

**Sheffield
Hallam
University**

**We're driving measurable
improvements in public health.
*Are you capitalising on our expertise?***



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or email: business@shu.ac.uk
www.shu.ac.uk/publichealth



Networks, experts, and *knowhow*

We share your aim to deliver positive changes in public health. In a climate of transition, we can bring a new and dynamic approach to help you address the challenges in this vitally important area.

We're working with local authorities, clinical commissioning groups (CCGs), NHS trusts, GP surgeries, the voluntary sector, healthcare professionals and the public to generate measurable, evidence-based solutions that make a real difference. Together, we can meet our common goal to improve the nation's health and reduce health inequalities.

We have a great deal of knowledge and experience in areas relating to public health. Combined with our research, evaluation, consultancy, and education and training, the right expertise is on hand to help address your specific challenges.

The general public is firmly at the heart of each project. Whether we're delivering services relating to GP health checks and lifestyle advice, developing physical activity interventions to improve health and wellbeing, or reducing health inequalities through housing planning and regeneration, our approach will always be considerate of the societal context.

Images opposite: 1. Dr Malcolm Whitfield, Head of the Centre for Health and Social Care Research 2. Sue Kesterton, Health and exercise science 3. Trevor Simper, Behaviour change and diet 4. Bronwen Moss, Public health 5. Maxine Gregory, Sport industry research 6. Dr Robert Copeland, Physical activity and health 7. Judy Stevenson, Public health 8. Dr Simon Till, Sports medicine 9. Angela Todd, Public health 10. Dr Helen Crank, Physical activity and health 11. Anna Ryan, Public health

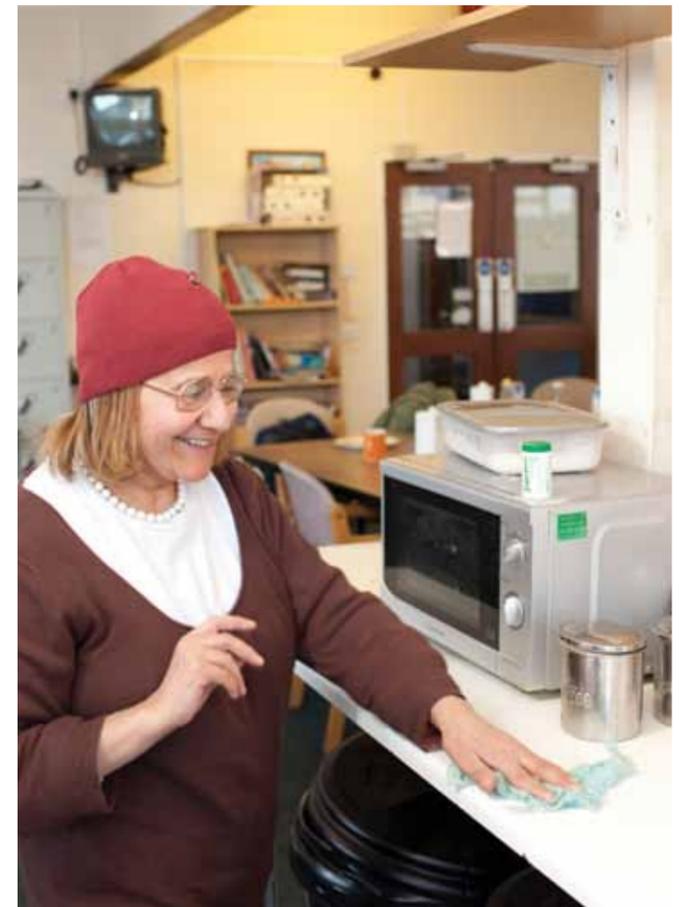
Access expertise that's *focused on impact*

From physical activity and nutrition to behaviour change and urban regeneration, our expertise supports key elements of public health. You can also access our wider knowledge in areas such as healthcare technologies, leadership and management, and psychology to help develop effective solutions.

