



*Although a formal committee of the city council, the Health & Wellbeing Board has a remit which includes matters relating to the Clinical Commissioning Group (CCG), the Local Safeguarding Board for Children and Adults as well as Healthwatch. Papers come from a variety of sources. The format for Health & Wellbeing Board papers is consequently different from papers submitted to the city council for exclusive city council business.*

## **1. Annual Report of the Director of Public Health 2016/17**

- 1.1. The contents of this paper can be shared with the general public.
- 1.2 This paper is for the Health & Wellbeing Board meeting on the 11<sup>th</sup> July 2017
- 1.3 Author of the Paper and contact details Dr Peter Wilkinson, Acting Director of Public Health. [peter.wilkinson@brighton-hove.gov.uk](mailto:peter.wilkinson@brighton-hove.gov.uk)

## **2. Summary**

- 2.1 Directors of Public Health are required to produce an annual report on the state of local public health. There are no specified requirements as to the content or format of the report.
- 2.2 This year's Report "Living well in a healthy city" focuses on prevention.
- 2.2 This report covers the period 2016/17.
- 2.4 The Acting Director of Public Health will make a brief presentation on the report.

## **3. Decisions, recommendations and any options**

- 3.1 That the Board note the report.

## **4. Relevant information**

- 4.1 This year's Report "Living Well in a Healthy City" looks at the contribution prevention can make to improving local health and

wellbeing. Prevention is one of the key priorities of Caring Together (the local place based component of the Sustainable and Transformation Partnership plans).

- 4.2 The Report provides background information to the significant challenges local health and social care services are facing. This includes information about how the population is changing, in terms of numbers and overall health and wellbeing.
- 4.3 The Report provides information on the increasing number of people living with long-term conditions and the resource use associated with these including hospital admissions and long-term adult social care support. The Report applies the evidence base to highlight how prioritising prevention will improve health and wellbeing as well as reducing the demand on health and social care services.
- 4.4 The role of prevention in improving health and wellbeing is considered across the life course together with examples of ongoing work and what more could be done locally.
- 4.5 Increased action to prevent falls and reducing social isolation are identified as key areas for improving the health and wellbeing of older people.
- 4.6 For all adults there are many ways to improve health and wellbeing including being more active, drinking in moderation and looking after our mental health. The mutual relationship between good physical and good mental health and wellbeing is considered in several sections of the report. Circulatory disease accounts for a quarter of all deaths in Brighton & Hove. Improving the identification and treatment of cardiovascular risk factors will provide both short and long-term benefits for patients and services.
- 4.7 The chapter on children and young people includes information about the Healthy Child and Public Health Schools programmes. This chapter has information about the relatively lower local childhood immunisation coverage and the very high rates of smoking and use of alcohol and cannabis amongst local 15 year olds.
- 4.8 The report ends with a chapter on improving health and wellbeing through a place based or community based approach which includes sections on developing a healthy city.
- 4.9 There are 12 recommendations to inform work across the City aimed at improving health and wellbeing.

- 4.10 Although this report covers a range of action across both public health and the rest of the council, as well as NHS and CVS partners, it is not an exhaustive list of all the prevention work being done locally either within the council or across the city by both the statutory and non-statutory sectors. The report's main aim is to demonstrate some of what prevention could achieve if given the focus, resource and time to deliver.
- 4.11 The Board is asked to note the Report.

## **5. Important considerations and implications**

### **Legal:**

- 5.1 The NHS Act 2006 and the Health and Social Care Act 2012 requires Directors of Public Health to write an annual report on the health of their local population. The content and structure of the report can be determined locally.

Lawyer consulted: Natasha Watson Date: 12 June 2017

### **Finance:**

- 5.2 There are no direct financial implications from the recommendations of this report. The total Public Health budget for this financial year is £22.150m of which £20.619m comes from the ring-fenced Public health grant for 2017/18, other funding comes from agreed carry forward of grant from 2016/17 and some non-grant funding.

Finance Officer consulted: Dave Ellis Date: 13 June 2017

### **Equalities:**

- 5.3 Where appropriate the report highlights local inequalities

### **Sustainability:**

- 5.4 None identified

### **Health, social care, children's services and public health:**

- 5.5 The Annual Report is relevant to all age groups and services.

## **Supporting documents and information**

- 6.1 Annual Report of the Director of Public Health 2016/17.



