

TELFORD & WREKIN COUNCIL

HEALTH & WELLBEING BOARD – 17 JULY 2013

ANNUAL REPORT of the DIRECTOR of PUBLIC HEALTH for TELFORD and WREKIN 2012/13

REPORT OF INTERIM ASSISTANT DIRECTOR: HEALTH AND WELLBEING, TELFORD AND WREKIN COUNCIL

PART A) – SUMMARY REPORT

1. SUMMARY OF MAIN PROPOSALS

This report introduces the Annual Report of the Director of Public Health for Telford and Wrekin for 2012/13. It describes the background, highlights the key messages and sets out the recommendations.

2. FOR INFORMATION

- For endorsement

3. RECOMMENDATIONS

The Board is asked to fully endorse the eleven recommendations made in the Annual Report of the Director of Public Health for Telford and Wrekin 2012/13:

- **Recommendation 1:** As part of its performance framework, the Telford and Wrekin Health and Wellbeing Board should agree a set of metrics with which it will track the local impact of the economic situation (including benefits changes) on health and wellbeing, including health inequalities.
- **Recommendation 2:** Recognising that some of these actions are already in place, the Telford and Wrekin Health and Wellbeing Board should agree its programme of evidence-based interventions to minimise the impact of the economic situation on local health and wellbeing, including on health inequalities.
- **Recommendation 3:** In its role as the commissioner of maternity services for the local population and in partnership with lead clinicians, the Telford and Wrekin Clinical Commissioning Group should agree and specify the system of fetal growth monitoring at the Shrewsbury and Telford Hospitals NHS Trust, including the quality assurance of this system. Progress should be reported to the Health and Wellbeing Board, as part of the Clinical Commissioning Group's regular updates to the Board.

- **Recommendation 4:** As part of its vision that every child and young person will have a healthy lifestyle, the Telford and Wrekin Children, Young People and Families Board should review and agree its position on working in partnership with schools, to ensure that health issues remain a priority and to support the delivery priorities of the Telford and Wrekin Health and Wellbeing Strategy.
- **Recommendation 5:** The Telford and Wrekin Children, Young People and Families Board should monitor the impact of the Telford and Wrekin Child Unintentional Injury Strategy, including through analyses of local trends in hospital admissions following injury.
- **Recommendation 6:** The Telford and Wrekin Health and Wellbeing Board should lead local implementation of the national Cardiovascular Disease Outcomes Strategy. This will depend on a close partnership approach between the Council, Telford and Wrekin Clinical Commissioning Group, the NHS England Area Team and a range of provider organisations. The Board should take regular progress reports on this issue up to at least 2015.
- **Recommendation 7:** The Telford and Wrekin Health and Wellbeing Board should receive a local report on an annual basis from the West Midlands Cancer Intelligence Unit, encompassing cancer site-specific incidence, survival and mortality for the most common cancers. The main purpose of this arrangement will be to identify key actions to further improve outcomes from cancer in Telford and Wrekin. The first of these reports should be received by the Board no later than January 2014.
- **Recommendation 8:** The Telford and Wrekin Tobacco Control Commissioning Partnership should review its current strategy and action plan, to identify further opportunities to reduce smoking prevalence (including amongst pregnant women) in Telford and Wrekin, following migration of the public health function into the Council.
- **Recommendation 9:** The Telford and Wrekin Health and Wellbeing Board should ensure that the Telford and Wrekin Alcohol Misuse Strategy and its associated action plan is reviewed by lead officers from relevant partner organisations, with an updated strategy presented for approval to the Board during 2013.
- **Recommendation 10:** The Telford and Wrekin Health and Wellbeing Board should receive a report from Public Health England, by no later than September 2013, on plans to further improve 'flu immunisation rates in all target groups in Telford and Wrekin during the 2013/14 'flu season.
- **Recommendation 11:** The Telford and Wrekin Health and Wellbeing Board should receive a progress report on recommendations 1 to 10 of this Report by no later than January 2014.

