



Aberdeenshire
Health & Social Care
Partnership

Aberdeenshire's Health Improvement Delivery Plan 2018-19

Working Together to
Improve Health and
Wellbeing

April 2018



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1 Introduction

This Health Improvement Delivery Plan sets out actions for a healthier Aberdeenshire. Our ambition is that local people are able to look after and improve their own health and wellbeing and live in good health for longer.

The Aberdeenshire Health and Social Care Partnership with our partners across health and social care, local government and the third sector will be taking forward the plan in 2018/19. The Public Health Team (part of the Health and Social Care Partnerships Business and Strategy Service) is focused on improving health and wellbeing; and reducing health inequalities in Aberdeenshire and is overseeing and supporting the delivery of this plan. This delivery plan will contribute to achieving the Health and Social Care Partnership's strategic priorities and programmes of work.

2 Aberdeenshire's Health Improvement Priorities

Our priorities are:

- ensuring every child has a good start in life
- encouraging healthy weight diet and activity
- reducing smoking
- encouraging low risk alcohol consumption
- improving mental health and wellbeing
- minimising the impact of poverty and inequality
- making health improvement everyone's business.

Individually we have a responsibility for our own health and wellbeing by being aware of what promotes good health, the causes of health conditions and what we can do to prevent these and lead more healthy lifestyles. Through doing this we can have more control over our health and when it comes to requiring health or social care services.

Communities and the local environment play an important role in promoting good health providing opportunities to be active, to be involved and to connect with others. In Aberdeenshire we have well established communities with local structures and opportunities, including neighbours and friends, in place to identify and meet the needs of the people in those communities. Health and social care teams are well placed to provide health and wellbeing support to individual, families and carers, enabling them to connect with local networks of support.

We will support people to be actively involved as equal partners in the planning of their care and treatment. We will encourage people to make informed decisions about their lifestyle to reduce the likelihood of needing health and care services and achieve a good quality of life.

The Health and Social Care Partnership is focusing on enabling self-care and self-management of long term conditions and working with communities to co-produce local opportunities and environments to promote health and wellbeing.

3 Aberdeenshire's Health and Lifestyle Behaviours

Aberdeenshire has good health compared to most other parts of Scotland. However, this should not be our benchmark. Scotland's overall health is poor when considered in the UK and European context. There is a need to further improve health in Aberdeenshire and reduce avoidable poor health, long term conditions and diseases.

Fig 1 Life Expectancy in Years (from birth) in Aberdeenshire, Scotland and England 2012-2014 (3 year averages NRS / ONS).

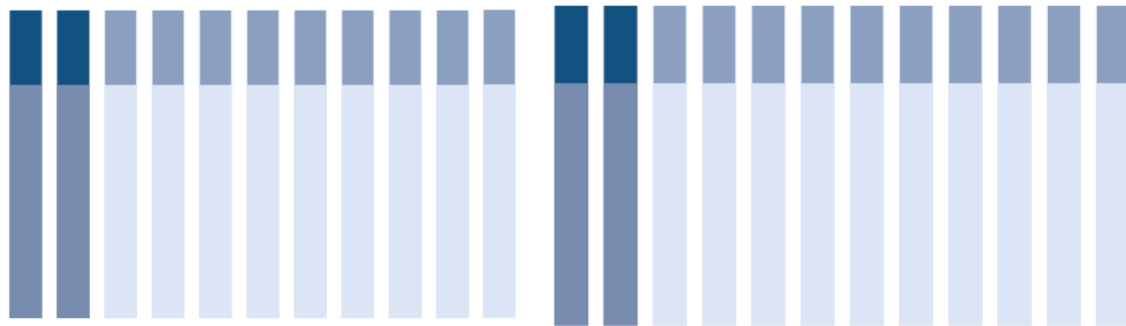


Given the significant and rising costs associated with ill-health and the delivery of health and social care services, there is both an economic and health benefit in improving health in Aberdeenshire and in placing a strong emphasis on prevention and early interventions. As our population ages, encouraging people and families to live healthily can improve quality of life and reduce their need for services.

