****

Dear Colleagues,

PHE Health and Wellbeing monthly update

IssueNo 37 December 2018

Welcome to the Yorkshire and Humber Health and Wellbeing monthly update. Thank you for subscribing to the monthly update. This monthly update is our way of sharing any good and emerging practice, new developments, updates and guidance. The update is circulated at the beginning of each month with previous month’s updates. If you have anything that needs to be shared urgently, we will circulate as soon as possible.

|  |
| --- |
| Ensuring Every Child has the Best Start in Life (H&WB Team Lead: Gemma Mann) |
|  |
| Report on the importance of early nutrition by WHO  WHO (world health organization) has published a short report on the importance of early nutrition and its role in childhood obesity.  <http://www.who.int/end-childhood-obesity/publications/taking-action-childhood-obesity-report/en/?platform=hootsuite> |
|  |
| Living Well |
|  |
| Tackling Obesity (H&WB Team Lead: Nicola Corrigan)  Promoting healthy weight in children, young people and families  Please see below a link to the recently published PHE resource to support local authorities, NHS Commissioners and providers, voluntary and community sector organisations to take action to reduce obesity:  <https://www.gov.uk/government/publications/promoting-healthy-weight-in-children-young-people-and-families>    Everybody Active Every Day **(**H&WB Team Lead: Nicola Corrigan)  Physical Activity profile  PHE have added 2 active travel indicators to the [Physical Activity](https://fingertips.phe.org.uk/profile/physical-activity) profile. These indicators are available at local authority level as well as for England and the regions:   * [Percentage of adults cycling for travel at least 3 days per week](https://fingertips.phe.org.uk/profile/physical-activity/data#page/3/gid/1938132899/pat/15/par/E92000001/ati/6/are/E12000004/iid/93440/age/164/sex/4) - This new indicator shows that the percentage of the population aged 16 years and over that cycled for travel at least 3 days per week was 3.3% in 2016 to 2017. This is not significantly different from the previous year. * [Percentage of adults walking for travel at least 3 days per week](https://fingertips.phe.org.uk/profile/physical-activity/data#page/3/gid/1938132899/pat/15/par/E92000001/ati/6/are/E12000004/iid/93439/age/164/sex/4) - This new indicator shows that the percentage of the population aged 16 years and over that walked for travel at least 3 days per week was 22.9% in 2016 to 2017. This is not significantly different from the previous year.   The indicators use data as published by the Department for Transport as part of their [Walking and cycling statistics, England: 2017](https://www.gov.uk/government/statistics/walking-and-cycling-statistics-england-2017) release.  Cycling and walking for individual and population health benefits  PHE has published a rapid evidence review for health and care system decision. [Click here](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/757756/Cycling_and_walking_for_individual_and_population_health_benefits.pdf) to view the review.  Strength and Balance Evidence Review Webinar  10th December 2018 at 13:00 – 14:00  Register here - [https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=98KI4671J#](https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=98KI4671J)  The webinar will cover the importance of strength and balance activities for older adults, the evidence base for the types of activities that improve strength and balance, and the motivators and facilitators for engaging adults and older adults in these activities.  Webinar outline:  • **Importance of Strength and Balance Activities in Older Adults**  Professor Dawn Skelton, Glasgow Caledonian University  • **Evidence base for activities**  Dr Nick Cavill, Cavill Associates  • **Attitudes to activities**  Professor Melvyn Hilsdon, University of Exeter  Please email [michelle.youd@phe.gov.uk](mailto:michelle.youd@phe.gov.uk) with any questions and [https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=98KI4671J#](https://surveys.phe.org.uk/TakeSurvey.aspx?SurveyID=98KI4671J) for registration.    