We work collaboratively across the University to bring together the right expertise for your needs. This means we can assemble truly multidisciplinary teams to tackle challenges from all angles. We can also draw upon our experience of working with local authorities, the Department for Work and Pensions, teaching hospitals, sport governing bodies and food manufacturers and retailers to help contextualise public health interventions.

We'll act as an extension of your team to complement your own skills and knowledge. Collectively, we'll develop new interventions that successfully promote behaviour change, create healthy environments, improve physical and mental health, and ultimately drive down health inequalities and reduce the cost of ill health.

As one of the founding partners of the National Centre for Sport and Exercise Medicine, we're already creating a culture of physical activity in the Sheffield area to help address public health challenges.



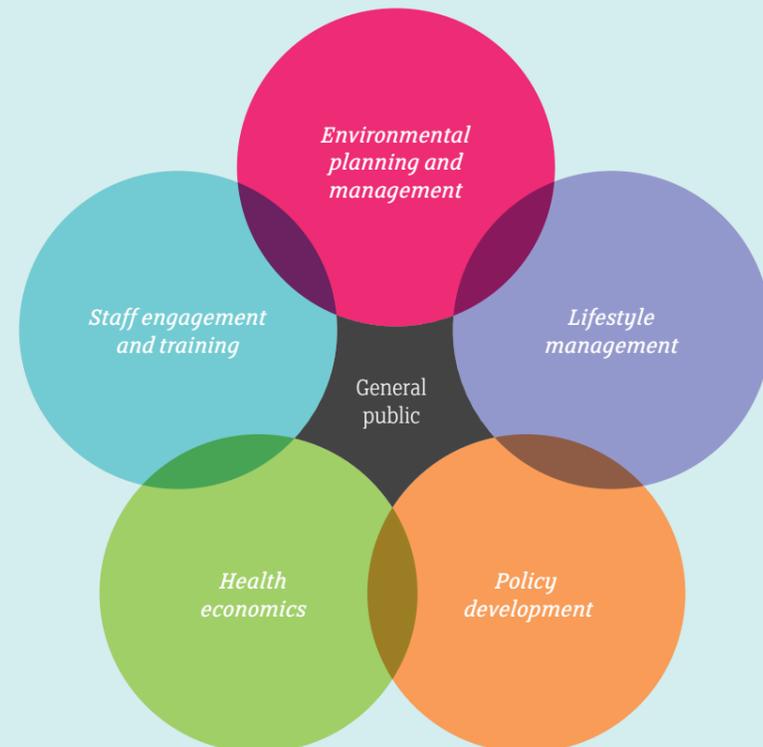


Discover new *measures of prevention*

With our unique combination of networks, experts and knowhow, we can work with you to:

- improve the quality of interventions and service delivery
- deliver value for money and hit financial targets
- evaluate the impact, effectiveness and return on investment for your interventions
- increase physical activity
- reduce lifestyle-related diseases such as heart disease
- reduce GP and hospital visits
- offer the best start in life for newborns and young children
- develop healthy schools and pupils
- produce warmer and safer homes
- create better access to green and open spaces
- build strong, resilient communities and improve wellbeing
- deliver improvements to spatial planning

We can support you
from every angle



In a diverse and constantly transforming environment, it's essential that you focus on the end goal and deliver projects and interventions that generate real impact.

We work with a number of healthcare partners, local authorities and charities, including NHS Trusts, CCGs, GPs, The Department of Health and Age UK, to help deliver measurable, evidence-based solutions.

Engaging communities changing behaviour

From research and consultancy, to professional development and evaluating impact, our services are designed to deliver maximum return on your investment.

