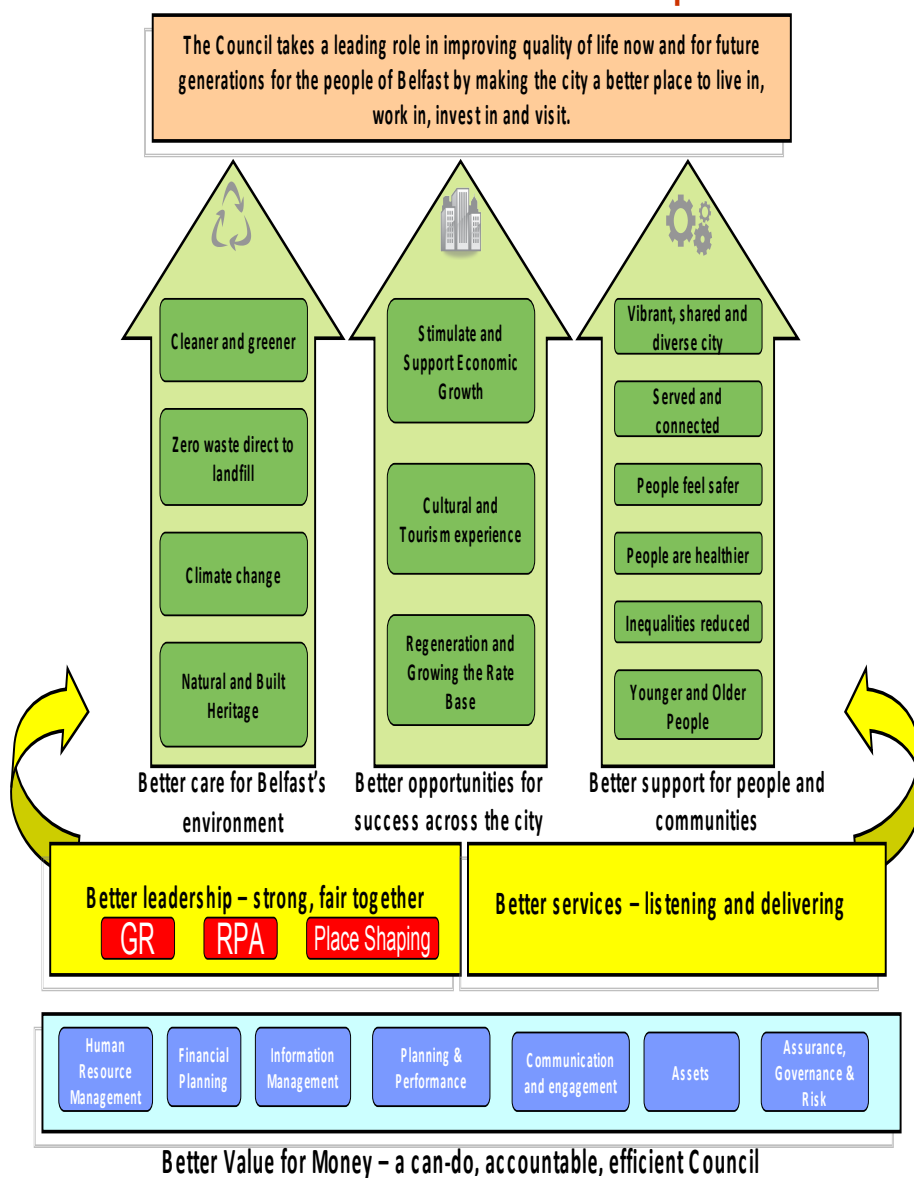
The corporate plan is underpinned by a strategic performance management framework, which uses a 'value creation map' – a visual representation of our overall purpose, the key competencies we need to deliver our purpose and the key resources we need to support these competencies. See figure 2 below.

In this first year ( 2010- 2011) key areas of work for the Council will be outlined in the Healthier City Plan (attached) which will shape our approach around six city wide themes, which have been identified by the new Belfast Health Development Unit as a starting point in tackling health inequalities and improving health and wellbeing.

The Healthier City Framework provides a mechanism:

- to align our work to the Corporate plan, which enables us to meet our obligations and responsibilities in a coordinated and integrated manner
- to develop, monitor and review the internal Healthier City Plan
- to inform the Health and Wellbeing Plan for Belfast which we will develop and deliver jointly with our partners supported by the Belfast Health Development Unit

## BCC Value Creation Map



**Figure 2: Belfast City Council Value Creation Map**

### 5.0 Healthier City Framework – Structure

#### 5.1 Political Engagement

Fundamental to the success of the framework is Councillor engagement, to ensure that Elected Members play a full role in leading, developing and overseeing the Healthier City theme.

As a cross-departmental theme political engagement will be achieved by using the existing departmental committee structures to inform decision-making and to target and direct resources. Joined-up working will be discussed at an operational level and agreed at a senior officer level. Reports will then be presented to COMT and relevant committees for input and approval with direct reference to the ‘one council’ Healthier City approach.



In addition to this and to ensure political representatives play a focused role in the Healthier City process; it is also proposed that there will be a regular interaction with Elected Members. This may include:

- Party group briefings
- Development of a member's forum linked to the Belfast Local Commissioning Group
- Capacity building activities to enable Elected Members to lead and drive the healthier city agenda

As organisational structures develop in relation to political engagement around corporate themes the Healthier City Framework will adapt to these new structures.

## **5.2 Officer Engagement**

### **Health and Wellbeing Interdepartmental Group**

The Interdepartmental Group on Health and Wellbeing, made up of senior officers and chaired by the Director of Parks and Leisure Andrew Hassard will oversee the development, performance management, monitoring, evaluation and communication of the councils Healthier City Framework and Plan. The work of the Interdepartmental Group on Health and Wellbeing will be supported by the Health and Wellbeing Coordinator.

### **Terms of reference**

- Oversee the development and implementation of the Councils Healthier City Framework and Plan in line with the corporate plan.
- Develop an annual prioritised action plan that will feed into departmental and service business planning across the council.
- Provide leadership for integrated action across the council on the Healthier City agenda.
- Provide regular update reports to COMT and the Strategic Policy and Resources Committee.
- Ensure that the work on the Healthier City agenda is integrated with corporate planning, community planning, local area working and the wider strategic partnership work on health improvement within the city.
- Work within the thematic budget under the corporate objective of “supporting people and communities – people are healthier”.
- Influence policy and legislative developments that may impact on a healthier city.
- Provide a council wide response to major health consultations
- Guide, monitor and support any working groups established to implement the Plan