Over 40% of our disease burden is associated with 5 key health and lifestyle behaviours: smoking, alcohol, diet, weight and low physical activity. This is through their contribution to diseases such as heart disease, cancer, and stroke¹. Multiple health and lifestyle behaviours have a cumulative effect on health. Someone in midlife who smokes, drinks too much, exercises too little and eats poorly is 4 times more likely to die over the next 10 years than someone who does none of these things². In Aberdeenshire 90.6% of the population participate in at least one or more of the 5 risk behaviours (smoking, alcohol, diet, weight and low physical activity)³. It has become the norm for people in Aberdeenshire to be overweight or obese.

Mental wellbeing is an important factor in people's happiness and ability to cope with daily life⁴. However, mental ill health is a leading cause of illness with 1 in 4 people having mental health problems each year in Scotland.

Lifestyles in Aberdeenshire, (Scottish Health Survey 2013-16)



2 in 11 Aberdeenshire men smoke

2 in 12 Aberdeenshire women smoke



2 in 9 Aberdeenshire adults drink above weekly guidelines, increasing the risk of experiencing health harms



3 in 9 Aberdeenshire men do not meet recommended daily activity levels of 30 mins 5 times a week



5 in 10 Aberdeenshire women do not meet recommended daily activity levels of 30 mins 5 times a week



7 in 10 Aberdeenshire Men are overweight or obese

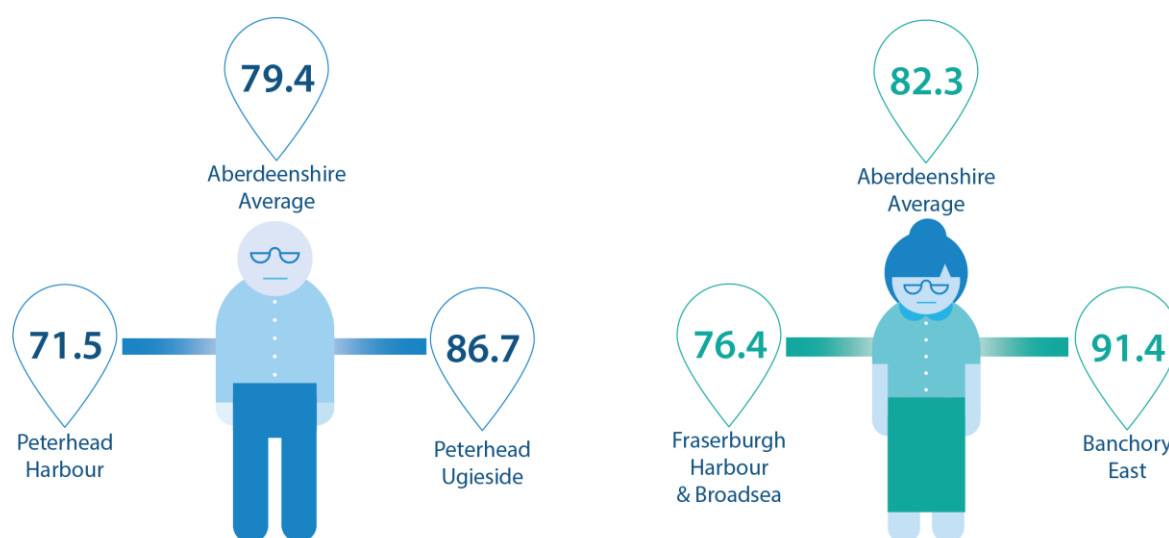


6 in 10 Aberdeenshire Women are overweight or obese

4 Wider Causes of Poor Health and Health Inequalities

The majority of our communities experience better health outcomes and less socio-economic inequality than Scotland generally. However, there are a number of communities, particularly in North Aberdeenshire, that experience poorer health outcomes than Scotland and when compared with other localities in Aberdeenshire. These communities also experience higher socio-economic inequality. These differences are called health inequalities.

Fig 2 Male Life Expectancy difference of 15.2 years in Aberdeenshire (71.5 years to 86.7 years) and Female Life Expectancy difference of 15 years (76.4 to 91.4 years) (2012-2014 3 year midpoint).



The causes of these poorer health outcomes are complex and are associated with limited access to income and wealth. This can lead to poverty and individuals and groups within our communities being marginalised. These causes also influence access to and availability of work, education and good quality housing. They can also influence access to services and social and cultural opportunities in an area and in society. Which in turn can all affect and limit lifestyle choices, including those which impact on health.

