

## **Cabinet**

**9 April 2024**

### **“Power of the Crowd” Annual Report of the Director of Public Health 2022 - 2023**

Portfolio Holder: Councillor Teresa Murray, Deputy Leader of the Council

Report from/Author: James Williams, Director of Public Health

#### **Summary**

Directors of Public Health (DsPH) have a statutory requirement to produce an annual public health report (APHR). These reports are the DsPH’s professional statement about the health of the local community.

The 2022-23 report focuses on the challenge and benefits that can be gained from investing more effort into community engagement and the development of local networks. It provides examples of successful outcomes in terms of physical and emotional health and wellbeing for local people through this approach. The report evidences the opportunities to improve population outcomes and reduce expenditure on health, social care and related services. The primary recommendation is that more needs to be done to empower communities to build upon, and use, local resources and assets.

This report was considered by the Health and Wellbeing Board on 15 February 2024, the minutes of which are set out at section 7 of this report below. The report is also due to be considered by the Health and Adult Social Care Overview and Scrutiny Committee on 18 June 2024.

#### **1. Recommendation**

1.1. The Cabinet is asked to note the Annual Public Health Report 2022/23.

#### **2. Suggested reasons for decision**

2.1. There is a statutory duty for Directors of Public Health to produce an Annual Report and Local Authorities to publish the report.

### 3. Budget and policy framework

- 3.1. Tackling inequalities and improving health and wellbeing services for all, is an identified priority within the forthcoming 'One Medway' Council Plan 2024-2028.
- 3.2. Additionally, the refreshed Medway Joint Local Health and Wellbeing Strategy for 2023-2028 has 4 key themes:
  - Healthier and Longer Lives for Everyone
  - Reduce Poverty and Inequality
  - Connected Communities and Cohesive Services
  - Safe Connected and Sustainable Places
- 3.3. This Annual Public Health Report highlights specific issues that have impacted on the Medway community in the past few years. It describes actions taken by local people, in particular the voluntary community and faith sector, to deal with a range of challenges. It is often said 'prevention is better than the cure'. This APHR reinforces the benefits of understanding the needs of communities and enabling people to do more for themselves. In doing so, we can equip people better to cope with adversity and challenges to their health and wider economic wellbeing.
- 3.4. The report reflects the recent challenges the Medway population has faced. This includes the Covid-19 pandemic and action taken to support more marginalized communities to reduce their risk of illness and disease. There is also a focus on how local people can be better supported to cope with the impact on their physical and mental wellbeing associated with the cost of living pressures.

### 4. Background

- 4.1. Directors of Public Health have a duty to write an Annual Public Health Report. The aim of an Annual Public Health Report is to identify issues that are currently impacting, or have the potential to, on the health or wellbeing of the local authority's population. Directors of Public Health are tasked with making recommendations to address identified issues.
- 4.2. The primary focus of this report (attached at Appendix 1) is the benefit of tapping into the large reservoir of community assets, in terms of people, support networks and organisations and physical resources that exist in Medway.

### 5. Options

- 5.1. Publishing an Annual Public Health Report is a requirement of the Health and Social Care Act 2012. This report focuses on how statutory organisations can work differently with local communities. By changing the way we think about interacting with our population and investing more energy into empowering them; we can create more capacity through enabling people themselves to resolve issues, without the need for any statutory services input. This approach will help address inequalities. It can also assist in making services

more responsive and accessible for those truly in need. It can help to build more resilience in our most disadvantaged areas, reducing the health and societal impacts of a future major event such as a pandemic or cost of living crisis.

## 6. Advice and analysis

6.1. The Annual Public Health Report sets out a number of recommendations to be considered by all stakeholders and partners to improve the way we engage with people who are most disadvantaged. It highlights the longer term benefits of investing in our community and the opportunities that exist to transform the way in which services are delivered, including a shift away from historical delivery models. There are a number of recommendations arising from this report:

6.1.1. **Multi-sectoral collaboration-** to improve health and wellbeing, this should be informed by the principles of community development, in particular an assets-based approach.

6.1.2. **The Medway Health and Wellbeing Board** should receive an annual update setting out progress on capacity building and the empowerment of community members as champions, volunteers, advisors, and advocates as part of the A Better Medway Champions programme.