## **5.3 Monitoring and Reporting**

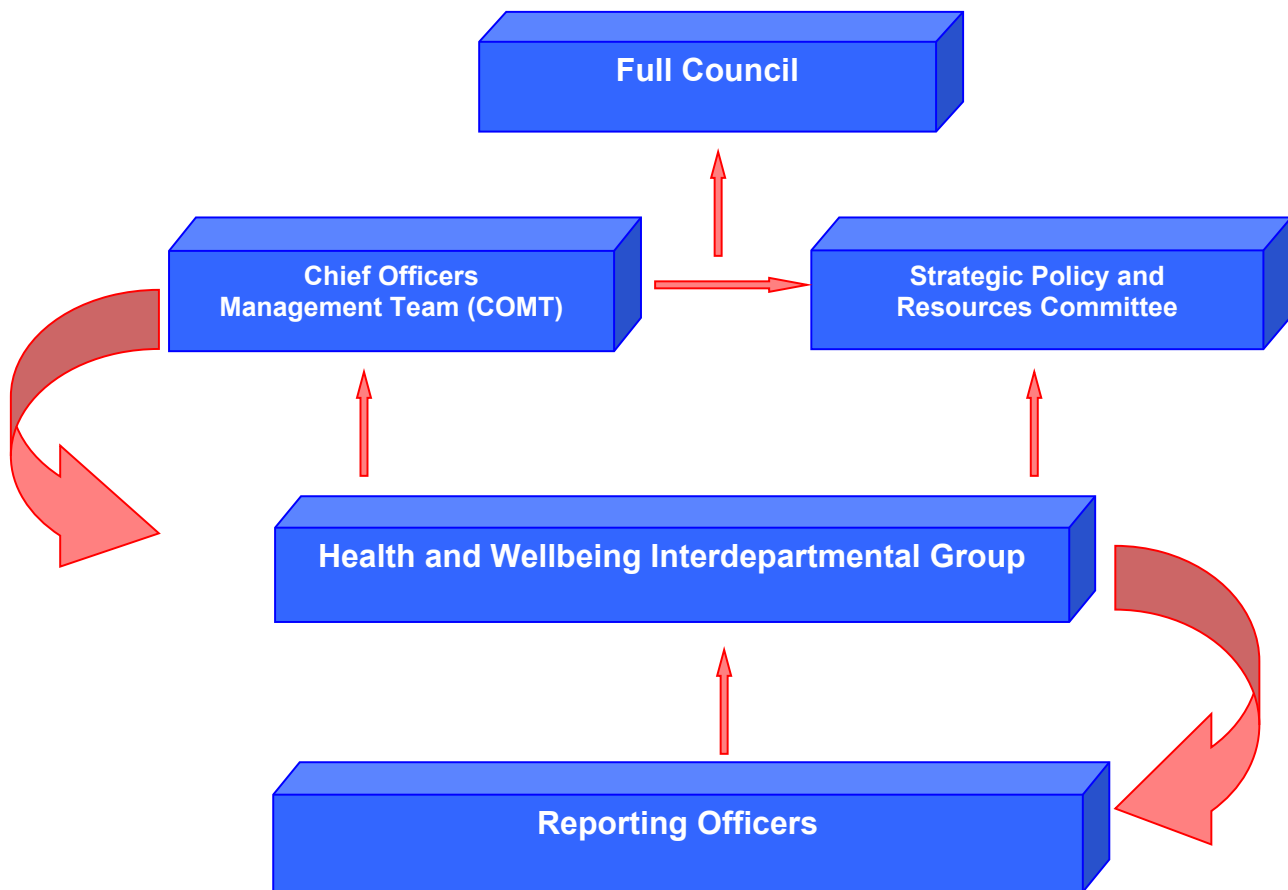
Reporting officers will be nominated from the Interdepartmental group to monitor progress on the action plan tasks to which they are assigned. The Reporting officers will:

- Develop prioritized action plans for each key area of work
- Involve other officers as appropriate (line management approval is necessary) to ensure progress is made against the action plan

- Develop and deliver options for addressing the identified issues, which will contribute towards achieving aims in both the short and longer term.
- Complete project review reports and provide updates on progress at meetings of the Interdepartmental Health and Wellbeing Group
- Influence and support services and ensure relevant business plans reflect the Healthier City agenda.
- Seek and form cross departmental working practices.

#### 5.4 Accountability

Overall accountability will be to full council via the Strategic Policy and Resources committee. As work on the new corporate planning process progresses, new reporting structures may be introduced. Accountability to COMT will be through Andrew Hassard the chair of the group.



**Figure 3: Healthier City Accountability Structure**

## 5.5 Membership

### Interdepartmental Health and Wellbeing group

| Department                        | Representative  |
|-----------------------------------|---|
| Health and Environmental Services | Siobhan Toland/ Suzanne Wylie<br>Jean Bonner<br>Valerie Brown<br>Jim Shields<br>Tom Crossan<br>Karen Treanor<br>Adele Keys<br>Liam Dornan<br>Claire Patterson |
| Parks and Leisure                 | Katrina Morgan Talbot<br>Gary McNeill<br>Caroline Wilson / Elaine Black<br>Helen Hurrell  |
| Development                       | Jenny Oliver<br>Sarah Jayne Smith   |
| Chief Executive                   | Hazel Francey / David Robinson<br>Louise Kennedy  |
| Corporate Services                | Alison Long<br>John Walsh<br>Nora Largey  |
| Core Improvement                  | Sandra Donnelly   |

## 6.0 Officer contact details

For further information, please contact:

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**Health and Wellbeing Coordinator**

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# **Healthier City Plan**

**2010/2011**

**Version: 1.0**

## **Key areas of work**

Central to the Healthier City Framework is the internal council wide Healthier City Plan, which will shape our approach. This plan has been produced after widespread mapping of current internal and external actions and strategies being undertaken (Internal Mapping Appendix 1, External Mapping Appendix 2) which address the three key corporate priorities of Belfast City Council, namely;

- People are healthier
- People are more active
- Inequalities are reduced

The 2010/2011 Healthier City plan will focus on a number of key areas of work to help us address the health and wellbeing of the citizens of Belfast in a coordinated and integrated manner. The key areas of work are;

### **Healthier Communities**

Successfully and effectively develop and deliver initiatives which will provide opportunities for people to feel healthier, become more active, and to reduce inequalities in health

### **Policy and Strategic planning**

Ensure sustainability of our contribution to a Healthier City across the organisation by ensuring relevant Council policies and strategies provide the best possible health outcomes and integration with the Council's health and wellbeing thematic work.

### **Capacity Building**

Ensure our staff, elected Members and citizens are enabled to play a lead role in shaping the Healthier City agenda

### **Communication, Promotion and Marketing**

Ensure staff and public awareness of our role in creating a Healthier City and of health promoting opportunities

## **Links to BHDU**

The actions contained in the plan are also aligned to external agendas and in particular to the themes that have been identified by the Belfast Health Development Unit to address the main issues affecting the people of Belfast at this time. The main ones are listed below and are underpinned by two important cross cutting themes

- Mental health & wellbeing, and
- Health in all policies

1. **Children and Young Peoples' Outcomes:** including Early Years Intervention Programmes, Obesity, Alcohol Misuse and HAZ's Integrated Services for Children and Young People in local areas. This would in turn relate to BCC's strategy on Children and Young People and to other key goals of the PHA and BHSCT, such as, reducing teenage pregnancy and improving sexual health.

2. **Improving Outcomes to Disadvantaged Neighbourhoods** (including links between regeneration and health). This will relate to joint interventions at a local level, linking to the work of Neighbourhood Renewal Partnerships, the Strategic Regeneration Frameworks (and the indicators that are currently being developed on local regeneration and health). There is considerable potential to bring the added strengths of BCC across parks and leisure, good relations, community development and local area working, as well as capital and investment strategies of all partners.
3. **Older People** and alignment with the Belfast Healthy Ageing Partnership on older people. This is already a priority of both BCC and the PHA and this work would seek to build synergy and maximise benefits for older people.
4. **Improved physical activity for all:** particularly related to children and young people, policy development, older people and regeneration. It also relates to the corporate agendas of BCC and the PHA. The Council's strategies for parks & leisure, capital works and community support offer potential for bringing considerable added value.
5. **Black and Minority Ethnic Groups:** BCC has a multi-agency partnership aimed at developing good relations and service provision to this grouping and is also undertaking some specific work at a European level on health needs within this group. This aligns with the PHA commitment to address inequalities amongst Black and Minority Ethnic Groups. This issue is also on the agenda of most of the key statutory organisations.
6. **Health & Wellbeing issues associated with Alcohol misuse:** Misuse of alcohol continues to place an enormous burden on the health and wellbeing of the people of Belfast and on the city's economy. It kills more people directly than illegal drugs; it is closely related to crime and antisocial behaviour and it also contributes to mental illness. This is a significant issue for the community safety partnership and links to a number of Council services dealing with antisocial behaviour, e.g. those dealing with on street drinking, drinking in parks, noisy neighbours and the 'Get Home Safe' campaign

### **Link to Belfast Healthy Cities**

The Belfast Health Development Unit will have a strategic focus, influencing how agencies operate and plan in order to create strategic alignment of agendas. An underpinning aim of the Unit is health and health equity in all policies which is a key goal of World Health Organisation (WHO) Phase V. Belfast Healthy Cities are the lead agency for this work and to date have carried out research into capacity building for agencies and elected representatives and developed a programme to take this work forward.