These factors such as poverty, unemployment, poor working conditions and a lack of education can all affect an individual's mental wellbeing, and can increase the risk of developing a mental health problem. Mental health is often worse among more deprived communities, where exposure to other negative lifestyle factors is greater and where a lack of access to appropriate services can increase mental health problems ⁴.

Many people in Aberdeenshire live in small rural settlements where access to local services and opportunities can be limited. Transport links, withdrawal of services such as post offices, banks, and local shops as well as limited access to social, education, employment and digital opportunities contribute to rural health inequalities.

Fig 3 Percentage of P1 Children with No Dental Disease in Aberdeenshire (NDIP 2016-17) ranges from 42.8% to 96.6% with an Aberdeenshire average of 77.4%

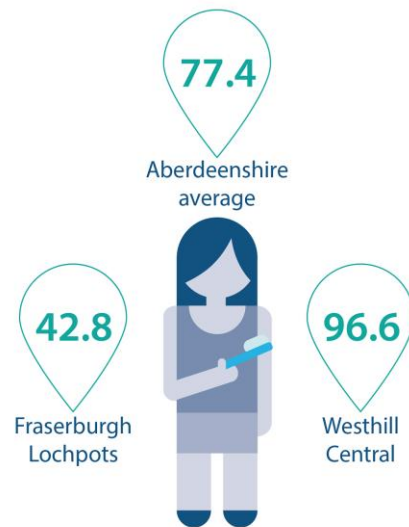
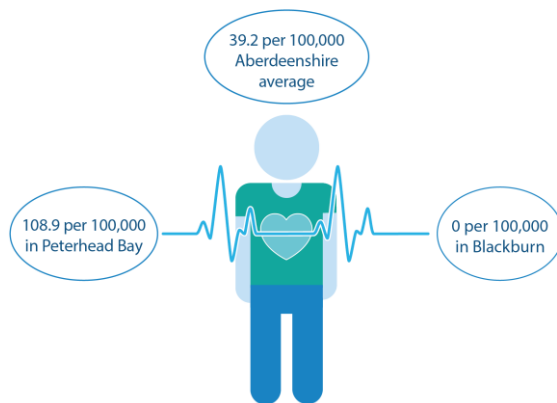


Fig 4 Early Deaths from CHD <75yrs old (3 year average 2014-2016) standardised rate per 100,000: Range across Aberdeenshire from 0 per 100,000 to 108.9 per 100,000, with an Aberdeenshire average of 39.2 per 100,000.



5 A Focus on Prevention

Focussing on prevention will contribute to a healthier Aberdeenshire and improve quality of life. It can also help reduce public spending pressures by reducing the length of time people spend in ill health and by reducing demands for services.

Health and lifestyle behaviours which lead to poorer health outcomes currently costs the NHS across the UK billions of pounds every year. Smoking costs £5.2 billion, obesity £4.2 billion, alcohol £3.5 billion and physical inactivity £1.1 billion ⁵.

Proportionately people living in the poorest circumstances use health and social care services more often and from an earlier age. An NHS Grampian study looking at potentially avoidable admissions to hospital found that in Aberdeenshire 78% more admissions to hospital were made from the 20% most deprived communities compared to the least deprived 20% in 2014⁶.

Concerted actions to improve lifestyle and address health inequalities have a genuine contribution to make to achieving Aberdeenshire's health and social care outcomes. We need to be supporting these improvements systematically and at scale.

Many preventative measures are cost-effective (although not necessarily cost-saving). Some forms of prevention, in particular those addressing the social and economic determinants of health, are likely to reduce health inequalities. The Christie Commission report⁷ highlighted the potential for prevention to make savings across health and social care. The Scottish Parliament Finance Committee Report on Preventative Spend⁸ also highlighted potential savings. Current pressures on public spending mean that it is particularly important that prevention improves health in a cost-effective way. Some interventions have the potential to reduce future demand for health and social care.

6 Role of the Public Health Team

The Aberdeenshire Public Health Team works with a wide range of partners, staff and communities to support people to live healthily; to ensure our communities are healthy places to live and to ensure individuals are well connected to a wide range of services, support and activities in their communities.

