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# HEALTH AND WELL-BEING BOARD 13 SEPTEMBER 2016

# DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT

#### **Board Sponsor**

Cllr John Smith

## Author

Dr Frances Howie Director of Public Health

Priorities	(Please click below then on down arrow)
Older people & long term conditions	Yes
Mental health & well-being Obesity	Yes Yes
Alcohol	Yes
Other (specify below)	
Groups of particular interest	
Children & young people	Yes
Communities & groups with poor health outcomes People with learning disabilities	Yes No
<b>Safeguarding</b> Impact on Safeguarding Children If yes please give details	No
Impact on Safeguarding Adults If yes please give details	No

## Item for Decision, Consideration or Information

Consideration

## Recommendation

#### 1. The Health and Well-being Board is asked to:

- a) Note and discuss the content of the Annual Report of the Director of Public Health;
- b) Consider how the organisations represented on the Board might best respond to the recommendations of the report;
- c) Use the Compendium of Health Indicators in service planning and commissioning.

# Background

2. The County Council has a statutory duty to publish an Annual report produced by the Director of Public Health. In most previous years, the report has consisted of the summary of statistics from the Joint Strategic Needs Assessment which is presented to the Board each autumn. In 2014, a theme report was produced, focussing on Inequalities in Worcestershire, and was discussed by the Health and Well-being Board.

3. For 2015, a new style of two part Annual Report has been produced. The first part is a short narrative section on a chosen theme and the second is a compendium of statistics about the health of our population. It is expected that this will be an easier reference report for wide use by those planning and delivering services and this format will be repeated in future years.

## The Annual Report

4. The theme of the 2015 report is 'Ageing in Worcestershire', and this thematic part aims to give more detail behind the statistics of higher numbers of older people living in the county. It draws particular attention to:

- The difference between life expectancy and healthy life expectancy;
- The link between social deprivation and healthy life expectancy;
- The drivers of a healthy old age;
- The importance of a system wide approach to preventing unhealthy old age.
- 5. The key recommendations of the report are:
  - Recommendation one: that planners, elected members and health and social care leaders in Worcestershire commit to giving a higher priority to reducing the gap between life expectancy and health life expectancy during this next planning period.
  - **Recommendation two**: that planners and decision makers give more focus to the health impact of the planned environment, and especially in increasing the chances of a healthy old age.
  - **Recommendation three**: that health and social care leaders give more focus to helping people to help themselves, specifically by scaling up training to create a public health army; by building inclusive digital assets; and by systematising social prescribing.
  - **Recommendation four**: that health and social care leaders increase the availability of evidence based programmes such as lifestyle change; falls prevention; and physical activity, tailoring and focussing services on those who have the greatest need.
  - **Recommendation five**: that there be a shift of attitude, so that the fact of increased numbers of older people in Worcestershire is seen as a good news story, and growing older in Worcestershire is associated with long, healthy living, rather than an inevitable decline into dependency and ill-health. Older people should be seen as an asset in our County, and investment leading to an improvement in the quality of life for older people should be understood as an investment bringing real gain to us all.

6. The compendium of statistics brings together in one place a set of health-related indicators that are listed in other public websites. These data are the most recent available, and it is noted that some are several years behind real time. However, the compendium gives clear trend data so that patterns can be noted and predicted.

7. The indicators show that:

- Overall Worcestershire has good health outcomes
- However there is a general pattern of decreasing the gap between ourselves and England, particularly for the principle mortality measures
- Some measures of child health and those that influence child health indicate poor outcomes in Worcestershire, especially for the most vulnerable
- In particular performance is poor compared with England for smoking in pregnancy; breastfeeding initiation rates; and children with free school meals status who achieve a good level of development at the end of reception;
- Although local rates are in line with national averages, the indicators on excess weight in childhood are of concern, and the percentage of children living in poverty is unchanged;
- Some indicators for vulnerable older people such as fuel poverty and social isolation of carers show poor outcomes in Worcestershire
- Some measures of adult health indicate poor outcomes, in particular the excess weight indicator where we are significantly above the England rate. Rates of domestic abuse and violent crime show increases in the latest year's data although this may be due to better recording rates
- As with children, some other adult indicators are in line with national average, but are of concern in contributing significantly to the burden of ill-health in the County, and in particular to the burden of avoidable ill-health. These include inactivity, smoking, diabetes, hip fractures, injuries due to falls in those aged 80 years and over.

## Legal, Financial and HR Implications

8. There are none of relevance, other than meeting the statutory requirement to publish an Annual Director of Public Health report.

## **Privacy Impact Assessment**

9. Not of relevance.

## **Equality and Diversity Implications**

An Equality Relevance Screening has been completed in respect of these recommendations. The screening did not identify any potential Equality considerations requiring further consideration during implementation.

## **Contact Points**

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## **Supporting Information**

• Appendix Part Two of the Director of Public Health Annual Report 2015/16

#### **Background Papers**

In the opinion of the proper officer (in this case the Director of Public Health) the following are the background papers relating to the subject matter of this report:

Public Health England http://www.phoutcomes.info/