1. **SUMMARY IMPACT ASSESSMENT**

COMMUNITY IMPACT	Do these proposals contribute to a specific HWB Priority?	
	Yes	The majority of Health & Wellbeing Board priorities are considered in the 2012/13 annual public health report
	Will the proposals impact on specific groups of people?	
	Yes	Health inequalities are considered throughout the report
TARGET COMPLETION/ DELIVERY DATE	The final recommendation suggests that the Board should receive a progress report on recommendations 1 to 10 of the Report by no later than January 2014	
FINANCIAL/VALUE FOR MONEY IMPACT	Yes	<p>The annual public health report is a key component of the joint strategic needs assessment and as such the intelligence should be used by the Local Authority and other partners, including the CCG to prioritise investment in order to improve health and wellbeing outcomes in the Borough.</p> <p>There is a need to develop measures to assess value for money and effective use of resources, mapping expenditure to performance. This will be developed in the near future to start to shape and inform the how well that investment is delivering results and to therefore determine future investment and budget strategy.</p>
LEGAL ISSUES	Yes	<p>The Health & Wellbeing Board has a statutory responsibility under section 2B of the National Health Service Act 2006 (as amended) which states “Each local authority must take such steps as it considers appropriate for improving the health of the people in its area”. The Director of Public Health’s annual report contributes towards meeting that responsibility and the recommendations demonstrate the proactive role that is expected. The aforementioned legislation contains a number of examples of what steps can be taken specifically such as “providing information and advice, providing services or facilities designed to promote healthy living (whether by helping individuals to address behaviour that is detrimental to health or in any other way) and providing services or facilities for the prevention, diagnosis or treatment of illness”. These steps can be seen in the recommendations set out in the annual report.</p>

LEGAL ISSUES (cont.)		In some of the recommendations in this report, there is a requirement that either an external organisation or other Board of the Council undertake certain actions. It will be a matter for those respective bodies to decide to complete those tasks and undertake the work required. If the Health & Wellbeing Board are minded to approve the recommendations officers can report back on the progress made and the Board can then decide if any other action is required if the actions set out in those recommendations have not been met.
EQUALITY & DIVERSITY	Yes	The annual report structure is based on the life-course approach, defined in the national Marmot Review of Health Inequalities i.e. starting well, developing well and living, working and ageing well. Equity issues are considered throughout the report.
IMPACT ON SPECIFIC WARDS	Yes	Health inequalities issues are identified in the report, including variations in our most deprived communities, such the targeted intervention areas
PATIENTS &/OR PUBLIC ENGAGEMENT	Yes	Personal stories of people who have used local public health programmes are described in <i>What the Participants Say</i> sections throughout the report
OTHER IMPACTS, RISKS & OPPORTUNITIES	Yes	The annual public health report identifies some key issues which are priorities for Telford and Wrekin CCG and the NHS England Shropshire and Staffordshire Area Team.

PART B) – ADDITIONAL INFORMATION

2. INFORMATION

2.1. Context

The Annual Public Health Report is an independent report of the Statutory Director of Public Health. The report continues to be a statutory requirement for Directors of Public Health in local authorities from April 2013. Section 31 of The Health and Social Care Act 2012 (amending the National Health Service Act 2006) requires the Director of Public Health to write an annual report on the health of the local population which the local authority has a duty to publish. The content and structure of the report can be determined locally.

2.2. Background

Telford and Wrekin Director of Public Health Annual Reports were published from 2002 when the Primary Care Trust was formed. During the past five years the reports have been joint publications with Telford and Wrekin Council. The reports describe the key health issues facing people living in the Borough and summarise the public health programmes and services in place to improve local health outcomes. Historically, the reports have in general covered a range of health issues across the population and life course, but on occasion have had a single subject focus.

2.3. Introduction to the 2012/13 report

The 2012/13 report has been developed with reference to the new national Public Health Outcomes Framework. The local positions on a wide range of health status measures across the four domains of the framework are presented in the annual report. Wherever possible, information on trends over time from the Joint Strategic Needs Assessment (JSNA) are included. The report structure is based on the life-course approach, defined in the Marmot Review of Health Inequalities¹ i.e. starting well, developing well and living, working and ageing well. The programmes and services which have been commissioned in Telford and Wrekin to improve the health and wellbeing outcomes of the population are described. The key links between poorer than average local status and the agreed health and wellbeing priorities in Telford and Wrekin are highlighted.