It is everyone's business to encourage and support healthy living. The Public Health team provides specialist advice and support to enable all health and social care practitioners and wider partners to take on this health promoting role.

The work of the Public Health Team includes working with partners to develop policies, strategies, delivery plans and programmes to improve the health of the population, close the health inequalities gap, assess the impact of plans and programmes and shift service provision towards prevention and early intervention.

We lead, co-ordinate and facilitate consistent approaches informed by evidence across Aberdeenshire.

7 Delivery Plan for 2018-19

This section summarises key HSCP health improvement actions that are being delivered in 2018-19, in relation to the health improvement priorities set out in section two. All actions will be undertaken in partnership with NHS Grampian and Aberdeenshire Council services and with wider community and third sector partners.

Ensuring Every Child Has A Good Start In Life		
<p><u>Strategic Context:</u> Child Poverty (Scotland) Act 2017; Improving Maternal and Infant Nutrition a Framework for Action 2011; Early Years Framework 2009; Children and Young Peoples (Scotland) Act 2014; Scotland's Oral Health Improvement Plan 2018; Children and Young People's Improvement Collaborative 2016; Making a Positive Difference to Children and Young People Through Parenting 2012.</p> <p><u>National Performance Outcomes:</u> Improve breastfeeding; Improve children's dental health (75% P1 children/ 80% P7 children with no signs of dental disease by 2022); increase proportion of babies with healthy weight; increase proportion of children with a healthy weight, reduce children's deprivation.</p>		
What Are We Aiming to Improve	What Are We Going To Deliver	
	ABERDEENSHIRE	NORTH, SOUTH OR CENTRAL ABERDEENSHIRE
<p>Minimise the impact of inequalities on health and wellbeing in the early years</p> <p>Reduce the number of children with dental caries</p>	<p>Healthy Start Vitamins Programme in place ensuring availability in all Community Pharmacies</p> <p>Continue to provide and improve the Childsmile programme in Aberdeenshire to improve children's oral health. In 2018-9 work will focus on maintaining Tooth brushing in nurseries, extending fluoride varnish applications to all schools in SIMD 1 & 2 and increasing children's registrations to dental practices</p>	<p>Improve Healthy Start Voucher uptake by families living on low incomes / eligible for support living in Peterhead</p>

<p>Improved parental knowledge/skills to support family health and wellbeing</p>	<p>Provision of Practical Weaning Toolkit and training to equip early years practitioners with resources to support families with young children to eat healthily</p> <p>HSCP participate in Multi-agency Early Years Forums to take collective action on: parenting support, play, early communication & language skills and community connections in line with Aberdeenshire's Children's Service Plan.</p> <p>Lead multi agency approach to providing evidenced based parenting support programmes e.g. Triple P across Aberdeenshire to families where and when they need it</p>	<p>EYs forums focus on :</p> <p>Play: Banff, Fraserburgh, Inverurie Forums</p> <p>Parenting Support: Mearns, Meldrum, Stonehaven Forums</p> <p>Early Language/ Communication: Peterhead, Portlethen, Huntly, Turriff forums</p> <p>Connected Communities: Aboyne, Alford, Ellon, Kemnay forums</p>
<p>Increased number of women breastfeeding</p>	<p>Continue to improve the support and advice given to women who wish to breastfeed, the HSCP will continue to implement UNICEF Baby Friendly Initiative ensuring staff working with pregnant women have appropriate skills and knowledge</p> <p>Support network of volunteer Breastfeeding Peer Mentors to provide advice to breastfeeding mums across Aberdeenshire. Training will be provided to new volunteers in areas without peer mentors.</p> <p>Provide Specialist Breastfeeding advice service to support practitioners working with breastfeeding women to overcome initial challenges / difficulties experienced.</p>	<p>14 Breastfeeding groups supported by Peer Mentors across N, S and C Aberdeenshire.</p> <p>Recruit and train Peer Supporters in North Aberdeenshire</p>