## Healthier City Plan 2010/2011

|                                   |                       |
|-----------------------------------|-----------------------|
| Healthier City 2010/2011 Key Area | Healthier Communities |
|-----------------------------------|-----------------------|

|            |  |
|------------|--|
| Objectives | To deliver initiatives which will provide opportunities for people to become healthier and more active and to reduce inequalities in health              |
| Outcomes   | <p>One Council approach to tackling health issues</p> <p>Increased accessibility to services</p> <p>Reduced inequalities</p> <p>Healthier population</p> |

| Key tasks and timescale | Key tasks   | Timescale  | Reporting Officer   |
|-------------------------|---|--|---|
| <b>HEALTHIER</b>        | <p>Combat some of the main threats to health and in particular:</p> <p><b>Smoking</b></p> <ul style="list-style-type: none"> <li>• Ensure compliance with tobacco control legislation</li> <li>• Implement under age sales programme for tobacco</li> <li>• Roll out smoking cessation education and support programme to Council staff and businesses throughout Belfast</li> </ul> <p><b>Suicide</b></p> <ul style="list-style-type: none"> <li>• Work in partnership with key statutory agencies such as PSNI and Belfast Health and Social Care Trust and key community stakeholders including PIPS to develop a community response plan/protocol to potential clustering of suicides</li> <li>• Support continuing participation in community lifeguard training by frontline services such as community, playworkers, youth forum, leisure.</li> </ul> <p><b>Misuse of Alcohol</b></p> <ul style="list-style-type: none"> <li>— Support Community Safety staff to improve mental health and well-being through programmes tackling alcohol fuelled violent crime, anti-social behaviour, reducing the fear</li> </ul> | <p>January–December 2010</p> <p>January–December 2010</p> <p>January–December 2010</p> <p>October 2010</p> <p>Ongoing</p> <p>Ongoing</p> | <p><b>Valerie Brown</b></p> <p><b>Tom Crossan</b></p> <p><b>Tom Crossan</b></p> |



| Key tasks and timescale | Key tasks   | Timescale  | Reporting Officer            |
|-------------------------|---|--|------------------------------|
|                         | <p>of crime, helping people feel safer and the Get Home Safe initiative to reduce underage drinking</p> <ul style="list-style-type: none"> <li>• Contribute to the development of a Directory of Services and a Strategy for the support/treatment of people with alcohol related health problems (key partners include PHA and BHSCT)</li> <li>• Develop and deliver a joint outcome based programme of work between the Council, Belfast Health and Social care Trust and other appropriate agencies to reduce alcohol related harm/substance abuse in Belfast's children and young people. ( see Children &amp; Young people)</li> </ul> <p><b>Obesity</b></p> <p>Target obesity in all age groups through</p> <ul style="list-style-type: none"> <li>• Weight Management programmes citywide for self-referring adults.</li> <li>• Healthy Families – pilot a whole family intervention approach for up to 25 participating families citywide, combining weight management, education and physical activity.</li> <li>• Peer education intervention programme –pilot this programme with young women adopting a similar approach to that of Healthy Families.</li> <li>• Prevention of Obesity Programme- Pilot programme with up to 30 teenagers at risk of obesity focussing on healthy choices and the benefits of good nutrition and physical activity.</li> <li>• Research the effectiveness of the different approaches to obesity taken by the pilot projects to provide an evidence base for future obesity projects. This will be conducted by University of Ulster and will be the first Belfast specific research comparing a range of interventions to obesity, including the family approach.</li> <li>• Explore the use of Choose N Move as a preventative tool for combating obesity.</li> </ul> | <p>April 2010–March 2011</p> <p>January–June 2010</p> <p>January–June 2010</p> <p>January–June 2010</p> <p>January–June 2010</p> <p>September 2010</p> | <p><b>Katrina Morgan</b></p> |

| Key tasks and timescale | Key tasks   | Timescale                                       | Reporting Officer                                      |
|-------------------------|---|---|--|
|                         | <p><b>Heart attacks/stroke/respiratory disease</b></p> <p>Council Health and Fitness Officer will, having obtained written consent of clients at the outset, evaluate the current exercise referral schemes offered to those who have suffered/are at risk of these conditions via their feedback on client questionnaires, to verify effectiveness and roll out good practice.</p> <p>Specifically</p> <ul style="list-style-type: none"> <li>• Cardiac Rehabilitation</li> <li>• FRESH</li> <li>• Healthwise</li> </ul> <p><b>Children and Young People</b></p> <ul style="list-style-type: none"> <li>• Through our work with the Belfast Health Development Unit develop and deliver a joint outcome based programme of work between the Council, Belfast Health and Social Care Trust, Public Health Agency and other appropriate statutory agencies to promote the health of children and young people. Clearly defined targets will be set and will include <ul style="list-style-type: none"> <li>– Reducing alcohol/substance abuse related harm in children and young people</li> <li>– Challenging rising levels of obesity in children and young people</li> <li>– Increasing participation in physical activity of children and young people</li> <li>– Developing the Roots of Empathy programme- Belfast City Council to lead the consortium partners in development of this initiative to raise the social and emotional competence of primary school children, reduce aggression/bullying and promote empathy and respect for diversity. Application will be made for Peace III funding to cover training for instructors ( 10) evaluation and promotion. It will be delivered in 10 schools across Belfast initially, with up to 250 children ( including those from deprived areas and black/minority</li> </ul> </li> </ul> | <p>April 2010<br/>January 2010<br/>May 2010</p> | <p><b>Katrina Morgan</b></p> <p><b>Tom Crossan</b></p> |

| Key tasks and timescale | Key tasks   | Timescale   | Reporting Officer                                  |
|-------------------------|---|---|--|
| <b>MORE ACTIVE</b>      | <p>ethnic groups) participating</p> <ul style="list-style-type: none"> <li>• Link with key council service providers on initiatives promoting the health and wellbeing of children and young people, such as <ul style="list-style-type: none"> <li>– Youth Forum Programme</li> <li>– Party in the Park</li> </ul> </li> <li>• Contribute to a proposal for a cross council approach to summer scheme planning and delivery</li> <li>• Contribute to a one year pilot to test the potential of delivering joined up health activities as part of the overall Summer Scheme</li> <li>• Contribute to co-ordinated Council summer schemes which promote the physical and mental wellbeing of children and young people in Belfast</li> </ul> | <p>March 2010</p> <p>March 2010</p> <p>March 2011</p>                                   | <p><b>Jenny Oliver</b></p>                         |
|                         | <p><b>Healthy Ageing/Older people</b></p> <p>Support the Officer Group and the Older People's Action Plan.</p> <ul style="list-style-type: none"> <li>• Deliver health and wellbeing events for older people. To include: <ul style="list-style-type: none"> <li>– Training in chair based activity for staff in older people's residential homes</li> <li>– Older Men's Health day at the Council's Grove Health and Wellbeing Centre – including health checks, workshop on nutrition and physical activity such as tai chi</li> <li>– Senior's games event</li> <li>– Targeted activities in Council facilities such as Leisure and Community centres ( Lunch clubs, seniors gyms, tea dances)</li> </ul> </li> </ul>                    | <p>March 2010</p> <p>March 2010</p> <p>March 2010<br/>February 2010–<br/>March 2011</p> | <p><b>Adele Keys</b></p>                           |
|                         | <p>Provide more opportunities for people to get active by developing the 'Active Belfast' and Open Spaces Strategy and approach.</p> <ul style="list-style-type: none"> <li>• Active Communities – plan to increase community participation in physical activity/sport through employment of coaches.</li> <li>• Holding a seminar with key stakeholders to explore an Active Families approach to physical activity as a model of best practice and</li> </ul>   | <p>January-December 2010</p> <p>May 2010</p>  | <p><b>Caroline Wilson &amp; Katrina Morgan</b></p> |

