

**REPORT FOR: OVERVIEW AND
SCRUTINY COMMITTEE
AND SCRUTINY SUB-
COMMITTEES**

Date of Meeting:	5 th February
Subject:	Annual Report of the Director of Public Health 2014
Responsible Officer:	Dr Andrew Howe, Director of Public Health
Scrutiny Lead Member area:	Policy Lead Member: Cllr Michael Borio Performance Lead Member: Cllr Mrs Vina Mithani
Exempt:	No
Wards affected:	All
Enclosures:	From the Beatles to Beyoncé: The Annual Report of the Director of Public Health 2014

Section 1 – Summary and Recommendations

This report looks back over 50 years at a selection of topics which were public health issues fifty years ago and remain issues today. It gives some suggestions about what we need to do in the future to address them.

Recommendations:

The Committee are asked to note the report.

Section 2 – Report

Under section 73B of the National Health Service Act 2006 , the Director of Public Health must prepare an annual report on the health of the people in the area of the local authority. . The annual report is the Director of Public Health's professional statement about the health of local communities, based on sound epidemiological evidence, and interpreted objectively. The report must be published by the Council.

The annual report is an important vehicle by which Directors of Public Health can identify key issues, flag up problems, report progress and, thereby, serve their local populations. It will also be a key resource to inform local inter-agency action.

Director of Public Health annual reports should:

- Contribute to improving the health and well-being of local populations
- Reduce health inequalities
- Promote action for better health, through measuring progress towards health targets
- Assist with the planning and monitoring of local programmes and services that impact on health over time

This year, to coincide with the Director of Public Health's 50th birthday, the report reflects on a number of topics which were and remain important public health issues over the past fifty years.

The topics covered in the report are

- Cardiovascular Disease
- Tuberculosis
- Sexually Transmitted Infections
- Tobacco control
- Vaccine Preventable Infections
- Healthy life expectancy

For each topic, the report includes changes that have happened over the past 50 years; an assessment of the current situation and any inequalities in health; and finally, consideration of the evidence based interventions needed in the coming years to continue to address these issues.

The report does not have specific recommendations but highlights some of the broad actions that are needed to continue to address the issues across the health and local government sectors. These actions will be addressed in the associated public health work streams and others are encouraged to take these into consideration in their commissioning plans.

Financial Implications

Whilst this report does not have any specific recommendations with financial implications, it highlights areas of potential spend that may be necessary to address the health actions referred to in this report. Such expenditure is expected to be contained within the ring-fenced public health grant and reflected in future commissioning intentions as appropriate.

Performance Issues

The issues covered in this report will be considered in the development of the next Health and Wellbeing Strategy which will be developed between April and September 2015. It will be presented to the HWB in Autumn 2015.

Environmental Impact

None

Risk Management Implications

None

Risk included on Directorate risk register? No

Separate risk register in place? No

Equalities implications

Was an Equality Impact Assessment carried out? No

The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
- advance equality of opportunity between people from different groups
- foster good relations between people from different groups

The broad purpose of this duty is to integrate considerations of equality into day business and keep them under review in decision making, the design of policies and the delivery of services

The report considers the health inequalities on the different topics for example: Many of the issues highlighted in the report affect vulnerable people e.g. children affected by vaccine preventable diseases; prevalence of cardiovascular disease and Tuberculosis is higher in certain BAME groups; Cardiovascular disease risk increases as we age but is affected by the choices we make early in our lives.

Council Priorities

The Council's vision: **Working Together to Make a Difference for Harrow**

The Annual Public Health report will contribute to Harrow's vision in the following ways:

- **Making a difference for the vulnerable:** Many of the issues highlighted in the report affect vulnerable people e.g. children affected by vaccine preventable diseases
- **Making a difference for communities:** Many of the issues affect different communities within Harrow e.g. cardiovascular disease affects the South Asian community more than the average
- **Making a difference for families:** - Most illnesses affect not just the individual but also their family while others have risk factors that affect the whole family, e.g. Smoking causes illness in smokers and their families affected by second hand smoke.

Section 3 - Statutory Officer Clearance

Name: Donna Edwards	<input checked="" type="checkbox"/>	on behalf of the Chief Financial Officer
Date: 16 January 2015		
Name: Caroline Eccles	<input checked="" type="checkbox"/>	on behalf of the Monitoring Officer
Date: 16 January 2015		

Ward Councillors notified: NO

Section 4 - Contact Details and Background Papers

Contact: Carole Furlong, Consultant in Public Health, 020 8420 9508