Encouraging Healthy Weight, Diet and Activity		
<p>Strategic Context: Improving Maternal and Infant Nutrition a Framework for Action 2011; Scotland's Oral Health Improvement Plan 2018; Children and Young People's Improvement Collaborative 2016; A Healthier Future - Action and Ambitions on Diet; Activity, and Healthy Weight Consultation 2017; A More Active Scotland Building a Legacy from the Commonwealth Games 2014; Let's Get Scotland Walking The National Walking Strategy 2014.</p> <p>National Performance Outcomes: Increase proportion of children with a healthy weight; Increase physical activity; improve adult healthy weight management; falls rate per 1,000 in over 65s.</p>		
What Are We Aiming to Improve	What Are We Going To Deliver	
	ABERDEENSHIRE	NORTH, SOUTH OR CENTRAL ABERDEENSHIRE
<p>A positive relationship with food and physical activity from birth to adulthood</p> <p>Children and adults achieve a healthy weight and are have the knowledge to make positive food and physical activity choices for themselves and as parents</p> <p>Opportunities in children's surroundings to promote healthy living</p> <p>Families and carers develop Food Skills for health and wellbeing</p>	<p>Provide staff working with families with young children with Healthy Eating and Nutrition in the Really Young (HENRY) training</p> <p>Develop, finalise and support use of Grow Well Choices toolkits to support educational and early years settings to support children and families to achieve a healthy weight and lifestyle</p> <p>Develop and implement Leisure and Physical Activity Service's Grow Well Choices community / family programme</p> <p>Provide Confidence 2 Cook, RHEIS food and health, REHIS for Cares of adults with Learning disabilities, REHIS Eating Well for older people</p> <p>Support 'Making Aberdeen More Active' multi-agency partnership to take collective action to improve physical active levels with a focus on</p>	<p>Roll out and evaluate the Daily Mile across nurseries, schools and communities in Banff, Fraserburgh and Huntly School clusters.</p> <p>Confidence 2 Cook, REHIS (all)courses provided at Huntly Community Kitchen and in rural venues & settings as outreach in Marr</p> <p>'How To run a Cooking Group', REHIS (food & health) courses provided at Garioch Community Kitchen</p> <p>Provision of Eat for Less sessions in Turriff for families. Out of school activity project with Garioch community Kitchen in Inverurie and Port Elphinstone incorporating physical activity for children</p>

Residents of Aberdeenshire are more active	People with Long Term Conditions/Active Travel / Teenage girls, women and people with a disability	
	Complete Aberdeenshire mapping of physical activity opportunities for people with LTCs and make available on ALISS	
	Build relationships between HSCP local teams and Aberdeenshire Council and Community Leisure Services to offer inactive clients / patients access to appropriate physical activity opportunities	Local Leisure Services and Providers develop physical activity opportunities in partnership with HSC teams in Fraserburgh, Mintlaw, Peterhead, Maud, Inverurie, Insch, Aboyne and Huntly for people with LTCs.
	Support 3 rd sector partners Move More Macmillan and GRCA to provide community physical activity rehabilitation opportunities	Continue to develop Active Buchan ABC referral scheme. Support and promote Golden Games in Garioch for older people
	Work with community partners and HSCP services to set up new health walks in Aberdeenshire	Development of short walks to health (15 mins max) for vulnerable groups and people with LTCs in Marr
	Support network of volunteer walk leaders to maintain / sustain /strengthen existing health walks across Aberdeenshire	Further develop gentle exercise/ strength and balance opportunities with Leisure Services Promotion of Edible Trails in Huntly, Inverbervie, Portlethen & St Cyrus Support community action to develop local paths and cycle routes in Marr

