

**ANNUAL PUBLIC HEALTH PERFORMANCE REPORT (2017/18)**

*To:* **Health Committee**

*Meeting Date:* **May 2018**

*From:* **Director of Public Health**

*Electoral division(s):* **All**

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

*Purpose:* **To present the Cambridgeshire Annual Public Health Performance Report**

*Recommendation:* **The Committee is asked to note the information in the Annual Public Health Performance Report (2017/18).**

<b><i>Officer contact:</i></b>		<b><i>Cllr Contact</i></b>
Name:	Liz Robin	Name: Cllr Peter Hudson
Post:	Director of Public Health	Post: Health Committee Chair
Email:	Liz.robin@cambridgeshire.gov.uk	
Tel:	01223 703261	

## **1.0 PURPOSE**

- 1.1 The Annual Public Health Performance Report (2017/18) provides a summary of performance against the main public health contracts and deliverables over the past year.

## **2. MAIN ISSUES**

- 2.1 Performance of services commissioned by the Public Health Joint Commissioning Unit is outlined in Annex A. These include sexual health and contraception services; drug and alcohol services; integrated lifestyle services and public health services commissioned from primary care providers (GP practices and pharmacies).
- 2.2 Performance of public health services commissioned by the Children's Health Joint Commissioning Unit is outlined in Annex B. These include health visiting, school nursing and family nurse partnership services.
- 2.3 Performance of local Health Protection services, which are provided by a range of organisations, was described in the Annual Health Protection Report (2017) which was presented to the Health Committee in May 2018.
- 2.4 Performance of the mandated Healthcare Public Health Advice service to local NHS commissioners is described in a separate paper to this meeting of the Health Committee. This report also makes reference to joint projects with the NHS delivered through the Sustainable Transformation Partnership (STP) such as the jointly funded STP falls prevention, stroke prevention and suicide prevention programmes, and projects delivered through the CCG such as the National Diabetes Prevention Programme (NDPP).
- 2.5 Performance of public health grant funded services provided by other County Council Directorates through the Public Health Memorandum of Understanding arrangements is described in detail through the PHMOU Q4 report in Annex 7 of the May Finance and Performance Report, also on the agenda for this meeting.
- 2.5 A range of other services are either directly delivered or commissioned by the Public Health Directorate, which are not included in the performance reports outlined above. Examples of these are listed below and further information is available on request.

### **2.5.1 Public health strategy development and implementation**

The focus during the past year has been on

- Suicide prevention strategy
- Healthy weight strategy
- Public mental health strategy

### **2.5.2 Partnership working**

- Public Health staff worked in partnership with other directorates within the County Council and with external partnerships to provide public health input and analysis. These included

- Health and Wellbeing Board (lead officer)
- Place based Living Well Partnerships
- Safeguarding Boards
- Child Death Overview Panel
- Vulnerable Children's Board
- County-wide Community Safety Strategic Board
- Drug and alcohol delivery board (Chair)
- Sexual health delivery board (Chair)
- Mental health commissioning board
- Integrated Commissioning Board (BCF oversight)
- Healthy Ageing Board (Chair)
- Local Nature Partnership
- Road Safety Partnership
- Cambridge Biomedical Campus Transport Study Working Group
- NHS Northstowe Healthy New Town Programme

### **2.5.3 Public Health advice on environment, transport and planning issues**

- Review of public health implications of papers to E&E, H&C and C&I Committees (over 60 papers in 2017/18), with public health input at an early stage where health implications are significant.
- Scoping and commissioning of research to provide a future health profile for the Northstowe area in order to support the new models of care.
- Provision of public health comments at informal pre-application stage for a number of major growth sites (including Waterbeach New Town, Wintringham Park, St Neots Blueprint, Waterbeach Station relocation), and at the formal planning application stage.- The County Council is a statutory consultee on all planning applications received by the 5 district planning authorities and as such Public Health is an internal consultee within the County Council. We respond to all strategic sites applications and Pre-application advice which was mainly for six main sites last year, however each site requires many hours of public health input during the planning process.
- Acted as an interface between Planning team and Public Health England for Waterbeach Energy from Waste consultation
- Arranging training on air quality, for County Council transport planners and District Council officers across Cambridgeshire and Peterborough
- Submitted and gave evidence to the Network Rail public inquiry on closure of railway crossings
- Significant input into the NHS Northstowe Healthy New Town Programme which has delivered:
  - a tool to ascertain the type and numbers of older people's housing required in housing developments, which will be used nationally
  - a healthy living youth and play strategy for Northstowe
  - started conversations locally on the "new model of care" which is being recognised nationally
- Worked with Living Sport on a successful application to Sport England for the Core Markets Bid (circa £500K) , to support residents to maintain physical activity during the "life change" of moving to a new development

### **2.5.4 Joint work programme with District Councils**

- Health is Everybody's Business workshops delivered in Fenland and East Cambridgeshire District Councils and Cambridge City Council.

