

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

16 OCTOBER 2018

DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2017-18

Report from: James Williams, Director of Public Health

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Summary

This report presents the Director of Public Health's Annual Report for 2017-18. The theme of the report is health protection - Protecting the Health of Medway's Population: now and for the future. The Committee is asked to note the report, findings and recommendations.

1. Budget and Policy Framework

- 1.1 Health protection work contributes to local priorities including: Medway Joint Health and Wellbeing Strategy priorities: 1) enabling our older population to live independently and well and 2) preventing early death and increasing years of healthy life. Health protection also contributes to Medway Council Plan priority: healthy and active communities.

2. Background

- 2.1 Directors of Public Health (DsPH) have a statutory requirement to produce public health reports. These reports are the DsPH's professional statement about the health of the local community and usually focus on a specific health topic or theme.
- 2.2 The report is intended to provide advice and recommendations on population health to both professionals and the public. It can be used to identify key issues and priorities, report on progress and engage the community and other stakeholders on specific issues. Report recommendations can be directed towards the Council itself or towards partners and stakeholders.

3. Advice and analysis

- 3.1 The theme for the 2017-18 Public Health report is health protection. The report focuses on issues that have had a significant impact on the population and where action needs to be taken to address future challenges to the public's health. It is titled: "Protecting the Health of Medway's Population: now and for the future".
- 3.2 Previous Director of Public Health Reports in Medway have focused on topics including: the health of school aged children, health of the older population and the health of Medway's youngest children.
- 3.3 The 2017-18 health protection report addresses nine key areas of health protection. These are: 1. Infectious diseases and food-borne illness, 2. Seasonal influenza, 3. Screening, 4. Emergency preparedness, 5. Sexual health and blood-borne viruses, 6. Health care associated infections, 7. Air quality, 8. Tuberculosis, 9. Vaccinations.
- 3.4 For each health protection area, the report examines four key questions:
- 1) What is the current situation in Medway?
 - 2) What are partners doing to protect the health of Medway's population?
 - 3) What can people in Medway do to protect their health?
 - 4) What are the areas to focus on in the future?
- 3.5 The report also includes case studies illustrating good practice in Medway around health protection. Based on the findings relating to the four questions above, the report then makes recommendations for each topic.
- 3.6 The Director of Public Health Annual Report 2017-18 is set out at Appendix 1 and a summary of recommendations is set out at Appendix 2.
- 3.7 The Director of Public Health Annual Report 2017-18 has previously been presented to the Health and Wellbeing Board and will also be presented to the Cabinet. Comments made by this Committee will be reported to Cabinet via an addendum report.

4. Health and Wellbeing Board – 3 July 2018

- 4.1 The report was presented to the Health and Wellbeing Board on 3 July 2018. The minutes of the discussion were as set out in paragraphs 4.2 to 4.12.

4.2 Discussion

The Director of Public Health presented the Director of Public Health's Annual Report for 2017-18 and explained to the Board the theme of this year's report was health protection. It was noted that the report was a retrospective evaluation of the previous year and that the report addressed nine key areas of health protection, which were:

1. Infectious diseases and food-borne illness;
2. Seasonal influenza;

3. Screening;
4. Emergency preparedness;
5. Sexual health and blood-borne viruses;
6. Health care associated infections;
7. Air quality;
8. Tuberculosis; and
9. Vaccinations.

- 4.3 It was added that these issues had a significant impact on the population and were areas where action was required to address future challenges to Medway's health.
- 4.4 The Board's attention was drawn to the case studies within the report which illustrated good practice and the recommendations for system wide improvement and ideas on what people in Medway could do to protect their health.
- 4.5 In response to a comment about the different emphases of the recommendations i.e. to continue good practice versus stating something must or should happen, it was recognised by the Director of Public Health that wording of the recommendations had varied. He stated that the report was an amalgam of activity from a range of partners and that some areas of work had progressed well and further improvement should be encouraged to continue. He added that the report included Specific, Measurable, Achievable, Relevant and Time-bound (SMART) targets. He undertook to provide the Member with more detailed action plans in relation to the targets.
- 4.6 A Member expressed the view that the recommendations should be more positive in nature, for example the recommendation should actively encourage a specified action.
- 4.7 Clarification was sought regarding actions parents and schools should take when a child contracted norovirus, particular reference was made to schools requesting children visit their GP to obtain a sick note. In response, it was explained to the Board that the Public Health team had previously issued schools with guidance on the topic. This guidance advised schools that they should not request a sick note from a child absent from school as a result of norovirus, as it was recommended that the child does not visit their GP. The guidance also signposted schools to the School Health team which could offer further support. The elected Clinical Member, NHS Medway Clinical Commissioning Group added that there was a drive to promote self-care for self limiting illnesses and to encourage individuals to manage common illness in the home. In preparation for this year, the Director of Public Health undertook to issue further guidance to schools and at the request of a Member, he agreed to include this guidance within Medway Matters.
- 4.8 A member commended the 2017/18 Annual Report, principally the emphasis on health protection as this suggested health was the responsibility of Medway as a whole. The view was reiterated that Medway needed to be healthier by design and health and wellbeing embedded into strategic thinking.

- 4.9 In response to questions concerning how the Council could promote healthy choices, including hydration, the Board was advised that at the most recent Kent and Medway STP prevention workstream meeting, the issue of promoting healthier options in vending machines was discussed. The Board was also advised that Medway Council's Communications team were undertaking a project to increase access to water in local venues. It was suggested that Members of the Board might like to make a pledge towards a particular healthy choice.
- 4.10 In response to a question seeking an understanding of the true percentage of the Medway population taking up the offer of HIV testing i.e. comparing the rate of individuals requesting testing in Medway to national data, the Director of Public Health undertook to provide the benchmarked data to the Member.
- 4.11 At the request of the Member, the Director of Public Health undertook to liaise with Healthwatch Medway to present more widely the key information within the Annual Report.

4.12 **Decision**

The Health and Wellbeing Board noted this report, findings and recommendations.

5. Risk management

- 5.1 Risks relating to health protection are managed by a range of different partners, based upon the roles and responsibilities of different organisations and the nature of the risk. A key document relating to health protection risks is the Kent (and Medway) community risk register. Partners in the Kent Resilience Forum (including Medway Council) develop and maintain this register. The register assesses potential hazards in the local area and informs partners' emergency planning.

6. Consultation

- 6.1 A wide range of partners involved in health protection have contributed to the report, both from Directorates across the Council and external partners including NHS England, Public Health England and Medway Clinical Commissioning Group.
- 6.2 The report and recommendations is being shared with relevant Council committees, partners and the public, including being made publically available on the Council's website.

7. Financial implications

- 7.1 There are no financial implications for Medway Council arising directly from this report.

8. Legal implications

- 8.1 Medway Council and partners have a number of statutory roles around health protection, as outlined in the report (Appendix 2). For example, the Council has statutory duties around emergency preparedness.
- 8.2 The Director of Public Health has a statutory duty to write an annual report, and the Local Authority has a statutory duty to publish it (section 73B (5) & (6) of the 2006 NHS Act, inserted by section 31 of the Health and Social Care Act 2012).

9. Recommendation

- 9.1 The Committee is asked to:
- i) Consider the comments of Health and Wellbeing Board.
 - ii) Note the Director of Public Health's Annual Report for 2017-18, in particular its findings and recommendations.

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Appendices

Appendix 1 - "Protecting the Health of Medway's Population: now and for the future"
– Director of Public Health's Annual Public Health Report 2017-18

Appendix 2 – Summary of Recommendations from the Annual Public Health Report

Background papers

None.