- Environmental planning and management**
 - Neighbourhood assessments
 - Green space surveys and management planning
 - Public engagement and community action planning
 - Planning and design of public spaces
 - Environmental impact and assessment surveys
 - Professional training and organisational capacity building
- Lifestyle management**
 - Service development
 - Behaviour change training
 - Physical activity intervention design and evaluation
 - Physical activity strategy development
 - Nutrition for health workshops and short courses
 - Physical activity programmes to improve quality of life for older people
 - Weight management intervention design, service delivery and evaluation
- Health economics**
 - Assessing social return on investment
 - Cost benefit analysis
 - Evaluation methods
 - Economic evaluation
 - Impact studies
 - Survey design and results reporting
- Policy development**
 - Generating insight through research
 - Assessing and evaluating impact
 - Design of bespoke evaluation tools
 - Advice on communication best practice
- Staff engagement and training**
 - Employee wellness interventions to improve engagement, productivity and reduce staff sickness
 - Training to deliver patient health checks and offer healthy lifestyle advice
 - Continuing Professional Development in a broad range of fields
 - Leadership and management development programmes
 - Additional resource through student projects and placements
 - Seminar series and specialist events
- Mental health in the workplace courses**
 - Training to deliver health checks
 - Engagement tools such as interactive DVDs
 - Developing sport and physical activity opportunities in schools and local communities

Our team of exercise science experts with a vision to tackle obesity *empower the people of Barnsley to lead a healthier life.*



Poor health, obesity and low levels of regular physical activity, were causing big problems in Barnsley. A Sport England survey highlighting the issues prompted NHS Barnsley to rise to the challenge of increasing health and physical activity in nine of its most deprived areas.

Our brief was to devise a programme to help them reach this goal. Working closely with local communities, our experts in exercise science developed a series of interventions to increase physical activity levels in those with a high BMI. The BeActive programme provided weight management groups, one-to-one support, training, an interactive DVD, open access to swimming and a community garden to get participants moving.

The programme successfully delivered 2,540 hours of physical activity to over 7,000 Barnsley residents, with the open pool sessions attracting 25,200 swimmers. The interactive DVD was a particular highlight, with over 5,000 distributed to the target groups.

Our subsequent evaluation of the programme reported 96% of participants were motivated to become more active, and 93% were more physically active after interacting with the DVD. The numbers participating in half an hour of physical activity three times per week increased from 19.1% to 22.4%, with a reduction in obesity levels of 0.1% – bucking the national trend. The results also showed a positive impact on the weight, blood pressure and body composition of participants.

“Over the two and a half year programme, BeActive membership grew to over 7,000 people. This was a considerable achievement, bearing in mind that all of these people were considered to be hard to reach. A stipulation of the programme was that activity should be concentrated in nine of the most deprived areas of the borough.”

Paul Simpson
Head of Sport and Active Recreation,
Barnsley MBC



Feeling the heat. Our experts are working with public health organisations, and energy and age-related charities to help 170,000 households in Yorkshire and Humber keep warm.



Cold, damp housing caused by fuel poverty is making our aging population ill. Nearly 8% of households in Yorkshire and Humber are fuel poor, causing older residents chronic health problems, impaired quality of life, and excess winter deaths. The Keeping Warm in Later Life (KWILLT) project was developed to understand why people do not keep their homes warm.

Our team of experts in health and social care worked with the NHS, Rotherham Metropolitan Borough Council, National Energy Action (NEA), Age UK Rotherham and Rotherham Older People's Experience of Services (ROPES), to identify the barriers older people experience that prevent them from getting help to keep warm.

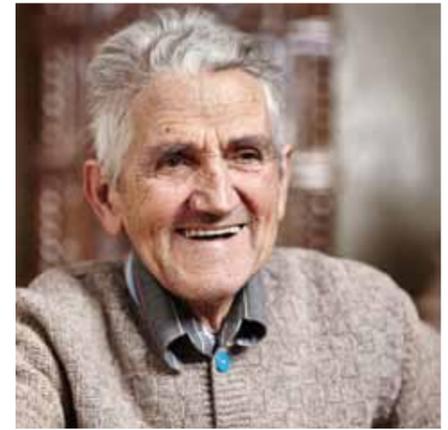
The team applied the research to develop a series of 'keeping warm' interventions. 50 older people were interviewed and their room temperatures measured, with 25 health and social care professionals also consulted to understand how people were keeping warm in their homes. Six focus groups were held to expand on the findings from the individual research, and a wider consultation of 120 stakeholders from local, regional and national groups completed the study.

