

ANNUAL PUBLIC HEALTH REPORT

To: **Health Committee**

Meeting Date: **12th May 2016**

From: **Director of Public Health**

Electoral division(s): **All**

Forward Plan ref: **Key decision: No**

Purpose: **To present the Annual Public Health Report (2015/16) to the Health Committee**

Recommendation: **The Committee is asked**

- **to consider the information outlined in the Annual Public Health Report**
- **to endorse the approach recommended in the Report of engaging with the three tiers of local government and the voluntary/community sector, to understand how we can best work with local communities to improve health building on activities and assets which already exist at local level.**

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1. BACKGROUND

- 1.1 The Health and Social Care Act (2012) includes a requirement for Directors of Public Health to prepare an independent Annual Public Health Report (APHR) on the health of local people.
- 1.2 Last year the APHR (2014/15) focussed on the changes and trends in public health outcomes over recent years. It identified three new opportunities for public health action:
 - A focus on promoting the health of school age children, including mental health
 - A whole system approach to healthy diet and physical activity – reversing the trend in obesity
 - Supporting a positive approach to healthy ageing
- 1.3 The Annual Public Health Report 2015/16, attached as Annex A, updates progress against the opportunities for action identified in the APHR (2013/14) and the APHR (2014/15).

2. MAIN ISSUES

- 2.1 The Annual Public Health Report (2015/16) recognises that many of the factors which affect people's health exist at a very local level, based on the opportunities and lifestyles in the communities where we live. The report focusses on issues at this local level – providing health 'maps' of the County broken down into individual electoral wards. It also provides case studies of what is being done at the moment in communities in Cambridgeshire to support healthy lifestyles and wellbeing.
- 2.2 It is recommended that there should be a focus over the coming year on engagement with all three tiers of local government and with the voluntary and community sector, to understand how we can work with communities to improve health, building on activities and assets which already exist at local level.
- 2.3 The APHR (2015/16) has been laid out to be easily read by a range of audiences, and hard copies will be distributed to County Councillors, MPs, District Councils, GP surgeries, libraries and secondary schools. It will also be publicised internally and externally on the relevant websites.
- 2.4 Special thanks are due to Senior Public Health Analyst Helen Whyman and Public Health Analyst Elizabeth Wakefield for their work on the report.

3. ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

The APHR provides information relevant to the health of the local workforce, which in turn impacts on productivity and the local economy.

3.2 Helping people live healthy and independent lives

The APHR provides information relevant to helping people live healthy and independent lives.

3.3 Supporting and protecting vulnerable people

The APHR provides a range of information relevant to vulnerable groups, including children and young people, people with mental health problems, people with disabilities, and older people.

4. SIGNIFICANT IMPLICATIONS

4.1 Resource Implications

There are no immediate resource implications from the APHR, although the recommended engagement process may require some future redirection of resources alongside service transformation.

4.2 Statutory, Risk and Legal Implications

Preparation of an independent Annual Public Health Report is a statutory duty of the director of public health.

4.3 Equality and Diversity Implications

There is information provided in the APHR about health inequalities in Cambridgeshire.

4.4 Engagement and Consultation Implications

The APHR recommends a process of engagement with all three tiers of local government and the voluntary/community sector as to how to best work with local communities to improve health.

4.5 Localism and Local Member Involvement

The APHR recommends an approach which involves local Members and communities.

4.6 Public Health Implications

These are covered in the main body of the report.

Source Documents	Location
Annual public health report (2014/15)	http://www.cambridgeshireinsight.org.uk/health/aphr