| Key tasks and timescale   | Key tasks   | Timescale                | Reporting Officer     |
|---|---|--------------------------|-----------------------|
| <b>REDUCE INEQUALITIES</b>  | intervention  | January- December 2011   | <b>Adele Keys</b>     |
|   | <ul style="list-style-type: none"> <li>Implementing the Making Belfast More Active strategy, in particular the work of the Health and Physical Activity subgroup</li> </ul>                                       | March 2011               |                       |
|   | <ul style="list-style-type: none"> <li>Examining branding for projects which contribute to an Active Belfast. Examples include Connswater/Greenway and cycling routes.</li> </ul>                                 | March 2011               |                       |
|   | <ul style="list-style-type: none"> <li>Exploring a “total places” approach to provision of physical activity</li> </ul>   | May–August 2010          | <b>Gary McNeill</b>   |
|   | <ul style="list-style-type: none"> <li>Developing New playgrounds – at Eversleigh Street and Musgrave, where a Therapy Garden ( a sensory play area for children with disabilities) is being developed</li> </ul> | January 2010-2011        | <b>Donna Gleek</b>    |
|   | <ul style="list-style-type: none"> <li>Organising events linked to the Health Calendar e.g. Marathon, Cycle to work etc.</li> </ul>   | May 2010                 | <b>Katrina Morgan</b> |
|   | <ul style="list-style-type: none"> <li>Using coaches for outreach physical activity programmes in the parks</li> </ul>  | February–March 2010      | <b>Donna Gleek</b>    |
|   | <ul style="list-style-type: none"> <li>Holding 3 Community Health Fairs (Andersonstown, Grove Wellbeing, Ozone)</li> </ul>  | May–August 2010          | <b>Helen Hurrell</b>  |
|   | <ul style="list-style-type: none"> <li>Facilitating the use of orienteering maps in parks</li> </ul>  | January 2010-2011        | <b>Katrina Morgan</b> |
|   | <ul style="list-style-type: none"> <li>Maximising opportunities for physical activities in leisure centres e.g. at bank holidays/ leisure centre downtime</li> </ul>  | January 2010– March 2011 | <b>Katrina Morgan</b> |
| <ul style="list-style-type: none"> <li>Delivering a programme of physical activity, weight management and alcohol awareness to 20 young men in West Belfast</li> </ul>  |   | <b>Donna Gleek</b>       |                       |
| <p>Target the health needs of ethnic minorities/traveller's/ deprived communities</p> <p>Work with key services e.g. Good Relations, Community Services, SNAP and the EU unit to:</p>   |   |                          |                       |
| <ul style="list-style-type: none"> <li>profile the health needs of a divided city (Good Relations Action Plan – “Linked City”)</li> </ul>   | January 2010–2011   |                          |                       |
| <ul style="list-style-type: none"> <li>Through involvement in the steering group of the QEC Healthy &amp; Wealthy Together project <ul style="list-style-type: none"> <li>Map the health needs of migrant and minority ethnics locally through a key stakeholders workshop</li> </ul> </li> </ul> | April 2010-April 2011   |                          |                       |

| Key tasks and timescale | Key tasks  | Timescale  | Reporting Officer  |
|-------------------------|--|--|--|
|                         | <ul style="list-style-type: none"> <li>- Identify the main 3 migrant health needs</li> <li>- Share these with the other European partners and their fora to start the process of information sharing on issues and good practice interventions(web- based platform for exchange of information to be developed)</li> <li>- Develop better approaches to poverty and health inequalities among migrants through shared learning</li> <li>• Map the health needs of deprived communities in the city (Citystats and Neighbourhood Renewal Plans) <ul style="list-style-type: none"> <li>- Develop programmes responsive to needs identified above.</li> <li>- Initially work here will focus on three health projects being developed in the SNAP pilot area of Suffolk/Lenadoon which are Men's Health, Health of Older People and obesity.</li> </ul> </li> <li>• Work with the Farset Health Inequalities Partnership (agencies include Area partnership Boards, PHA, BHSCT, LCG, Healthy Living Centres) on actions to reduce inequalities. This will include promoting debate and engagement on health inequalities through conferences and workshops, and seeking government support for programmes to narrow the health gap suffered by poorer communities.</li> <li>• Poverty – contribute to development of the Council's anti poverty strategy</li> <li>• Review the pricing policies and funding streams of key services such as parks and leisure, community and good relations to maximise the opportunities for people to become involved in health based activities which are accessible, affordable or even free.</li> <li>• Develop a proposal for an interdepartmental approach to establishing and supporting community gardens. The proposal will include a rationale for adopting a cross council approach, including its potential to</li> </ul> | <p>January 2010–<br/>March 2011</p> <p>January 2010-2011</p> <p>September 2010</p> <p>March 2011</p> <p>May 2010</p> | <p><b>Brian Kelly</b></p> <p><b>Mairead Smith</b></p> <p><b>Jelena Buick</b><br/><b>Katrina Morgan</b></p> <p><b>Helen Hurrell</b></p> |

| Key tasks and timescale | Key tasks  | Timescale                   | Reporting Officer  |
|-------------------------|--|-----------------------------|--------------------|
|                         | <p>improve the H&amp;W of local communities</p> <ul style="list-style-type: none"> <li>• Contribute to the development of new cross council projects which provide opportunities for improving health and wellbeing and in particular: <ul style="list-style-type: none"> <li>– Connswater Community Greenway</li> <li>– Regeneration of Woodvale and Dunville Park</li> <li>– Urban Sports Park</li> <li>– Holylands Implementation Plan</li> </ul> </li> </ul> | January 2010–<br>March 2011 | <b>Donna Gleek</b> |

|   |   |   |  |
|---|---|---|--|
| <b>Key performance questions</b>  | <p>Are we providing services which will prevent some of the main threats to health?</p> <p>Are the priorities adopted in line with corporate and existing partnership plans, priorities and targets for health improvement in Belfast?</p> <p>Are we delivering projects which will make people healthier?</p> <p>Are we reducing health inequalities?</p> <p>Are we adopting an integrated approach to the delivery of services which promote health?</p> <p>Are we maximising the potential across services to deliver co-ordinated activities?</p>   |   |  |
| <b>Key performance indicators</b>   | <p>Uptake of physical activity programmes/ programmes promoting health and wellbeing</p> <p>Feedback from programme participants</p> <p>Number of successful participants in smoking cessation project – at 4 weeks and 52 weeks</p> <p>Number of successful participants in obesity /weight management programmes</p> <p>Levels of obesity in children, men, women</p> <p>Percentage of people eating 5 pieces of fruit/vegetables per day</p> <p>Feedback from Public Consultation survey/ Programme evaluations</p> <p>Number of joint projects organised</p> <p>Number of departmental plans reflecting Health as a corporate theme</p> |   |  |
| <b>Risks</b>  | <p>Resources</p> <p>Inadequate sharing of information</p> <p>Lack of buy in from services</p> <p>Low participation</p>  |   |  |
| <b>Services involved</b>  | <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> Parks and Leisure<br/> Community Services<br/> Environmental Health<br/> Community Safety </td> <td style="width: 50%; border: none;"> SNAP<br/> EU Unit<br/> Development<br/> Good Relations </td> </tr> </table>   | Parks and Leisure<br>Community Services<br>Environmental Health<br>Community Safety | SNAP<br>EU Unit<br>Development<br>Good Relations |
| Parks and Leisure<br>Community Services<br>Environmental Health<br>Community Safety | SNAP<br>EU Unit<br>Development<br>Good Relations  |   |  |