The research developed knowledge to understand how vulnerable older people are at risk of being cold at home. They illustrated this with six groups of older people who share a combination of factors which influence their ability to keep warm. The insights were used by health, social care, local authorities and voluntary organisations to inform public social marketing campaigns. Interactive DVDs and e-learning materials were developed to highlight and raise awareness of the health impact of cold weather amongst health and social care staff, voluntary organisations and patients.

The study has developed stronger collaborative working between Age UK, NEA and local groups and charities for older people, and led to wider changes in practice at a local and national level. The insights have been adopted by other local authorities to influence policy and process development.

Research into cold weather and health has been extended to reach other vulnerable groups and is being applied to children, young people and families. This further study looked into the living habits of children suffering from asthma in Rotherham and Doncaster households, plus those of a wider sample of parents, children and healthcare professionals in the area.

The research team found that families on low incomes and benefits have to manage many competing priorities such as bills, heating, household repairs, food supply and a child's health and wellbeing, with limited resources. As a result, they are making 'trade-offs' which are increasing the health risk to their children. Health and social care professionals need to be aware of these trade-offs in order to better safeguard children.



"In Rotherham, the resources and evidence have been used to develop our fuel poverty strategy, funding applications and training for staff. They have also been used to develop the winter warmth England resources that are being accessed across the country, and are referenced in this year's National Cold Weather Plan for England."

Catherine Homer
Health Promotion Specialist,
Rotherham Metropolitan Borough Council

Our experts in physical activity and quality performance are working with healthcare professionals and local authorities *to make Sheffield a healthier city.*



Obesity rates in Sheffield had reached a new high by 2008. Almost a fifth of primary school children were already diagnosed as being obese by the time they moved into secondary education. In addition to the increased risk of poor health in later life, obesity can have a severe impact on the physical and emotional wellbeing of young people, who often develop a low self image. The Sheffield Let's Change4Life (SLC4L) programme was developed to confront this growing epidemic, by offering a whole systems approach to tackling obesity in children, young people and families.

Our experts in physical activity and health, quality and performance management and lifestyle modification, worked with the Department of Health, Sheffield Council and NHS Sheffield to perform a comprehensive evaluation of SLC4L, after the city's successful bid to become a pilot 'Healthy Town'.

A thorough analysis of each of the eight strands of the two-year programme was completed by our teams, covering subjects as diverse as creating a breastfeeding friendly city, parents as positive role models, schools at the heart of healthy communities, living neighbourhoods, healthy open spaces, social marketing, community health champions and cross sector innovation.