- County Council public health workplace lead officer engaged with all District Councils to support delivery of healthy workplace programmes including trained health champions.
- Successful implementation of 'Lets Get Moving' community physical activity programme by all District Councils, funded from the County Council ring-fenced public health grant reserve.
- Evidence review of interventions to tackle social isolation delivered for South Cambs District Council, and used to support the work of a Member led task group, leading to agreed actions.
- Work with Fenland District council on the LGA sponsored 'Prevention at Scale' asset based community development initiative, focussed on Wisbech.
- Work with Living Sport, District Councils and Peterborough City Council, on a successful application to the Sport England Supporting Families to be Active Together Fund for £325k.

#### **2.5.5 Work with the Combined Authority**

- Participation in the Department of Work and Pensions 'Work and Health' procurement, with the Public Health Consultant: Health Improvement, acting as the Combined Authority representative, and chairing the local partnership implementation group, post-procurement.
- Providing public health input to Combined Authority activities including the the CA Outcomes Framework.

#### **2.5.6 Smaller voluntary sector contracts**

- Commissioning the 'Healthy Fenland Fund' and associated community development from Care Network and Cambridge Community Foundation
- Commissioning preventive sexual health outreach work for vulnerable communities from DHIVERSE.
- Commissioning the Stop Suicide campaign from MIND
- Commissioning the Rosmini Centre to deliver migrant worker communications

#### **2.5.7 Public Health Campaigns**

- Development and implementation of the 'Be Well in Cambridgeshire' website
- Delivery of a range of local campaigns aligned with national campaign calendars
- Local Stay Well in Winter campaign and small grants initiative.

#### **2.5.8 Traveller's Health Programme**

- Delivery of an outreach Traveller health programme, led by a public health nurse with support commissioned from the Ormiston Trust and CREDs team.

### **3. ALIGNMENT WITH CORPORATE PRIORITIES**

#### **3.1 Developing the local economy for the benefit of all**

Effective public health interventions promote a healthy and productive workforce.

#### **3.2 Helping people live healthy and independent lives**

Public health interventions directly support people to live healthy lives and stay healthy for as long as possible.

### **3.3 Supporting and protecting vulnerable people**

Public health interventions to address health inequalities support vulnerable populations and communities.

## **4. SIGNIFICANT IMPLICATIONS**

### **4.1 Resource Implications**

There are no immediate resource implications from the Annual Public Health Performance Report.

### **4.2 Statutory, Risk and Legal Implications**

The County Council has a statutory duty to take such steps as it considers appropriate to improve the health of the local population.

### **4.3 Equality and Diversity Implications**

No significant implications .

### **4.4 Engagement and Consultation Implications**

No significant implications

### **4.5 Localism and Local Member Involvement**

No significant implications

### **4.6 Public Health Implications**

Covered in the main body of the report.

<b>Implications</b>	<b>Officer Clearance</b>
<b>Have the resource implications been cleared by Finance?</b>	Yes
<b>Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?</b>	Not Applicable
<b>Has the impact on statutory, legal and risk implications been cleared by LGSS Law?</b>	Yes Name of Officer: Fiona McMillan
<b>Have the equality and diversity implications been cleared by your Service Contact?</b>	Yes: Name of Officer: Liz Robin

<b>Have any engagement and communication implications been cleared by Communications?</b>	Yes Name of Officer : Matthew Hall
<b>Have any localism and Local Member involvement issues been cleared by your Service Contact?</b>	Yes Name of Officer: Liz Robin
<b>Have any public health implications been cleared by Public Health</b>	Yes Name of Officer: Liz Robin

<b>Source Documents</b>	<b>Location</b>
Annual Health Protection Report (2017)	