## Healthier City Plan 2010/2011

|  |                                      |
|--|--------------------------------------|
| <b>Healthier City 2010/2011 Key Area</b> | <b>Policy and Strategic Planning</b> |
|--|--------------------------------------|

|                   |   |
|-------------------|---|
| <b>Objectives</b> | <b>Ensure relevant Council policies and strategies provide the best possible health outcomes and integration with the Council's health and wellbeing thematic work.</b> |
| <b>Outcomes</b>   | <b>Health and health equity reflected in all council policies<br/>Preparation for Community Planning<br/>Elected members leading the Healthier City agenda</b>          |

| <b>Key tasks and timescale</b> | <b>Key tasks</b>  | <b>Timescale</b>   | <b>Reporting Officer</b>   |
|--------------------------------|---|--|--|
|                                | <ul style="list-style-type: none"> <li>• Link with the Policy Officer Group and ensure health and wellbeing issues are considered within emerging policies and strategies</li> <li>• Focus the agenda of the Interdepartmental H&amp;W Group to ensure the meetings provide an ongoing cross departmental reference point for the work on the development of the anti-poverty strategy and the leisure strategy.</li> <li>• Representing the Interdepartmental Group on policy / strategy development groups</li> <li>• Attending meetings of the group of officers leading on the thematic areas and feeding back links, issues and interdependencies to the interdepartmental working group.</li> <li>• Establish a member's forum linked to local commissioning group               <ul style="list-style-type: none"> <li>– Identify political champion for health and well-being (preferably the Chair of the proposed member's forum)</li> <li>– Develop a mechanism for accountability to members for delivery of healthier city plan</li> </ul> </li> <li>• Work with BHC to develop a Health in all Policies tool ( potentially a Quality of life matrix) that can be used internally within BCC to assess and health equity impacts and areas for improvement within BCC policies and strategies</li> </ul> | <p>January 2010–<br/>December 2010</p> <p>January 2010–<br/>December 2010</p> <p>January 2010-<br/>December 2010</p> <p>September 2010</p> <p>September 2010</p> <p>April 2010</p> <p>March 2011</p> | <p><b>Donna Gleek</b></p> <p><b>Siobhan Toland/<br/>Suzanne Wylie</b></p> <p><b>Adele Keys</b></p> |

| Key tasks and timescale | Key tasks  | Timescale   | Reporting Officer   |
|-------------------------|--|---|---|
|                         | <ul style="list-style-type: none"> <li>• Through the URBACT II project, develop health indicators which can be used to measure health impact of Regeneration in Belfast.</li> <li>• Apply to Big Lottery for funding for a pilot of a community planning model with health as its central theme</li> <li>• Contribute to the design, priorities and work of the new joint co-located Belfast Health Development Unit (comprising Council, Belfast Health and Social Care Trust and Public Health Agency), including: <ul style="list-style-type: none"> <li>– Staff and other resources</li> <li>– Accommodation</li> <li>– Management and accountability</li> <li>– Alignment / integration with other health related partnerships in the city</li> <li>– Alignment with the work of the Local Commissioning Group</li> </ul> </li> </ul> | <p>March 2011</p> <p>March 2011</p> <p>January 2010–<br/>March 2010</p> | <p><b>Valerie Brown</b></p> <p><b>Siobhan Toland/<br/>Suzanne Wylie</b></p> |

|                                   |   |
|-----------------------------------|---|
| <b>Key performance questions</b>  | <p>Are we developing policies which will ensure health equity?</p> <p>Are we working more strategically to become a health improving organisation?</p> <p>Are we preparing for the challenges of community planning and the possible power of wellbeing?</p> <p>Are members leading and effectively inputting into the Healthier City agenda?</p> |
| <b>Key performance indicators</b> | <p>Number of policies/strategies/actions tested for Quality of life impact through the Matrix/health indicators</p> <p>Number of business and departmental plans reflecting the Healthier City Priority</p>   |
| <b>Risks</b>                      | <p>Effectiveness of quality of life matrix in policy development</p> <p>Ongoing Review of Public Administration and the implications of this on community planning/power of wellbeing</p> <p>Councillor workload</p>  |
| <b>Services involved</b>          | <p>Parks and Leisure</p> <p>Community Services</p> <p>Environmental Health</p> <p>Members Services</p> <p>Development Department</p> <p>Core Improvement</p>  |



## Healthier City Plan 2010/2011

|                                   |                   |
|-----------------------------------|-------------------|
| Healthier City 2010/2011 Key Area | Capacity Building |
|-----------------------------------|-------------------|

|            |  |
|------------|--|
| Objectives | To ensure our staff, elected Members and citizens are enabled to play a lead role in shaping the Healthier City agenda                 |
| Outcomes   | Elected members leading the Healthier City Agenda<br>An informed workforce delivering the one council approach to health and wellbeing |

| Key tasks and timescale | Key tasks   | Timescale   | Reporting Officer |
|-------------------------|---|---|-------------------|
|                         | <ul style="list-style-type: none"> <li>• Develop a programme to raise capacity on health and wellbeing with elected members, staff and the community in line with recommendations / developments at city and regional level. This will include working with our partners in Belfast Healthy Cities to :</li> <li>• Support the development of BHC lecture series on the following subjects:               <ul style="list-style-type: none"> <li>- <i>Health equity in local policies;</i></li> <li>- <i>Leadership for Health Equity;</i></li> <li>- <i>Achieving health equity;</i></li> <li>- <i>Intersectoral Action;</i></li> <li>- <i>Community Planning for Health;</i></li> <li>- <i>Community Engagement-Measuring Effectiveness;</i></li> <li>- <i>Social Marketing-An approach to tackling Health Inequalities;</i></li> <li>- <i>Health Spending v health outcomes; Managing knowledge and information effectiveness.</i></li> </ul> </li> <li>• Encourage participation by relevant members / staff on the lecture series and other wellbeing events</li> <li>• Consider the viability of adapting the Welsh Local Government Organisational Development Package “The Route to Health Improvement” (a toolkit for developing the capacity of local authorities to become health improvement agencies).</li> <li>• Liaise with NILGA and the staff commission regarding regional plans for</li> </ul> | <p>February 2010–<br/>December 2010</p> <p>January 2010–<br/>December 2010</p> <p>March 2011</p> <p>February 2010</p> | Tom Crossan       |

| <b>Key tasks and timescale</b> | <b>Key tasks</b>  | <b>Timescale</b> | <b>Reporting Officer</b> |
|--------------------------------|---|------------------|--------------------------|
|                                | Capacity Building for Review of Public Administration and feed into our work on capacity building   | March 2011       |                          |
|                                | <ul style="list-style-type: none"> <li>Consider producing a wellbeing handbook on Health Improvement based on the Welsh toolkit ( options paper to be produced )</li> </ul>                                     |                  |                          |
|                                | Explore developmental/ training opportunities within BCC for links with capacity building and health and wellbeing/health equity. Opportunities may arise if a toolkit/Health and wellbeing handbook is agreed. | April 2010       | <b>Alison Long</b>       |
|                                | <ul style="list-style-type: none"> <li>Produce a calendar of events in relation to health and wellbeing. This should incorporate local, national and international events to promote health.</li> </ul>         | November 2010    | <b>Donna Gleek</b>       |
|                                | <ul style="list-style-type: none"> <li>Investigate the possibility of linking in with Wellnet the internet site for Investing for Health</li> </ul>   | March 2010       | <b>Lorraine Wallace</b>  |
|                                | <ul style="list-style-type: none"> <li>Liaise with the National Association of Councillors regarding capacity building for members on health equity and health and wellbeing</li> </ul>                         | April 2010       | <b>Julie Lilley</b>      |

|                                   |   |
|-----------------------------------|---|
| <b>Key performance questions</b>  | Are we building the capacity of our organisation (staff and members) to become health improving?  |
| <b>Key performance indicators</b> | Number of participants in the lecture series<br>Number of training sessions provided with key services and departments on health and wellbeing.<br>Impact of training on participants as per feedback from evaluation forms |
| <b>Risks</b>                      | Lack of participation<br>Resources  |
| <b>Services involved</b>          | Parks and Leisure<br>Community Services – Youth Forum<br>Environmental Health<br>SNAP<br>Human Resources<br>Members Services  |