Healthy Places (H&WB Team Lead: Peter Varey)  Health Matters: Air Pollution Guidance  Poor air quality is the largest environmental risk to public health, as long-term exposure to air pollution can cause chronic conditions such as cardiovascular and respiratory diseases as well as lung cancer, leading to reduced life expectancy. There is clear evidence that people with a low income are affected by air pollution in a number of different ways, including; they are likely to have existing medical conditions, live in areas with poorer outdoor and indoor environments, including the quality of air (for example, near to industry or busy roads) and have less access to jobs, healthy food, decent housing and green spaces, which all contribute to poorer health  The disadvantages that come about as a result of poor income add up, putting deprived populations who are more likely to be in poor health at greater risk from air pollution and its adverse health impacts. These inequalities can also affect people throughout their lives, from the prenatal stage through to old age, particularly as deprived communities often have limited opportunities to improve their environment.  This guidance focuses on the health impacts that air pollution can have across a person’s lifetime, the associated health inequalities, and the current and future outlook both in terms of new cases of disease and NHS and social care costs attributable to air pollution. It includes calls to action on reducing air pollution and exposure for the health service and healthcare professionals, local government, and the public. [Click here](https://www.gov.uk/government/publications/health-matters-air-pollution/health-matters-air-pollution?utm_source=The%20King%27s%20Fund%20newsletters%20%28main%20account%29&utm_medium=email&utm_campaign=10027661_NEWSL_HMP%202018-11-16&dm_i=21A8,5YXE5,GSKQ2E,NE82S,1) for guidance.  Reducing Harmful Drinking  Text Message Intervention to Reduce Frequency of Binge Drinking Among Disadvantaged Men  Binge drinking by men who are socially disadvantaged greatly increases their risk of liver disease. This research tested a novel intervention that was delivered by text message to see if it would be an effective and cost-effective way to reduce their frequency of binge drinking. Text messages prompted men to review the harms drinking caused, not just to themselves but also to their family and friends. The messages also illustrated the benefits of reduced drinking and encouraged the men to take action to reduce their drinking. The control group received texts on general health topics.  Over 800 men living in socially disadvantaged areas took part. The intervention group engaged enthusiastically with the text messages. The study succeeded in following up a large proportion (86%) of the participants at 1 year. Over 80% of the intervention cost was incurred in recruiting the participants. Disadvantaged men are reluctant to engage in health promotion interventions and this cost may need to be met if society is to reduce inequalities in health caused by harmful drinking. At follow-up, the intervention group had reduced their binge drinking **only slightly more** than the control group. Disadvantaged individuals are less likely to respond to behaviour change interventions and there is a widespread concern that, without adequate tailoring to disadvantaged groups, interventions could widen inequalities. [Report](https://njl-admin.nihr.ac.uk/document/download/2014595)  Mental Health (H&WB Team Lead: Corinne Harvey)  New public mental health resource page on gov.uk  A ‘public mental health resource’ page has been published on gov.uk which serves as a landing page and signposts visitors to our programme-specific pages, and key resources. The page can be found here: <https://www.gov.uk/government/collections/public-mental-health>  “Let’s Talk About Suicide” e-learning programme  A new training resource will raise vital awareness of suicide for the wider public health workforce, including those in health, social care, the charitable sector and the public. The [e-Learning package](http://www.nwyhelearning.nhs.uk/elearning/HEE/SuicidePrevention/) will provide information about suicide and what we can do to help prevent it. Launched on World Mental Health Day (10 October) the *We need to Talk about Suicide* initiative, developed jointly by Health Education England and Public Health England highlights the devastating impact of suicide on individuals, families and communities.  Suicide is everybody’s business and is preventable. Everyone has a role to play in asking about suicide – and you don’t need to be an expert in mental health to do it. If you are worried about someone don’t be afraid to talk to them, you won’t make things worse, and you can only help.”  