Reducing Smoking		
<p><u>Strategic Context:</u> Tobacco Control Strategy: Creating a Tobacco Free Generation 2013; Health (Tobacco, Nicotine etc and Care) Act 2016;SPS - Creating a Smoke Free Prison Environment.</p> <p><u>National Performance Outcomes:</u> Reduce the percentage of adults that smoke (to 5% or less by 2035); smoking cessation quits.</p>		
What Are We Aiming to Improve	What Are We Going To Deliver	
	ABERDEENSHIRE	NORTH, SOUTH OR CENTRAL ABERDEENSHIRE
<p>Reduction in smoking prevalence (work towards 5% by 2034)</p> <p>Reduction in the uptake and prevalence of smoking among children</p> <p>Greater number of smoke free environments/public spaces/places</p> <p>Improved public and practitioner awareness of benefits of stopping smoking and support services</p>	<p>Develop pathways of support for Looked after Children (LAC) and their carers to reduce smoking/uptake of smoking. Work with ASH Scotland to develop and deliver training for those working with LAC</p> <p>Support AVA to adopt Smoke Free Grounds Policy</p> <p>Support the continued adoption and enforcement of Smoke Free Grounds policy by Aberdeenshire Council</p> <p>Implement Smoke Free Grounds (SFG) Legislation for all NHS hospital sites in Aberdeenshire</p> <p>Support the implementation of SPS Smoke Free Prisons policy at HMP Grampian</p> <p>Review smoking cessation support available and work with smoking cessation services (Community pharmacies and Smoking Advise Services) to improve uptake and 12 week quit rates in Aberdeenshire</p>	<p>Introduction of and compliance with SFGs legislation at Chalmers, Peterhead, Fraserburgh, Ugie, Inch, Inverurie, Turriff, Aboyne, Glen O Dee, Jubilee and Kincardine Community Hospitals.</p> <p>HMP Grampian adopts and is compliant with Smoke Free Prisons Legislation.</p>

<p>available. More people achieving successful quit at 3 and 12 months</p> <p>Reduction in women who smoke in pregnancy</p> <p>Increase babies with healthy birth weight</p>	<p>Review Smoking in Pregnancy Pathway and the range of support available - to support pregnant smokers to quit, increase the number of women who access support, set a quit date and stay quit.</p> <p>Review approaches to support population groups known to have high smoking prevalence – people mental health problems, SMS service users, people within community justice system</p>	
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Encouraging Low Risk Alcohol Consumption		
<p><u>Strategic Context:</u> Changing Scotland's Relationship With Alcohol-A Framework for Action; UK Chief Medical Officers Low risk Drinking Guidelines 2016; Alcohol etc (Scotland) Act 2010; Aberdeenshire CPP Changing Aberdeenshire's Relationship With Alcohol Local Outcomes Improvement Plan; Life Matters Alcohol and Other Drug Delivery Plan 2015 ADP.</p> <p><u>National Performance Outcomes:</u> Reduce alcohol related hospital admissions; alcohol brief interventions delivery, reduce alcohol related deaths.</p>		
What Are We Aiming to Improve	What Are We Going To Deliver	
	ABERDEENSHIRE	NORTH, SOUTH OR CENTRAL ABERDEENSHIRE
<p>Improved public and practitioner knowledge of low risk drinking levels and the impact of alcohol on communities and individual health and wellbeing</p> <p>Improved awareness of alcohol support services</p>	<p>Implement 'Sobering Thought' campaign to encourage low alcohol consumption by target populations: men aged 25-34 and women aged 35-44.</p> <p>Implement 'alcohol and older people' campaign to raise awareness of the risks of excessive drinking for older age groups</p>	

<p>Reduction in people experiencing alcohol related harm</p> <p>Health promoting alcohol policies and licensing decisions</p>	<p>Develop and test an Alcohol Prevention Tool-kit with local community groups to encourage community action to reduce alcohol consumption</p> <p>Public facing alcohol campaigns highlight and signpost to alcohol support services</p> <p>Develop and implement an approach to systematically embed alcohol screening and subsequent Brief Intervention delivery or referral to support services into primary care</p> <p>Expand ABI delivery in non-NHS settings</p> <p>Increase ABI training provision available in NHS and non NHS settings</p> <p>Systematic use of 'Drinking more than you think?' ABI scratch cards by all HSCP and wider partners.</p> <p>Support Aberdeenshire Licensing Boards by providing evidence to inform public health objectives in the Act.</p> <p>Support The Aberdeenshire Licensing Forum to improve community involvement in licensing decisions</p>	<p>In Marr support Community Councils to test the Alcohol Prevention toolkit - hosting community engagements events</p>
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Improving Mental Health and Wellbeing		
<p>Strategic Context: Mental Health Strategy 2017-27; A Connected Scotland: Tackling social isolation and loneliness and building stronger social connections Draft Strategy 2018;</p> <p>National Performance Outcomes: Improve adult mental wellbeing.</p>		
What Are We Aiming to Improve	What Are We Going To Deliver	
	ABERDEENSHIRE	NORTH, SOUTH OR CENTRAL ABERDEENSHIRE
Improved public and practitioners awareness of mental health and how to improve it	Review evidenced based programmes/ training available to equip front line staff working with children and young people to promote mental wellbeing and to intervene early and when appropriate to access higher tier services.	HSCP involvement in GIRFEC Area Groups identifying local mental health improvement responses e.g. Youth Drop In Aboyne, Health HUB in Huntly
Improved public and practitioner awareness of mental health support services	Co-ordinate provision of Mental Health First Aid for Children and Young People training for multi-agency staff working with children / young people	Mental Health First Aid for Children and Young People training provided through GIRFEC Area groups in Inverurie, Meldrum, Turriff, across Marr
	Raise awareness of the detrimental impact of loneliness on health/ wellbeing by co-ordinating an Aberdeenshire campaign to raise the issue with HSC home care and wider staff groups.	Health and Loneliness Awareness Sessions facilitated in North, South and Central Aberdeenshire for HSC teams Support the community to tackle loneliness and encourage involvement in local activities through 'Caring For Turriff'
	Improve mental wellbeing and support recovery by co-ordinating provision of Mental health First Aid and MH awareness training for Aberdeenshire HSCP workforce.	Develop Young@Heart Deeside Network to support older people's mental health, targeting rural isolation and loneliness Mental Health First Aid Training and Mental Health Awareness sessions provided in North, South and Central Aberdeenshire