## Healthier City Plan 2010/2011

|  |  |
|--|--|
| <b>Healthier City 2010/2011 Key Area</b> | <b>Communications, Promotion and Marketing</b> |
|--|--|

|                   |  |
|-------------------|--|
| <b>Objectives</b> | <b>Ensure staff and public awareness of our role in creating a Healthier City and of health promoting opportunities</b>  |
| <b>Outcomes</b>   | <b>Delivering messages as one Council which promote a healthier city<br/>Raised staff and public understanding of the Council's role in health and wellbeing<br/>Platform and profile for the new Public Health Unit</b> |

| <b>Key tasks and timescale</b> | <b>Key tasks</b>  | <b>Timescale</b>          | <b>Reporting Officer</b> |
|--------------------------------|---|---------------------------|--------------------------|
|                                | Develop communications plan for Health and Wellbeing theme.   | January 2010              | <b>Karen Treanor</b>     |
|                                | <ul style="list-style-type: none"> <li>Identify current initiatives which promote health and wellbeing</li> </ul>   | January 2010              |                          |
|                                | <ul style="list-style-type: none"> <li>Identify key target markets.</li> </ul>  | January 2010              |                          |
|                                | <ul style="list-style-type: none"> <li>Identify how initiatives can be framed to promote their health and wellbeing benefits.</li> </ul>  | January 2010              |                          |
|                                | <ul style="list-style-type: none"> <li>Identify appropriate tools to be used for theme initiatives and projects (Press, City Matters, BCC Website, Social media – facebook, twitter, you tube, ezines, Intercom, Interlink).</li> </ul> | January 2010              |                          |
|                                | <ul style="list-style-type: none"> <li>Identify constraints and compromises which may need to be made, to ensure quality control and consistency of messages.</li> </ul>  | March 2010                |                          |
|                                | <ul style="list-style-type: none"> <li>Raise staff awareness of the healthier City Agenda and ensure an integrated approach ( via lead communicators and thematic planning group) is developed and used for this themed work</li> </ul> | January 2010 – March 2011 |                          |
|                                | <ul style="list-style-type: none"> <li>Develop key council wide health and wellbeing messages</li> </ul>  | January 2010              |                          |
|                                | <ul style="list-style-type: none"> <li>Develop project schedule to be circulated for completion monthly to all departments to capture information on current and emerging health and wellbeing activities</li> </ul>                    | January 2010              |                          |
|                                | <ul style="list-style-type: none"> <li>Develop and agree communications timetable for reporting updates to</li> </ul>   | January 2010              |                          |

| Key tasks and timescale | Key tasks  | Timescale                               | Reporting Officer |
|-------------------------|--|---|-------------------|
|                         | <p>officers, COMT, Strategic Policy and Resources Committee and other structures</p> <ul style="list-style-type: none"> <li>• Create and house project details in Health and Wellbeing section of website – <a href="http://www.belfastcity.gov.uk/healthandwellbeing">www.belfastcity.gov.uk/healthandwellbeing</a> as well as individual section of site.</li> <li>• Work reactively to bring focus back to BCC initiatives if press or social media have highlighted any aspect of Health &amp; Wellbeing. (Press Officer to flag these media activities to teams)</li> </ul> | <p>January 2010</p> <p>January 2010</p> |                   |

|                                   |  |
|-----------------------------------|--|
| <b>Key performance questions</b>  | <p>Are our staff, members and citizens aware of our role in Health and wellbeing?<br/>           Are we communicating effectively in relation to Health and wellbeing?<br/>           Have we raised the profile of the Healthier City agenda internally and externally?<br/>           Have we raised awareness of the existence of the Joint Public Health Unit and our role in the Unit both internally and externally?</p> |
| <b>Key performance indicators</b> | <p>Number of internal publication and communication methods used to promote the Healthier City Agenda<br/>           Number of external press coverage articles in relation to Healthier City key messages<br/>           Number of visits to website<br/>           Number of visits to interlink</p>   |
| <b>Risks</b>                      | <p>Departmental versus thematic communication<br/>           Resistance within services to promoting projects under the thematic banner of Health and wellbeing<br/>           Possible confusion with Healthier City agenda and the Health Improvement Plan for Belfast ( which will be established via the new Public Health Unit)</p>   |
| <b>Services involved</b>          | <p>Healthier City Interdepartmental Group<br/>           Corporate Communications<br/>           Departmental Lead Communicators</p>   |

## Resources

Strategic Policy and Resources Committee agreed the allocation of:

- £100,000 for thematic work on health and wellbeing
- £82,000 for thematic work on older people

| <b>Area of Expenditure</b>   | <b>Amount</b>  |
|--|----------------|
| <b>Joint posts with Health Trust and Public Health Agency to support the work of the Belfast Health Development Unit</b> | <b>£59,000</b> |
| <b>Health and Wellbeing Project Work</b>   | <b>£41,000</b> |
| <b>Fuel Stamps (older people)</b>  | <b>£45,000</b> |
| <b>Local neighbourhood and community programmes to combat social isolation and annual convention</b>                     | <b>£37,000</b> |



# **APPENDICES**

## INTERNAL MAPPING

### Interdepartmental Group on Health and Well-being

#### Report on the Health and Well-being Questionnaire

#### 1.0 Introduction

Belfast City Council's overall purpose is to improve quality of life now and for future generations but children in Belfast have very different life chances depending on where in the city they are born. Health is affected by housing, environment, education, lifestyle, access to services, affluence/poverty, aspiration, social inclusion etc.

The Council has a key role to play in addressing these issues, reducing this health gap and improving life expectancy for the most disadvantaged. For this reason, the development of a healthier city is one of its key priorities under the Supporting People and Communities theme of the Corporate Plan.

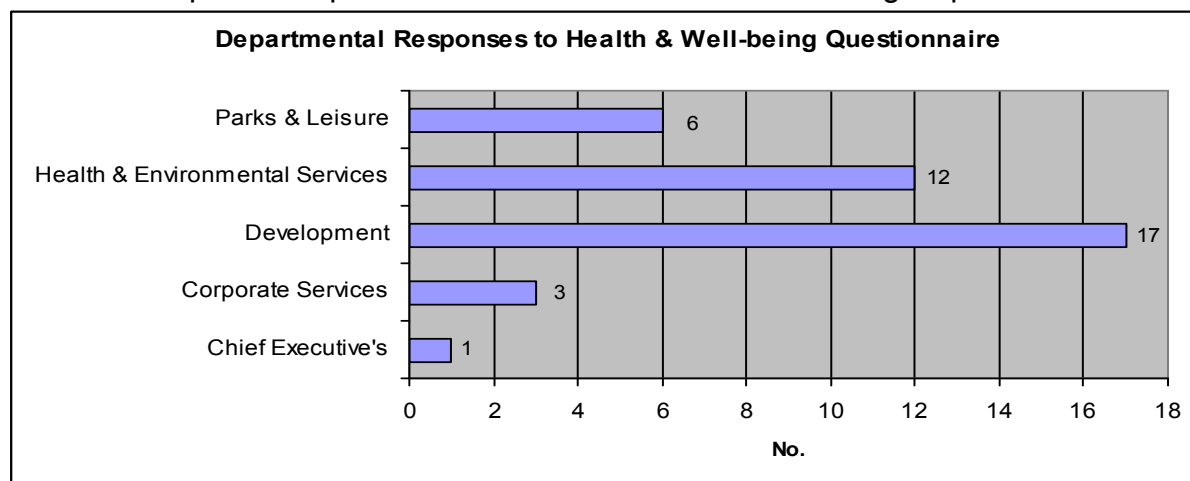
A questionnaire was issued to get an initial snapshot of the range of programmes and work that the Council is involved in to improve health and well-being in the city. The purpose of this survey was to focus on programmes and services that really add value to improving health and well-being; particularly:

- Programmes and services where there is potential to extend and work better across the Council
- Innovative programmes that are or should be high profile
- Areas of work where we can share and learn from good practice
- Localised working within communities to improve health and well-being

This report will help to inform the Council's priorities in terms of health and well-being and the development of an action plan for the Council to improve health and well-being and address health inequalities in the city.