PHE Suicide Prevention fingertips profile becomes official statistic  The first update of the Public Health England suicide prevention fingertips profile was announced as an official statistic on 6 November 2018. Details of the indicators which have been updated can be found on the profile [here](https://fingertips.phe.org.uk/profile-group/mental-health/profile/suicide). The supporting commentary for November 2018 can be found [here](https://www.gov.uk/government/publications/suicide-prevention-profile-november-2018-update/statistical-commentary-suicide-prevention-profile-november-2018-update).  With regards to what this means:  ·    **Advance notice:** Official statistics are all pre-announced. This pre-announcement informs users about when the profile will be updated, at least a month ahead of the update  ·     **Transparency:** The pre-announcement, where possible, will list the specific indicators to be updated in each refresh, allowing users to more effectively plan ahead  ·     **Background, summary information and key messages:** In addition to the refresh of indicators, the accompanying statistical commentary provides background, summary information and key messages for users to explore and reference  HEE Self-Harm and Suicide Prevention (SHSP) Competence Framework  Health Education England (HEE), in collaboration with PHE, have now published the Self-Harm and Suicide Prevention (SHSP) Competence Framework.  These and the four guides (outlined below) are now publically available on the UCL CORE Webpage (found [here](https://www.ucl.ac.uk/pals/research/clinical-educational-and-health-psychology/research-groups/core/competence-frameworks/self))  Information in regards to the competency framework can also be found on both HEE’s website (found [here](https://www.hee.nhs.uk/our-work/mental-health/self-harm-suicide-prevention-frameworks)) and the NCCMH website (found [here](https://www.rcpsych.ac.uk/workinpsychiatry/nccmh/otherwork.aspx)).  ‘Providing a Lifeline: Effective Scrutiny of Local Council Strategies to Prevent or Reduce Suicide’  The ADPH, Centre for Public Scrutiny and LGA have published the report [‘Providing a Lifeline: Effective Scrutiny of Local Council Strategies to Prevent or Reduce Suicide’.](http://www.adph.org.uk/2018/11/providing-a-lifeline-effective-scrutiny-of-local-council-strategies-to-prevent-or-reduce-suicide/) The publication looks at effective scrutiny of local strategies to prevent or reduce suicide, focusing on context and relevance for scrutiny, quality improvement and the role of scrutiny and provides 10 questions for scrutiny committees to ask.  National Suicide Prevention Alliance Annual Conference 2019  Bookings are now open for NSPA’s annual conference: ‘*Suicide prevention across the life course*’ on 5 February 2019.  This year’s conference will focus, in plenary, on suicide prevention with children and young people, those of working age, and older adults. Speakers will include academics talking about the risks and protective factors at each stage, examples of good practice, and people with personal experience. The workshops will explore aspects of suicide prevention and bereavement support in more detail, including: reaching men; self-harm prevention; supporting people in crisis; working with GPs; and public health approaches. Jackie Doyle-Price, the newly announced Minister for Suicide Prevention will be our keynote speaker. Further programme information and booking details are available on the NSPA [website](http://www.nspa.org.uk/home/news-events/nspa-conference-2019/).  PABBS evidence-based suicide bereavement training - 2019 Dates now released  PABBS evidence-based suicide bereavement training, has been informed by a three year study, conducted at the University of Manchester, funded (£243k) by the National Institute for Health Research (NIHR), Research for Patient Benefit Programme and first of its kind internationally. It is a highly interactive one day workshop and includes a workbook, 9 films and a 60 page manual for future reference. The training is delivered by two practitioners with significant experience working in this field.  The authors are recognised as experts in their field and include: Dr. Sharon McDonnell, Prof Nav Kapur, Prof Carolyn Chew-Graham, Prof Jenny Shaw, Shirley Smith, Barry McGale and Dr. Lis Cordingley  Aims of training:   * To enable professionals to increase their knowledge, confidence, skills and provide a framework and service-response plan for immediate and ongoing support for those bereaved by suicide * To encourage professionals to consider and recognise their own emotional or self-care needs and develop a strategy or support structure that will be available to them if a patient dies by suicide.   