

# Camden Health Action Zone (HAZ)

2005 – 2006

Priorities and guidance

Inequalities Commissioning Group  
February 2005



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## Camden HAZ

Health Action Zones (HAZs) aim to identify new ways of tackling health inequalities using a partnership approach co-ordinated by primary care trusts, to deliver on health inequalities targets. Camden HAZ has a local partnership, known as the Health Inequalities Commissioning Group, made up of representatives from Camden Primary Care Trust (PCT), London Borough of Camden (LBC) and Voluntary Action Camden (VAC), whom have agreed the priorities for Camden HAZ 2005-2006.

### **Priorities 05/06**

The two priorities for 05/06 have been taken from the Department of Health document 'Tackling Inequalities: A programme for Action' and the White Paper 'Choosing Health: Making healthier choices easier'.

#### **Priority 1 - Preventing illness and providing effective treatment and care**

Making certain that the NHS provides leadership and makes the contribution to reducing inequalities. This can be achieved through tobacco policies, improving primary care and tackling the "big killers" of coronary heart disease (CHD) and cancer.

There is a particular focus on meeting the priority by

- Developing smoking prevention and cessation services
- Improving nutrition through increasing access to and consumption of fruit and vegetables and increasing take up and length of breastfeeding
- Raising levels of physical activity
- Reducing illness and death caused by accidental injury
- Improving access to, and quality of primary care services
- Expanding early intervention services around psychosis with the aim of keeping young people in or helping them to return to education or employment
- Monitoring and improving the uptake of services in areas with high levels of illness but low referral rates.
- Preventing falls in older people through evidence based treatment and care and equalising access to services
- Working in partnership with other organisations/groups

#### **Priority 2 - Addressing the underlying determinants of health**

This priority deals with the long-term underlying causes of health inequalities using the methods outlined in "Choosing Health: Making healthier choices easier".

These methods are

- **Supporting informed choice for all**
- **Personalising support for people to be able to make healthy choices**
- **More effective working together to deal with all the factors that interact to determine health**

There is a particular focus on meeting the priority by

- Creating demand for healthy choices
- Tackling deprivation and disadvantage in childhood
- Local communities leading for health
- Supporting healthy choices with a focus on diet, physical activity, smoking, alcohol and sexual health
- Providing better training for health professionals
- Using workplaces as a setting to address health
- More commissioning of services out of the NHS
- Collaboration
- Joint local planning
- Involving the community in planning and delivery
- Using the evidence base or established good practice

## Bidding Process

### Overview

Bidding for HAZ funds is open to all statutory and non-statutory organisations wish to address health inequalities in Camden. An upper and lower limit has been set, with all applicants entitled to bid for amounts between £17,500 and £100,000.

There is a two-stage process to determine which bids will be funded. Initially all bids will be scored against four criteria and then the highest scoring bids will go to a partnership panel for a final decision. The panel will comprise of a representative from Camden Primary Care Trust, London Borough of Camden and Voluntary Action Camden.

### Criteria & Scoring

Bids will be assessed on the following criteria

- Meeting the HAZ priorities for 05/06
- Methodological strength
- Value for money
- Ability to deliver

Projects will be scored against of the above criteria on a scale of 0-2

**0** – does not meet the criteria

**1** – partially meets the criteria

**2** – fully meets the criteria

Thus each project will receive a final score out of eight.

The application has been designed to encourage applicants to address each of these criteria. The next section explains in more detail what evidence HAZ will be looking for in order to determine to what extent the proposal meets the above criteria.

### Timescales

Anyone wanting to apply for HAZ funds needs to return the application form by 5 p.m. on Friday 11<sup>th</sup> March to [Clare.Wilson@camdenpct.nhs.uk](mailto:Clare.Wilson@camdenpct.nhs.uk) and you will receive an email acknowledging receipt. Alternatively if you do not email facilities please post to

Clare Wilson – HAZ/NRF Project Manager  
4<sup>th</sup> Floor West Wing  
St Pancras Hospital  
4 St Pancras Way  
London, NEW1 0PE

## Completing The HAZ Application

### Section 1. General information

- 1.3 The total amount must be between £17,500 and £100,000.

### Section 2. Meets specified HAZ priorities

This information will also be used to check there is not a duplication (either geographically or by type) of work already on going in the borough.