	<p>Work with community partners to provide a network of community / conversation cafes across Aberdeenshire to connect people locally to promote wellbeing, reduce stigma, support recovery and reduce loneliness and social isolation</p> <p>Co-ordinate Aberdeenshire Wellbeing Festival encouraging community partners and services across Aberdeenshire to actively support mental wellbeing for all, reducing stigma and promoting recovery.</p> <p>Work with NFUS & Aberdeenshire Northern Marts to promote mental wellbeing in Agricultural sector (Know Who to Turn To/ Fit For Farming)</p>	<p>Support the development, establishment and maintenance of community initiatives such as Men's Sheds and conversation cafes across Aberdeenshire. Conversation and Community cafes supported in Huntly, Turriff, Ellon, Peterhead, Fraseburgh, Banff and extended to Port Elphinstone, Fyvie, Mintlaw</p> <p>Aberdeenshire Wellbeing Festival community events across North, South and Central Aberdeenshire</p>
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Minimising the Impact of Poverty and Inequalities		
<p>Strategic Context: Child Poverty (Scotland) Act 2017; Child Poverty Strategy for Scotland 2014; Health Inequalities In Scotland Audit Scotland 2012; Commission on Future Delivery of Public Services Christie 2011; Every child, every chance: The Tackling Child Poverty Delivery Plan 2018 – 22.</p> <p>National Performance Outcomes: Reduce premature mortality; reduce the proportion of people living in poverty; improve people's perceptions of their neighbourhood; reduce the proportion of employees earning less than the living wage; reduce the health inequalities gap in sexual health and BBVs; reduce children's deprivation.</p>		
What Are We Aiming to Improve	What Are We Going To Deliver	
	ABERDEENSHIRE	NORTH, SOUTH OR CENTRAL ABERDEENSHIRE
<p>Prevention and minimisation of the impact of poverty and inequality on health and wellbeing</p> <p>Create the circumstances for vulnerable people to live in better health</p> <p>Improve the health and wellbeing of those living in poverty or at risk of poverty by supporting action to ensure children have the best start in life; maximise income; improve employability prospects; improve housing options and address fuel poverty</p>	<p>Highlight need for action on Period Poverty and develop guidance for Aberdeenshire Council / schools to ensure sanitary provision is available in schools</p> <p>Oral health training and support for partners working with vulnerable groups e.g. Homeless, prisoners and carers</p> <p>HSCP contributes to the development and Implementation of Community Planning Locality Plans to address inequalities.</p> <p>Strengthen links between AHSCP and providers of employability support by developing an action plan on employability support for those living in poverty/most at risk of poverty</p> <p>HSCP participation in the implementation of a 'housing first' model to support people at risk of</p>	<p>Oral health programme introduced at HMP Grampian.</p> <p>Community Planning Locality Plans developed and implemented in Banff/ MacDuff, Fraserburgh and Peterhead</p> <p>Develop Banchory vulnerable adults initiative between third sector and partner agencies to create a holistic approach around care/support</p>