Training is delivered in Manchester with in-house training upon request. For training dates and further information, visit [here](https://suicidebereavementuk.com/pabbs-training).  Mental health and wellbeing provision in schools  The Department for Education have released a review of published policies and information relating to mental health and wellbeing provision in schools. DfE commissioned this study to further understanding of the extent the current content of schools’ published policies and other information demonstrates relevant approaches and activities.  This evidence will be used to inform decisions about how schools can best be supported to use existing requirements to strengthen their work in these areas and better meet their statutory duties. You can view the full report here: <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/747709/Mental_health_and_wellbeing_provision_in_schools.pdf>  Management of physical health conditions in adults with severe mental disorders – WHO guidelines  The World Health Organisation has released evidence-based guidelines on the management of physical health conditions in adults with severe mental illness. These new guidelines include recommendations for treating people with severe mental health disorders who have cardiovascular disease, diabetes, HIV/AIDS, tuberculosis and hepatitis B and C, and those with tobacco dependence, who engage in  harmful use of alcohol or other substances and/or who are overweight.  Recommendations relate to lifestyle changes such as a healthier diet, increased physical activity and tobacco cessation; psychosocial support; and medicines, taking into account possible interactions between different medicines prescribed for mental and physical health conditions. The full guidelines can be found here: <http://apps.who.int/iris/bitstream/handle/10665/275718/9789241550383-eng.pdf?ua=1>  Sexual Health (H&WB Team Lead: Sharron Ainslie)  MSM article of interest  Attendance of MSM at Genitourinary Medicine services in England: implications for selective HPV vaccination programme (a short communication)  <https://sti.bmj.com/content/94/7/542?etoc>  National HIV self-sampling service  The service is now providing tests across the whole of England until 7 January (tests are available to MSM, black African people, partners of these groups and partners of people from high prevalence countries).  Our social media pack contains suggested messaging to promote this service during NHTW and for the rest of the year.   * **NHTW Videos**   Videos to support the campaign are now available via the following link, they can be downloaded or embedded into websites (click share to obtain the code). We have two versions with our campaign models, each of which has a subtitled version which can be used in clinics or GP surgeries where sound isn’t available and in addition to these we have also produced a video in British Sign Language: <https://vimeo.com/user17897300>   * **Outdoor advertising**   Rollout of outdoor advertising to support National HIV Testing Week started this week with the campaign already spotted across areas of London, Wolverhampton and Leeds.  HIV Standards  The Standards are designed to provide a reference point against which to benchmark the quality of HIV care in the context of the changing needs of patients and the current financial pressures. They provide information to support top quality care and to inform commissioning decisions to meet the growing need for more efficient and cost-effective services. These Standards update earlier versions published in 2007 and 2013. The new Standards are evidence based, and have been developed in partnership with care providers, professional associations, commissioners and people living with HIV. They cover the range of care needed from testing and diagnosis to the end of life, taking a holistic view of an integrated approach embracing overall health and well-being, as well as clinical care. See also: <https://www.bhiva.org/standards-of-care-2018>  Drugs Recovery  Drink and Drug News  Please see attached DDN supplement on hep C. It is also available [online](https://drinkanddrugsnews.com/ddn-wider-health-hep-c/)    NHS Health Checks and CVD (H&WB Team Lead: Melanie Earlam and Karen Pearson )  **BHF publishes Turning back the tide on heart and circulatory diseases.