2.4. Public Health Outcomes Framework

The Board received an initial briefing on the new Public Health Outcomes Framework in April 2012. The framework, first published in January 2012, covers population health and wellbeing in its broadest sense, across the life-course. It aims to promote joint working across the NHS, local government, the voluntary sector and communities on shared goals to deliver improved health and wellbeing outcomes for the people and communities they serve. The Public Health Outcomes Framework consists of 68 indicators, two high-level vision outcomes; increased healthy life expectancy and reduced differences in life

¹ <http://www.instituteofhealthequity.org/>

expectancy and healthy life expectancy between communities. A further 66 indicators, set out in four domains across the life-course, have been selected to track progress towards delivery of these two outcomes. Baseline data were first nationally published in November 2012 but many of the indicators were already being monitored (using existing available data) through the Telford and Wrekin JSNA process.

2.5. Links with the Telford and Wrekin Joint Strategic Needs Assessment and the Health and Wellbeing Strategy

The Joint Strategic Needs Assessment process provides the evidence-base for the current and future health and wellbeing needs of the local population. In turn this should shape the strategic planning cycles for health and social care services, leading to agreement of commissioning priorities and associated funding to improve local health and wellbeing outcomes and reduce inequalities. The annual public health report provides detailed local intelligence on a wide range of public health outcomes and is therefore an important component of the JSNA process.

JSNA intelligence strongly underpinned the development of the first Telford and Wrekin Health and Wellbeing Strategy, including the agreement of the ten priorities. The majority of measures where poorer than average health and wellbeing outcomes have been identified through both the JSNA and the public health outcomes framework are discussed in the annual report. As such there is clear and strong alignment with the annual public health report, the JSNA process and the health and wellbeing strategy.

2.6. Longer Lives

Public Health England launched the Longer Lives mapping tool in June 2013. The tool compares premature mortality rates (early deaths under 75 years) for local authorities against the national average and other similar local authorities. The death rates used are standard indicators are part of the Public Health Outcomes Framework and also the NHS outcomes framework. These indicators have been used within the JSNA process to define our ten priorities. Trends over time for these rates are presented and discussed in the annual public health report. It was locally well recognised that Telford and Wrekin is an outlier (significantly worse than the average for England) for early death rates overall and also for premature mortality rates from cardiovascular diseases and cancer. These outcome measures form part of our “improving life expectancy and reducing health inequalities” priority.

2.7. Key Messages of the Annual Report of the Director of Public Health for Telford and Wrekin 2012/13

Some of the headline messages on the health status of the population of Telford and Wrekin include:

- Maternal smoking rates remain too high and breastfeeding rates are too low
- Childhood immunisation rates have tended to improve significantly over recent years and rates are generally good, from the earliest childhood immunisation to immunisation for cervical cancer in teenage girls

- Excess weight amongst 4 to 5 year olds has been reducing significantly. The position for 10 to 11 year olds has deteriorated, but is not significantly different to the national average
- Although the position remains worse than the national average, teenage pregnancy rates have been improving and the rate of improvement since 2009 is particularly encouraging
- There are 6,000 fewer adult smokers than a decade ago, although around 32,000 adults still smoke. Smoking-related hospital admissions and smoking-related deaths are both relatively high
- Premature mortality (deaths under 75 years) from cardiovascular disease has been improving over the past 20 years or so, as is the case nationally. However, the local rate remains significantly worse than the national average
- Over recent years, premature mortality from cancer has not been improving in line with the national trend, although premature mortality from cancers considered preventable may not be significantly different from the national average
- Cardiovascular disease and cancer remain the most significant causes of premature mortality
- Although rates are better than the national average, hospital admissions due to alcohol-related conditions have been increasing
- Improvement in male life expectancy has been tailing off and is now significantly worse than the national average
- As expected, there are socioeconomically determined inequalities in life expectancy within Telford and Wrekin. However, compared to other Local Authorities, Telford and Wrekin performs relatively well on this measure and there is some evidence that the 'gap' within Telford and Wrekin has been narrowing, for both male and female life expectancy.

3. PREVIOUS MINUTES

- Health & Wellbeing Board Meeting 15th May 2013
- Shadow Health & Wellbeing Board Meeting 25th April 2012

4. BACKGROUND PAPERS

- Annual Report of the Director of Public Health for Telford and Wrekin 2012/13

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