6.1.3. **All stakeholders responsible for the commissioning or provision of services to the population of Medway-**should utilise a needs based approach to service delivery. They should tailor interventions and support to priority groups in line with recommendations set out in the Medway Joint Strategic Needs Assessment (JSNA), and the NHS England Core20Plus5 Inclusion Health Framework.

6.1.4. **Those working with marginalised and under resourced communities-**should review and reflect on whether to adopt the innovative communication and engagement campaign and models utilised by the Medway Can, Joint Local Health and Wellbeing Strategy Refresh and Health Determinates Research Collaboration programmes.

6.1.5. **A robust evaluation framework to guide continuous improvement** should be put in place at the initial scoping stage of initiative. This will help support our overall aspirations to use the Medway Health Determinate Research Collaboration (HDRC) to help capture and share our learning.

## 7. Health and Wellbeing Board

- 7.1. The Health and Wellbeing Board considered the report on 15 February 2024 and the minutes of this are set out below:
- 7.2. The Director of Public Health introduced the report which detailed the outcomes and achievements through various initiatives, community engagement and development of local networks to improve the health and wellbeing of the Medway population.
- 7.3. The report sets out how the community had been supported and enabled to improve their health and wellbeing. It described the manner in which local communities were able to access additional resources which included training and facilities. This investment has led to an increase in local capacity and capabilities. There was now much more collaboration between community and statutory organisations, which has helped to address so longstanding issues.
- 7.4. There was an update on the recommendation of the Annual Public Health Report of 2021/22 which focused on Hypertension. It was reported that Medway was now the 2<sup>nd</sup> highest Local Authority in the South East Region for NHS health check uptake. This had been achieved through extensive engagement work with local primary care teams, pharmacists and specially trained volunteers, who acted as an interface with the community. It was reported that 180 strokes and 120 heart attacks had been avoided across Kent and Medway. The health service savings amounted to £4.9million, and £1.6million social care costs avoided. The A, Better Medway Public Health programme had over 16,000 contacts with local residents in the last year.
- 7.5. There was an improvement in reduction of Obesity rates in children in Medway. This has been achieved through the delivery of interventions and engagement with local community groups, early years providers, childminders and schools under the 'Medway Can' approach. The 'Medway Together' programme continued to create opportunities to facilitate engagement and the building of trust through its social isolation work. The Medway Food Partnership provided tools for the community to address inequalities experienced through the cost of living crisis and tackle food poverty.
- 7.6. It was encouraging to reflect on what was possible and what more could be done in the future to further support the Medway community.
- 7.7. The Chief Executive Officer, Medway Voluntary Action added that the voluntary sector was proud to be involved and be a champion for many of the initiatives that were taking place across Medway and encourage partners to lobby for initiatives to be longer rather than short term. The Director of Public Health acknowledged that there was a challenge with resources and recognised the need for the continuity of initiatives.

## 7.8. Decision:

1. The Board noted the Annual Public Health Report 2022/2023.
2. The Board recommended that Partners consider as part reviews currently being undertaken for funding of projects, funding for longer term initiatives.

## 8. Risk management

Risk	Description	Action to avoid or mitigate risk	Risk rating
Not reducing implementing community engagement principles in Medway	Engaging with community members and providing them with tools to further support their family, friends and neighbours, is key to reducing health inequalities. Inequalities are unfair and avoidable differences in health across the population.	Adopt the recommendations set out in the report	DII

Likelihood	Impact:
A Very likely B Likely C Unlikely D Rare	I Catastrophic II Major III Moderate IV Minor

## 9. Consultation

- 9.1. In common with previous Annual Public Health Reports, evidence is gained from a number of different sources. Once finalised, the report and its recommendations will be shared with a range of organisations and committees. The report will also be presented to a range of council committees. These include the Health and Wellbeing Board, Health and Adult Social Care Overview and Scrutiny Committee and Cabinet.

## 10. Financial implications

- 10.1. Any resources required to deliver ambitions set out in this report will be found through existing service or organisational budgets.

## 11. Legal implications

- 11.1. The Annual Public Health Report is an independent report of the Director of Public Health as set out in Section 73B(5) & (6) of the NHS Act 2006, inserted by section 31 of the Health and Social Care Act 2012. Local Authorities are required to publish the Director of Public Health's Annual Public Health Report.

## Lead officer contact

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## Appendices

Appendix 1 – Annual Public Health Report 2022/23.

Appendix 2 - APHR 21/22 One year on update – Hypertension Tackling the Silent Killer

## Background papers

None