**  On Monday 19th November 2018 the BHF published a report setting out the need to [turn the tide](https://www.bhf.org.uk/what-we-do/influencing-change/turning-back-the-tide) on CVD.  [Public Health England cardiovascular disease prevention initiatives, 2018 to 2019](https://www.healthcheck.nhs.uk/document.php?o=1764)  This document demonstrates work that PHE is leading and involved with to help meet the challenge of cardiovascular disease in 2018 to 2019. The document follows publications from 2016 and 2017.  As well as showcasing current projects and new resources, the publication updates on the progress of initiatives highlighted in [last year’s Action plan](https://www.gov.uk/government/publications/cardiovascular-disease-prevention-action-plan).  Cardiovascular disease prevention initiatives  Over the last few decades we’ve made significant progress in reducing premature deaths from cardiovascular disease (CVD) in England. However, CVD remains a leading cause of disability, death and health inequalities despite the fact that around 80% of premature heart attacks and strokes are preventable. Last week we published our annual [CVD prevention initiatives](https://t.co/CdD6aYLEwM), which sets out the different ways that PHE are supporting efforts to address CVD at a population, community and individual level. The document contains lots of useful links, tools and resources for system partners working in the field of CVD prevention.  Reducing Health Inequalities (H&WB Team Lead: Alison Patey)  New publication: Severe mental illness (SMI) and physical health inequalities  The National Mental Health Intelligence Network has published a report on ***Severe Mental Illness and Physical Health Inequalities***(The [**Severe Mental Illness and Physical Health Inequalities**](http://links.govdelivery.com:80/track?type=click&enid=ZWFzPTEmbXNpZD0mYXVpZD0mbWFpbGluZ2lkPTIwMTgwOTI3Ljk1NDMzOTkxJm1lc3NhZ2VpZD1NREItUFJELUJVTC0yMDE4MDkyNy45NTQzMzk5MSZkYXRhYmFzZWlkPTEwMDEmc2VyaWFsPTE3MDQxNzgyJmVtYWlsaWQ9c3VlLmZvc3RlckBwaGUuZ292LnVrJnVzZXJpZD1zdWUuZm9zdGVyQHBoZS5nb3YudWsmdGFyZ2V0aWQ9JmZsPSZleHRyYT1NdWx0aXZhcmlhdGVJZD0mJiY=&&&100&&&https://www.gov.uk/government/publications/severe-mental-illness-smi-physical-health-inequalities) report consists of two parts; a [briefing document](http://links.govdelivery.com:80/track?type=click&enid=ZWFzPTEmbXNpZD0mYXVpZD0mbWFpbGluZ2lkPTIwMTgwOTI3Ljk1NDMzOTkxJm1lc3NhZ2VpZD1NREItUFJELUJVTC0yMDE4MDkyNy45NTQzMzk5MSZkYXRhYmFzZWlkPTEwMDEmc2VyaWFsPTE3MDQxNzgyJmVtYWlsaWQ9c3VlLmZvc3RlckBwaGUuZ292LnVrJnVzZXJpZD1zdWUuZm9zdGVyQHBoZS5nb3YudWsmdGFyZ2V0aWQ9JmZsPSZleHRyYT1NdWx0aXZhcmlhdGVJZD0mJiY=&&&101&&&https://www.gov.uk/government/publications/severe-mental-illness-smi-physical-health-inequalities/severe-mental-illness-and-physical-health-inequalities-briefing) and an accompanying [technical supplement](http://links.govdelivery.com:80/track?type=click&enid=ZWFzPTEmbXNpZD0mYXVpZD0mbWFpbGluZ2lkPTIwMTgwOTI3Ljk1NDMzOTkxJm1lc3NhZ2VpZD1NREItUFJELUJVTC0yMDE4MDkyNy45NTQzMzk5MSZkYXRhYmFzZWlkPTEwMDEmc2VyaWFsPTE3MDQxNzgyJmVtYWlsaWQ9c3VlLmZvc3RlckBwaGUuZ292LnVrJnVzZXJpZD1zdWUuZm9zdGVyQHBoZS5nb3YudWsmdGFyZ2V0aWQ9JmZsPSZleHRyYT1NdWx0aXZhcmlhdGVJZD0mJiY=&&&102&&&https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/743050/SMI_and_physical_health_inequalities__technical_report_August_2018.pdf)). The report analyses data from a primary care sample database called THIN, and examines:   * the recorded prevalence of SMI by age, sex and deprivation in England * the proportion of people with recorded SMI experiencing co-morbidities and multi-morbidities in England * inequalities in the co-morbidities and multi-morbidities between SMI and all patients by age, sex and deprivation in England   The purpose of this report is to:   * increase the understanding of physical health conditions in people with SMI * add to the intelligence on the inequality experienced by people with SMI * provide intelligence that allows the health and care system to focus on key areas for intervention, to reduce premature mortality among people with SMI   What is new about this report?   * There is currently no national level access to detailed primary care data to help understand the physical health needs of people with SMI, the **THIN data set is the best available route to assessing the primary care contribution to this important topic.** * This report **considers 10 physical conditions in detail and it quantifies the level of inequality by age, sex and deprivation**. * Whilst this work reports on national data, the methodology provided in the technical **report allows local areas to replicate this work for their populations**.   Who is this report for?   * local organisations that plan, manage and deliver different stages of clinical and preventive care for people with SMI * local organisations that, along with mental health, manage and treat physical health conditions in people with SMI * national organisations that lead and develop strategy, policy and guidance on people with SMI   If you have any questions or feedback about this publication please do contact us at [mhdnin@phe.gov.uk](mailto:mhdnin@phe.gov.uk?subject=Psychosis%20Data%20Report). |