#### 2.0 Questionnaire Findings

In total 39 completed responses were received from the following Departments:



Responses ranged from providing information on specific projects and programmes run by community and leisure centres to major programmes and other corporate thematic priorities such as community safety, good relations and older people.

The majority of responses were from Community Services, reflecting the range of work taking place in community centres.

## 2.1 Typical work to improve health & well-being

Responses were varied and several responses provided information on a number of areas of work that they were involved in to improve health and well-being. All areas of work were included in a formal business plan or strategy ranging from the Corporate Plan to Operational Plans.

Throughout the various themes community centres and leisure centres feature as key venues for local activities/programmes that aim to improve health and well-being.

The work has been grouped into key themes into 7 key themes.

**Community development** is a key theme in 7 work areas. This includes a wide range of activities from community centre run programmes, to supporting various health forums and links to Healthy living Centres. Some examples are:

- Working directly with Traveller families in the provision of courses such as literacy, numeracy and health
- Providing rooms for Glenbrook's Sure Start work with pre-school children and families
- Baby massage

**Health promotion** covers 6 work areas; including a wide range of activities such as:

- Working with a group of men over 50 on a health and well-being programme
- Providing clubs and programmes on healthy lifestyles and information days
- Choose 'n' Move
- Healthwise GP referral scheme
- FRESH project

**Health protection** features in 5 areas of activity; including:

- Cross-departmental dog fouling group
- Combating volatile substance abuse amongst children
- Development of a community response plan to potential clustering of suicides

The **environment** features in 5 areas of work; including:

- Local physical regeneration projects including re-imaging communities
- Local Air Quality Management
- Street cleansing and anti-litter education programmes
- Planting of street trees



**Parks and open spaces** is a key theme in **5** areas of activity; for example:

- Orienteering in various parks
- Growing for Health project encouraging children to grow their own vegetables
- Co-ordinated activity programmes in parks
- Regenerating the North Foreshore to create a public park

**Physical activity** is a key theme in **4** areas of work; for example:

- Fitness suite promotion
- WISPA (Women in sport and physical activity)
- Keep fit groups and sports activity projects

### **Other**

Several other activities were raised on an individual basis:

- Human Resources through various outreach programmes and the provision of unpaid work experience
- Participating in the URBACT building healthy cities project
- Establishment of a joint unit with the Public Health Agency
- Cardiac Rehab

Reference was also made to several **other thematic areas of work** within the Council and how these areas of work improved health and well-being:

- **Older people** - co-ordinating the healthy ageing partnership which aims to develop a joined up approach to the planning and delivery of services which promote health, well-being and independence of older people in Belfast
- **Community safety** - improving mental health and well-being through tackling alcohol fuelled violent crime, anti-social behaviour, reducing the fear of crime and helping people feel safer as well as Get Home Safe to reduce underage drinking
- **Neighbourhood renewal** - working with neighbourhood renewal partnerships to identify issues pertaining to health and well-being at a local level and implementing the Council's Local Area Working programme
- **Good Relations** - promoting equality and good relations to address the legacies of conflict in the city which have an ongoing impact on health and well-being.

## **3.0 Geographical areas**

Generally activities improving health and well-being are provided on a city-wide basis (**25** areas of work). This includes;

- Cleansing services
- Activity programmes provided by leisure centres
- GP referral schemes
- Encouraging people to participate in countryside recreation
- Street tree planting
- Orienteering in parks and compiling a schools programme
- Advising businesses on health and safety and health and well-being

- Combating volatile substance abuse

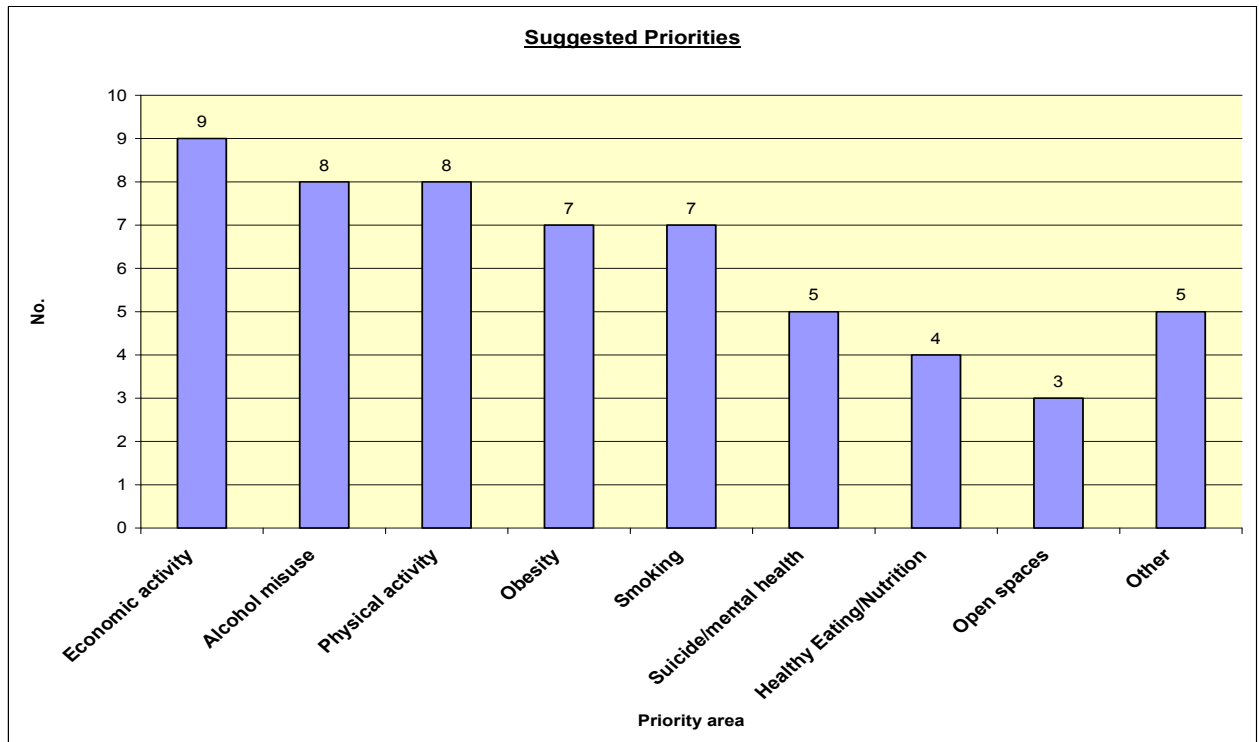
The geographic specific work tends to be concentrated within Community Services and focuses on their local areas. The following table outlines some examples of area specific programmes.

| Geographic Areas | Types of activity  |
|------------------|--|
| North            | Health & well-being programme for men over 50<br>Regeneration of the North Foreshore to create a public park<br>Providing rooms for Glenbrook's Sure Start |
| South            | Delivering community development projects<br>Promoting health and sex education for young people   |
| East             | Community development projects   |
| West             | Working directly with traveller families<br>Women's Health Day<br>WISPA  |

South Belfast Highway to Health and specific neighbourhood renewal partnerships were also mentioned as having a specific area focus.

#### 4.0 What should the council's priority be?

From the responses given a number of different priority areas were suggested as illustrated below:



1. **Economic inactivity** – this was recommended as a priority **9** times. It was indicated that economic inactivity was very often the cause of other social problems, e.g. anti-

social behaviour, alcohol/drug abuse. Economics and health inequality are directly linked.