- 2.1 Ensure the overview describes the project while clearly identifying how it addresses the relevant priority from this document.
- 2.2 The project should be targeted to address inequalities in health, therefore the project must be directed at a target group/ audience who are currently disadvantaged in relation to your priority area, **for example, BME groups, people with learning disabilities, low income groups etc.**
- 2.3 As some wards in Camden are more disadvantaged than others please specify where in Camden the project will take place, **for example, Holborn or Kilburn.**

### Section 3. Methodological Strength

It is important that HAZ funds projects that have been clearly thought through, are achievable and likely to be effective at tackling inequalities in health.

- 3.1 Please identify which priority, on page 2 of this document, the proposed project will address. This is to ensure you have considered whether your project does meet HAZ priorities, ticking the 'Both' box will not score you extra points.
- 3.2 Project aim(s)/impact should state overall what the project is trying to achieve. **For example, to increase the number of older people benefiting from exercise.**
- 3.3 Objectives need to feed into the aim(s), they should be SMART (Specific, Measurable, Achievable, Realistic, Time specific) laying out how you will reach your overall aim. **For example, Identify older peoples barriers to exercise, through partner organisations that have access to older people.** This example would only be possible if you have partnerships with these organisations (see 5.1).
- 3.4 Providing evidence of need for the project can be done by referencing published work or utilising information collected locally by your organisation or group.

- 3.5 To be able to evaluate you have to know what success will look like and then how will you be able to measure whether the project has achieved the intended success. **For example, Carry out an audit of exercise services to ascertain whether there has been an increase in the number of older people accessing them. Survey all participants over 60 years of age to see how they found out about the service, their attendance patterns before and after the project started, what restricts their attendance and whether they feel their health has improved as a result of attending.**

#### Section 4. Value for money

It is important that public money is used efficiently and therefore it is necessary that applicants explain why funding their project would be 'good value for money'.

- 4.1 Is the project able to demonstrate that its planned activity is based on evidence of good practice? Based on past work in other areas is this project likely to lead to improvements and the potential for cost savings. **For example smoking cessation for pregnant women using evidence based behaviour change models.**

- 4.2 Complete the financial plan identifying where the money you are bidding for will be spent. This will help to identify whether the project is most economically viable way of delivering this or could statutory/independent or voluntary sector organisations simply commission/provide/undertake the work at a lower cost.

- 4.3 Outputs should show what the project could deliver. This should be different from the aims and objectives that outline your overall goal and how the project will achieve this. **For example,**

**Aim/impact:** Tackle inequalities in health by reducing smoking rates in Camden

**Objective:** To establish specialist smoking cessation services for parents on low income

**Output:** 30 parents on low income quit smoking for 4 weeks

- 4.4 If this is an existing project please provide further relevant information in sections - 4.5 'value for money', and 5.1 'ability to deliver', about the duration of the project and its delivery history. Also is the project intended to be time limited or if it will need continued funding once HAZ funding finishes. If continuation of funding is required how are such funds going to be accessed and explain if any work has already been done to negotiate the necessary funds. It is important that a demand is not created for a service that cannot be sustained.

- 4.5 If you feel the other sections did not allow for the project to express how it will provide value for money use this space. This could include how the project utilises resources, **for example, the organisation already have**

- **access to and trust of the target audiences;**
- **a venue to deliver services,**
- **staff with the right skill mix.**

Is the project likely to lead to such things as, **for example**

- **service improvement from existing resources**
- **re-allocation of existing resources**
- **re-configuration of existing services**

## **Section 5. Ability to deliver**

Are you able to demonstrate that you can deliver what you have put in the bid?

5.1 This section allows you to provide supporting information/evidence to show your organisations/groups ability to deliver. **For example, track record of delivering similar services to the target group, or, project is based on good practice and has taken full account of potential risks to the project and is able to put in place systems to reduce those risks** (this would need to be backed up by the 'Project Plan' in Appendix 1)

5.2 If any of your planned activity requires other organisations participation – have you already got provisional commitment from them? If not you need to consider how you will achieve this commitment, whether there will be a cost implication and have you accounted for this in your financial plan? **Stating that you will approach, for example, the PCT once funding is agreed, will not be sufficient.**

**Note: NHS Financial Rules** do not allow for 'forward funding' of projects or 'roll-over' of funding across financial years. Therefore projects are bidding for funding till 31<sup>st</sup> March 2006. Delays (e.g. those bought about by recruitment problems) in the project do not alter this situation. Such issues need to be addressed in the project plan, including clear and realistic timetabling.