|  |
| Ageing Well (H&WB Team Lead: Alison Iliff, Dementia: Melanie Earlam) |
| Loneliness Strategy  The cross-Government Loneliness Strategy was published in October. The strategy looks at what action is needed across the life course to address loneliness in high-risk groups.  <https://www.gov.uk/government/publications/a-connected-society-a-strategy-for-tackling-loneliness>  New tool available: older people with depression  A new [older people’s mental health data catalogue](https://fingertips.phe.org.uk/documents/FINAL_OPMH_Data%20catalogue_220818.xlsx) was published in September, which:   * acts as a signposting guide for indicators, datasets and resources relevant to depression in older people at both a national and local level * is organised into three main focus areas: Prevention, Identification and Treatment * covers a range of topics from loneliness and social isolation to IAPT, use of the Mental Health Act and more   Any feedback on this tool would be much appreciated. Tell us via [mhdnin@phe.gov.uk](mailto:mhdnin@phe.gov.uk):  Data, Documents, Letters, Reports & General Information  Population health intelligence training prospectus  Public Health England (PHE) works closely with a range of stakeholders, in particular with public health teams in local authorities, to improve their use of knowledge and intelligence. The population health intelligence and tools produced by PHE support local systems in understanding the health of their populations, and the drivers of ill health, health inequalities and health outcomes.  We have developed a series of national training courses to build and develop population health intelligence capacity and capability in local public health systems. Our new *Population health intelligence Training prospectus*, launched at the recent PHE conference, sets out the range of courses available locally through your PHE Local Knowledge and Intelligence Service (LKIS). This training has been developed to support public health practitioners, including public health analysts, to increase their competency and confidence in using data to drive decision-making. However, the courses are suitable for anyone working in a population health role.  The training available comprises classroom-based courses and e-learning. The classroom-based courses are delivered locally by your PHE LKIS; the e-learning is available via the [e-Learning for Healthcare](https://portal.e-lfh.org.uk/) website. All courses are currently free of charge to non-commercial organisations in local health systems  Please note that the specific courses run by each LKIS team are decided in consultation with the local system and are based on local need. For information on the courses taking place near you, please contact your [local LKIS team](mailto:LKISYorkshireandHumber@phe.gov.uk).    New public health profile: the Mortality Profile data tool  PHE will release a new public health profile on 4 December. The Mortality Profile brings together a selection of mortality indicators from other PHE data tools, in order to make it easier to assess outcomes across a range of causes of deaths. The tool contains those mortality indicators which were previously only available in PHE’s Longer Lives tool. A list of the indicators in the profile is available [here](https://www.gov.uk/government/publications/mortality-profile-indicator-updates/mortality-profile-indicators-to-be-included-december-2018). The profile will be available at <https://fingertips.phe.org.uk/profile/mortality-profile> from 9:30am on 4 December.  