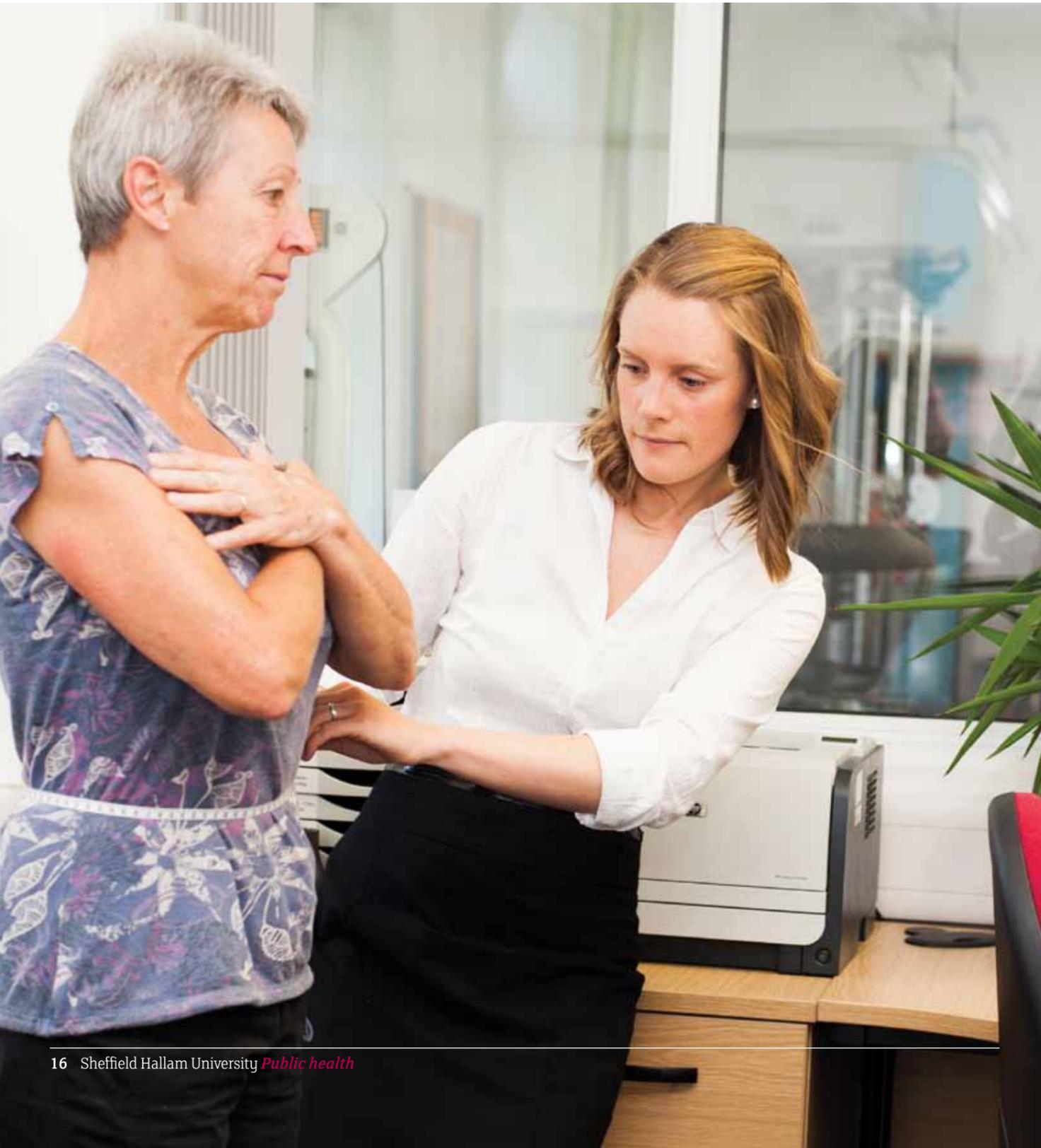
The evaluation identified that a whole systems approach had changed the culture of obesity treatment in the city, highlighting the potential of systems approaches. Indeed, data suggested that in the first year of the programme obesity prevalence among children in Sheffield at Reception (aged 4–5 years) and Year 6 (aged 10–11 years) had marginally fallen. This compared with marginal increases in obesity rates in regional and national comparators.

High levels of satisfaction amongst programme participants were also observed, with 93% of strand leads positively rating their engagement in the programme and 90% of mothers extremely satisfied with the breastfeeding peer support service.

Figures showed a significant reduction in travel to school via bus and car, by 5.7% and 1.6% respectively, and there was an increase in active modes of travel to school, with those cycling rising by 4.3% and walking by 2.5%. A 15% increase in young people's satisfaction with Sheffield's Parks and Green Spaces was also reported.



Prevention is better than cure. Our experts in healthcare evaluation are helping GPs in South Yorkshire to improve patient outcomes through better health checks.



We're all at risk of developing heart disease, stroke, diabetes, kidney disease and some forms of dementia. However, most of these conditions can be prevented, even where there's a family history.

The NHS Health Check Programme was introduced in 2009 to help combat these conditions, and to reduce inequalities in heart disease. The programme was originally contracted by Primary Care Trusts but now falls under the Public Health remit of Local Authorities.

