

HEALTH AND WELLBEING BOARD

7 NOVEMBER 2017

JOINT HEALTH AND WELLBEING STRATEGY: MONITORING REPORT

Report from: James Williams, Director of Public Health

Author: Dr David Whiting, Consultant in Public Health

Summary

The purpose of this report is to provide an update to the Board on key Joint Health and Wellbeing Strategy (JHWS) indicators.

1. Budget and Policy Framework

- 1.1 The Health and Social Care Act 2012 places a duty on Health and Wellbeing Boards to produce a Joint Health and Wellbeing Strategy for their local area. Implementation and monitoring of the strategy and the strategy outcomes are on-going.

2. Background

- 2.1 The HWB has responsibility to ensure that robust performance and quality monitoring measures are in place with regard to the implementation and outcomes for the JHWS. The monitoring and outcomes framework for Medway's JHWS includes monitoring of outcomes taken from the National Outcomes Frameworks for the NHS, Social Care, Public Health and Children which are aligned to the Medway Joint Health and Wellbeing Strategy 2012-17. A report on key JHWS outcome indicators is attached as appendix 1.

3. Advice and analysis

Key points to note:

- 3.1 Smoking
- a. Smoking at time of delivery continues to be high. Despite considerable efforts from the service to support women to quit during pregnancy, this is the fourth continuous quarterly increase. A draft local Maternal Smoking Strategy to recover the position has been developed. This strategy has a specific action plan requiring partners (specifically maternity services) to fully engage and support the efforts of the specialist stop smoking service. Once all partners have approved it the

strategy will come to the health and wellbeing board for formal approval.

- b. Smoking prevalence (18+) has remained persistently high and recently there has been a rise in the rate of smoking in routine and manual workers.

3.2 Healthy weight and physical activity

- a. Obesity rates in children in Reception year have fallen consistently over the last seven years (see page 8).
- b. After dipping for two years, obesity rates in children in year 6 have risen above the national average in the last two years (see page 9). This may be an effect of higher Reception year rates six to seven years ago. National analysis has shown a similar rise and a link with deprivation and the Public Health team will conduct further analysis to determine if the same pattern is seen in Medway.
- c. The Public Health Outcomes Framework indicator on the use of green spaces has shown a substantial improvement in use of green spaces in Medway (see page 24).

3.3 Immunisation

- a. High immunisation rates are important to maintain “herd immunity” whereby the number of people who are immunised is large enough to make transmission of disease much less likely. Until 2013/14 immunisation rates in Medway were better than the national average. In 2013/14 responsibility for immunisation moved from Primary Care Trusts to NHE England and other providers. From this point immunisation rates appear to have fallen dramatically (see pages 11-13). Medway Council’s public health team is ensuring appropriate assurance and directly assisting NHS England and Medway CCG to increase immunisation uptake by: i) establishing a Medway immunisations Board; ii) directly working with partners to increase immunisation for specific programmes, e.g. flu vaccination; and iii) undertaking additional analysis of children’s vaccination data using Medway primary care data.

3.4 Premature mortality

- a. After eight years narrowing the gap in circulatory disease mortality under the age of 75 between Medway and England the gap now appears to be increasing (see page 21). The NHS Health Checks programme is an important part of addressing CVD mortality and the Public Health team will be launching a service to provide NHS Health Checks at the Smoke-free Advice Centre in the centre of Chatham on the 14th November 2017. Addressing the risk factors related to CVD is a central strand of the Kent and Medway STP and a specific priority for Medway.
- b. The cancer mortality rate has been persistently higher in Medway than the national average and the gap appears to be getting slightly worse over time (see page 22). Many cancers (and CVD mortality) are amenable to lifestyle interventions and the Public Health team is working with primary care teams to increase smoking cessation, reduce alcohol consumption and improve healthy weight. In October Public Health England published the PHE Cancer Board five year plan and Medway’s Public Health team will be working with PHE to deliver the

plan as part of the Kent and Medway STP work.

3.5 Joint Health and Wellbeing Strategy refresh

- a. The refresh of the Joint Health and Wellbeing strategy (JHWS) is currently being undertaken. Community engagement events are being planned with Medway CCG around the Medway Model and the insights gathered from these events will help to inform the development of the updated strategy.

4. Risk management

Risk	Description	Action to avoid or mitigate risk
Lack of clarity as to progress on health and wellbeing outcomes.	Monitoring and outcomes frame work not sufficiently robust so unclear if progress is being made.	Regular progress reports to the Board.

5. Financial and legal implications

- 5.1 There are no financial or implications arising directly from the contents of this report.
- 5.2 HWBs are committees of the Local Authority, with non-executive functions, constituted under the Local Authority 1972 Act, and are subject to local authority scrutiny arrangements.
- 5.3 There are no direct legal implications arising to Medway from the recommendations set out in this report.

6. Recommendations

- 6.1 The Health and Wellbeing Board is asked to consider the indicator updates.

Lead officer contact

Dr David Whiting, Consultant in Public Health
Telephone: 01634 332636 E-mail: david.whiting@medway.gov.uk

Appendices

Appendix 1 - Indicator report

Background papers

Medway Clinical Commissioning Group, NHS Commissioning Board and Medway Council, 2012 - *Joint Health and Wellbeing Strategy for Medway 2012-2017*