Return on Investment tool for the prevention of cardiovascular disease – webinar 3 December 2-2.45pm  PHE's Health Economics team has [recently published](https://www.gov.uk/government/publications/cardiovascular-disease-prevention-cost-effective-commissioning) a return on investment tool for prevention of cardiovascular disease. This shows national and local-level health and economic effects of improving detection and/or management of people with key cardiovascular (CVD) risk factors. There is a recorded webinar detailing the background to the tool, how to use it, and how to get further guidance. The webinar is [available here](https://indigo.phe.gov.uk/owa/14.3.279.2/scripts/premium/redir.aspx?REF=nZ0uR1EcGnF0grZlf67OSdz4UKsUtaUjq4QWBFuJVhwBPQOubFTWCAEgaHR0cHM6Ly93d3cueW91dHViZS5jb20vd2F0Y2g_dj1UTzhtcGZRdm1mMCZmZWF0dXJlPXlvdXR1LmJl) and may be useful to those involved in CVD prevention strategies. A further live webinar explaining more of the technical modelling behind the tool will be held on December 3rd at 2-2:45pm. Places are limited - please e-mail the health economics mailbox at [healtheconomics@phe.gov.uk](mailto:healtheconomics@phe.gov.uk) if you would like to attend. |
| Upcoming Meetings and Seminars |
| From data to decisions: a foundation course in population health intelligence  Well over a hundred delegates in total attended our successful recent series of workshops for members of Communities of Improvement, *From data to decisions*.  We are now running a similar short course, to provide an introduction to population health intelligence and its use in everyday public health practice.  This course will be useful for anyone new to public health or needing a refresher on population health intelligence. It will be particularly valuable to those working on health and its wider determinants within PHE or a local authority. However, it is also relevant to anyone else in the wider health system, including but not limited to those in partner organisations such as the third sector and the wider CCG workforce. Places are not generally available for students or those working for commercial organisations.  By the end of this course you will :   * understand what health intelligence is and how it can be used to measure population health needs, outcomes and inequalities * have a better understanding of the questions that health intelligence can be used to address * be able to understand and act on commonly used health intelligence resources * know where to seek advice and help in obtaining more detailed analysis   This course consists of two e-learning modules with accompanying workbook:   * Introduction to public health intelligence * Understanding and measuring populations   followed by an interactive and hands-on workshop day.  This course is free. It runs at the City of York Council, West Offices, York. You can register for an event on 31 January 2019  via Eventbrite [here](https://www.eventbrite.co.uk/e/from-data-to-decisions-a-foundation-course-in-population-health-intelligence-tickets-52000173920)  or on 26 March 2019  [here](https://www.eventbrite.co.uk/e/from-data-to-decisions-a-foundation-course-in-population-health-intelligence-tickets-52000632291)  Yorkshire Dance invites artists and researchers to contribute to new AGELESS festival, Leeds  Yorkshire Dance would like to hear from people who could contribute to a festival exploring the reimagining of age through dance, in October 2019.  AGELESS is a response to the huge level of participatory work with older adults taking place across Leeds and Yorkshire, and to the interests of the local and regional dance sector.  The festival aligns with Yorkshire Dance’s new [Encounters](https://yorkshiredance.com/project/encounters/) weekends, through which the Leeds-based dance development organisation brings together its diverse audiences to share performance, workshops, conversation and food.  Yorkshire Dance is hoping to receive proposals that fall under one or more of these strands:   * **Research** relating to the impact of dance with older people * **Performance** by older performers, or work created with older performers, or dance that represents age * **Innovation** in artistic practice happening locally, nationally and internationally with older people.   Hannah Robertshaw, Programmes Director at Yorkshire Dance, says, “We are keen to present a really diverse range of artistic voices and practices at AGELESS, and we’re really excited to hear from anyone who believes they’re breaking new ground in their dance practice or research.”  **Details of how to apply can be found here:** [**https://yorkshiredance.com/opportunity/ageless-call-for-contributors/**](https://yorkshiredance.com/opportunity/ageless-call-for-contributors/)  **Deadline: 9.00am, Friday 14 December 2018** |
|  |