Patients are invited by their GP for a Health Check, and then sign-posted to treatment or lifestyle changes if necessary. There are enormous differences however, in how successful practices have been at engaging the public with the programme and getting people through the door.

Our experts in evaluating healthcare programmes were commissioned by local NHS providers and city councils to examine four South Yorkshire schemes aimed at reducing high rates of heart disease, particularly in more deprived areas. We evaluated not just how well GP surgeries did, but also identified good practice.

After examining almost 100 practices, we found that the size of the practice and the relative poverty of the patient population had no impact on the programme's success. The research, however, did expose that primary factors to achievement were due to:

- how engaged and enthusiastic the practice staff are with the Health Checks Programme
- how committed and flexible practices were in encouraging patients to participate, through multiple approaches such as reminder letters or text messages

- how strong the programme leadership was, and clarity of roles within the programme
- the extent to which practices embraced the idea that 'prevention is better than cure'

The study also identified some issues and needs:

- patient-focused literature needs to be in plain English, or other appropriate languages, and provide guidelines on cholesterol, food labelling and the benefits of lifestyle changes
- some practices have inadequate space to carry out the Health Check
- the blood test in the Health Check requires a patient to fast which limits the number of people who can attend the first few morning appointments
- baseline training and education for practice staff about the programme, and heart health in general, are needed
- community-based lifestyle education programmes are not always available and many previous ones are suffering under the economic restraints of recent times

The research showed strong evidence of good practice that could be replicated across other GP surgeries. The study also identified ways that practices can improve delivery to encourage more people to get a health check, and to make them easier for GPs to administer. The findings have provided a useful toolkit for practices, and are now being used to inform future strategies surrounding GP health checks.



Our experts in evaluation are helping the population of Lincolnshire *to change attitudes towards food and eat better.*



- impacts on health and wellbeing including wider social impacts, increased social capital, intergenerational impacts and weight loss

We designed a range of evaluation techniques to meet the diverse needs of the programme participants. This included 'before and after' surveys, photo caption sheets, food and physical activity diaries, Qwizdom games for young people, feedback postcards and observation sheets. We were able to identify the right tools, techniques and environments to ensure high quality data had been collected with minimum burden on participants and programme coordinators.



Our research showed that targets had been exceeded across all areas. This ranged from reaching beyond the number of growing sites by 4%, to surpassing the number of cooking opportunities by 240%. This exceptional achievement demonstrates the scale of delivery and impact that the Food for Life project has had across Lincolnshire.

Convenience meals are eroding our food culture. A growing tendency to eat alone and an increase in food miles are making more people settle for low-grade, nutritionally poor alternatives. Lincolnshire County Council decided to tackle these problems in their local schools and communities, to help change behaviours and culture relating to food.

The Food for Life programme provides opportunities for residents throughout Lincolnshire to improve their health and lifestyle by developing skills, knowledge and confidence in cooking healthy meals and growing their own food.

The Council commissioned our team of researchers to evaluate the project and establish its impact. We measured key outcomes in four main areas of the programme:

- knowledge and skill development
- increased confidence and engagement
- motivation and behaviour change including changed attitudes and improved diets

The study provided a strong evidence base for best practice, and helped to identify which elements of the programme delivered the greatest impact. The success of the programme fed into a series of case studies to inspire others, and encouraged its replication within each Lincolnshire district. The evidence presented has also supported the development of a business case for continued investment and to inform further policy development.

Since the evaluation of the Food for Life project, we were commissioned to provide independent expert help with an extensive public consultation on the future of Lincolnshire's library service. This included managing public consultation events, analysing survey data and other forms of feedback from the public, and writing the public consultation report.

"The team at Sheffield Hallam have been fantastic and the work they have done for us has been completely invaluable. We started pretty much with nothing in terms of evidence and now have some real clout behind what we do."

Sarah Glendinning
Programme Officer, Public Health
Directorate, Lincolnshire County Council

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