2. **Alcohol misuse** - this was recommended as a priority **8** times, including once in connection with drug misuse.
3. **Physical activity** - this was recommended as a priority **8** times. Comments included: "if we could get the youngest to the oldest of our citizens out and about walking, it would be beneficial to a healthier lifestyle." "It is crucial that the Council and other partner agencies act now to encourage people to get out and about."
4. **Obesity** - this was recommended as a priority **7** times. Childhood obesity was particularly highlighted in a couple of responses.
5. **Smoking** - this was recommended as a priority **7** times.
6. **Suicide/mental health** – this was recommended as a priority **5** times.
7. **Healthy Eating/Nutrition** - this was recommended as a priority **4** times.
8. **Open spaces** - this was specifically recommended as a priority **3** times. This is linked to physical activity and mental wellbeing, e.g. "Encourage the use of outdoor spaces to improve mental and physical wellbeing."
9. **Other** – other recommendations included counselling, social development, targeting services based on need (local area working, city places), teenage pregnancy, environmental improvements, e.g. air quality and pollution.

## 5.0 What would help the council to make a positive difference to health and wellbeing in the city?

Many suggestions have been given as to how the council can make a positive difference to health and wellbeing. The key suggestions made are as follows:

- Proper provision of **sports facilities** in areas of need. Provide better access to leisure facilities for young people and families
- Provide the opportunity to become involved in **health based activities** which are accessible and free
- Address legacies of **segregation and conflict** in the city
- Regeneration of the **North Foreshore** – provision of public open space and creation of jobs
- **Joined up** approach across council departments – communication to raise awareness of what is planned.
- Use **civic leadership** to bring other **partners** to the table to enhance service delivery
- Building up relationships with **community** organisations currently delivering on health & wellbeing
- **Outsourcing** of work to delivery partners based within local communities where BCC impact can be limited
- Increase staffing levels on the ground **delivering programmes**, as opposed to strategic/business support/admin functions
- Allow **funding for fruit and healthy snacks** for the children and youth using our premises
- Improved **environments** across the city that provide a positive experience for residents
- More direct working with **health and social care** to target disadvantaged groups
- Link in with current work, e.g. Neighbourhood renewal

- Greater focus on **health benefits of physical activity** within parks and leisure
- Raise health & wellbeing higher on the Council’s agenda – more funding for projects
- Encourage children to learn about growing food and **eating healthily**.

## 6.0 Partnership working

Respondents were asked to indicate who was involved in their areas of work, including both internal and external partners.

The table below illustrates the range of partners that were indicated in the responses. The list is not exhaustive but it gives a flavour of the range of partnership working that currently exists throughout Belfast City Council. The table illustrates that there is internal partnership working within the council in all the areas that responded.

| Department/<br>Service<br>partnerships | Educ | PSNI | NIHE | Health | BCC | Area | Govt | Belfast<br>Cities | Older<br>groups | Sure | Private | Other |
|--|------|------|------|--------|-----|------|------|-------------------|-----------------|------|---------|-------|
| Human Resources                        | X    |      | X    | X      | X   | X    | X    |                   |                 |      |         | X     |
| Good Relations                         |      |      |      |        | X   |      |      |                   |                 |      |         | X     |
| Community<br>Services                  | X    |      | X    | X      | X   |      |      |                   | X               | X    |         | X     |
| Development                            |      |      |      |        | X   | X    | X    |                   |                 |      | X       | X     |
| Environmental<br>Health                | X    | X    | X    | X      | X   | X    | X    | X                 | X               | X    | X       | X     |
| Cleansing<br>Services                  | X    | X    | X    |        | X   | X    |      |                   |                 |      |         | X     |
| Parks &<br>Leisure                     | X    |      |      | X      | X   |      | X    |                   |                 |      |         | X     |

Respondents were also asked to highlight any opportunities there are to further strengthen or develop internal or external partnerships. The range of responses was varied and including the following suggestions:

- **Community outreach** activity – need to strengthen links with minority ethnic and under-represented groups
- Funding opportunities under the **Peace III programme**
- Promote BCC internal working group with **Neighbourhood Renewal** working group
- Developing a city wide **network of men’s groups** which are supported or funded by Community Services
- Potential for increased **usage of community centres**, particularly for partners

- Further involvement of Parks, Leisure, Waste Management and Community safety with Community Services all year round
- Links with Parks & Leisure to promote a more **active lifestyle** and encourage more use of Community centres for this
- Working with WHO through **Eurocities**
- **Choose 'n' Move** is a sound resource that could be implemented in Leisure
- Stronger links with Community Safety in drawing the link between **Volatile Substances Abuse** and anti-social behaviour
- Stronger partnerships between BCC, **Public Health Agency** and health & wellbeing service providers in the **community & voluntary** sectors and the Trust
- Develop links with DSD, HAZ, **Healthy Living Centres** and social economy business links
- Being involved in **external groups** such as Binge Drinking Advisory Group, Regional Drug & Alcohol forum
- Greater potential for BCC to be **delivery agent** for Health Authorities
- The more successes we have with **tree planting schemes** leads to more funding for future schemes (BCC, DRD, DSD)
- The **orienteering maps** could be used by all ages and abilities, it could be developed as an internal team building exercise or promoted as a means of encouraging people to make greater use of the parks
- Further extend contacts with community groups regarding **community gardens**.

## 7.0 Consultation

The majority of respondents reported some form of formal consultation with the public; only 7 respondents stated that they did not formally consult with the public. All methods of consultation are used by the Council for the specific areas of work that aim to improve health and well-being.

## 8.0 Issues Arising

Several issues arose following completion of the questionnaire:

- Defining what we mean by health and well-being
- Determining how health and well-being links with other agreed corporate themes

This analysis is based only on the responses received to the questionnaire and there are other areas of work that have not been mentioned that may require follow-up action depending on the defined boundaries of the health and well-being group.

## EXTERNAL MAPPING Health Strategies

### International & National

|     |   |   |
|-----|---|---|
| 1.0 | Closing the Gap in a Generation – Health Equity through action on the social determinants of Health | 2 |
| 2.0 | Overview of the Review of Health Inequalities post 2010 in England (Marmot review)                  | 5 |

### Regional

|      |  |    |
|------|--|----|
| 3.0  | Programme for Government 2008-2011   | 6  |
| 4.0  | Investing for Health 2004-2010   | 9  |
| 5.0  | Investing for Health Fit Futures   | 11 |
| 6.0  | DHSSPS – A healthier future: A twenty year vision for health and wellbeing in Northern Ireland 2005-2025 | 12 |
| 7.0  | A Strategy for Neighbourhood Renewal: Together, tackling disadvantage, building communities              | 13 |
| 8.0  | Lifetime Opportunities: Government’s Anti-Poverty and Social Inclusion strategy for Northern Ireland     | 14 |
| 9.0  | Shaping our Future - Regional Development Strategy for NI 2025   | 16 |
| 10.0 | Planning Policy Statement 8 (PPS8) - Open Space, Sport and Outdoor Recreation                            | 18 |
| 11.0 | Housing Executive – Housing and Health Review Action Plan 2008-11  | 20 |

### Belfast

|      |   |    |
|------|---|----|
| 12.0 | Future direction of HAZ and next Phase action plan  | 22 |
| 13.0 | Belfast Healthy Cities – Phase V (2009-2013) of the WHO Health Cities Network in Europe: City of Belfast  | 24 |
| 14.0 | Divided by Health: A city profile   | 25 |
| 15.0 | Strategic Regeneration Frameworks   | 26 |
| 16.0 | Other relevant strategies/documents   | 28 |
|      | <ul style="list-style-type: none"> <li>• Renewing Communities</li> <li>• Belfast City Masterplan 2004-2020</li> <li>• BCC Renewing the Routes</li> <li>• Belfast Metropolitan Area Plan (BMAP)</li> </ul> |    |

- Belfast Metropolitan Transport Plan
- Achieving Belfast
- Increasing Participation - Priorities for Future Revenue Investment Consultation
- Making Belfast More Active: Physical Development and Sport Strategy for the City of Belfast
- Investing for Health – North and West Belfast Review of Health Improvement Plan
- Investing for Health - South and East Belfast Health improvement plan 2009-2010 (Draft)





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