	<p>being homeless to access supported accommodation.</p> <p>HSCP contributes to the development and implementation of an Aberdeenshire Child Poverty Action Plan Support HSCP / Aberdeenshire Council to introduce Combined Impact Assessments into policy development process / decision making to mitigate impact on health inequalities (to ensure due regard given to people with protected characteristics and socio-economic disadvantage)</p>	<p>Support Peterhead Foodbank to support those in need to get holistic support providing 'more than just food'</p> <p>Developing food skills opportunities in rural settings in Marr</p>
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Making Health Improvement Everyone's Business		
<p><u>Strategic Context:</u> Guan Yersel, The Self Management Strategy for Scotland 2011; Realising Realistic Medicine, CMO Report 2015.</p> <p><u>National Performance Outcomes:</u> percentage of adults able to look after their health very well or quite well.</p>		
What Are We Aiming to Improve	What Are We Going To Deliver	
	ABERDEENSHIRE	NORTH, SOUTH OR CENTRAL ABERDEENSHIRE
<p>Support partners to embed improving health and wellbeing in their policy, practice and service delivery</p> <p>Residents of Aberdeenshire are empowered to improve their own health and the health of others</p>	<p>Experience Based Co-design project to improve the urgent care services (Minor Injury Units and GMED) in Peterhead and Fraserburgh involving people who use these services and those that deliver them.</p> <p>Making Every Opportunity Count is mainstreamed with support and training for HSC teams to routinely initiate health & wellbeing conversations with clients /patients</p>	<p>Fraserburgh / Peterhead MIU and GMEDS – service improvement process using Experience Based Co-design supported by Health Improvement Scotland</p> <p>MEOC training provided to all HSC teams in North, Central and South</p>

	<p>Introduction of a primary care health coaching service– through merger of NHSG Healthpoint and NHSG Smoking Advise Service in targeted locations and Aberdeenshire wide using 'attend anywhere' virtual service.</p> <p>Aberdeenshire General Practices supported to adopt 'House of Care' to deliver holistic person centered care for people with long tem conditions</p> <p>Support staff health and wellbeing through maintenance of Aberdeenshire HSCP Healthy Working Lives (HWLs) Silver Award</p> <p>Support Local Businesses and organisations to focus on staff health improvement and HWLs</p> <p>Care homes to be provided with caring 4 smiles training by PDS to improve oral health of residents</p> <p>Care homes supported to introduce physical activities for residents as part of the national CAPA programme</p> <p>Support low paid industry sectors to promote staff health and wellbeing - NFUS and Aberdeenshire North Marts for agricultural sector, Scottish Seafood Association for fish processing industry and Construction Industry Board for construction industry</p>	<p>Health coaching service to be established in North, South and Central Primary Care locations.</p> <p>House of Care adopted by Peterhead, McDuff, Cruden, Inverurie, Huntly, Inverbervie and Banchory General Practices</p> <p>Locality HSCP Teams participate in HWL activities. Cycling Friendly Employer - Fraserburgh and Inverurie Hospitals. Medal Routes at eight NHS sites Inverurie, Kincardine, Portlethen, Inverbervie, Peterhead, Crimond, Aboyne and Glen of Dee.</p> <p>HWLs Alcohol and Drugs Training for Managers in Peterhead and Huntly. HWLs Mental Health Training for Managers in Huntly.</p> <p>CAPA Participating Care Homes: Faithlie, Bennachie View, Westbank House, Allachburn, Garioch Care Home, Drumdarroch Care Home, Mowat Court Nursing Home, Lethan Park Care Home, Inchmarlo Care Home and Balmedie Care Home. Other services :Paramount Care, Dalvenie Gardens Very Sheltered Housing and Resource Centre</p> <p>Support the community to Implement the Braemar Care Initiative</p>
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Health data sources:

<http://www.scotpho.org.uk/comparative-health/profiles/online-profiles-tool>
<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/lifeexpectancies>
<http://www.gov.scot/Resource/0053/00530207.pdf>

Acknowledgement:

Infographics adapted from Kings Fund / Local Government Association 2014
Making the Case for Public Health Interventions Infographics
<https://www.kingsfund.org.uk/audio-video/public-health-spending-roi>
