

CABINET ITEM COVERING SHEET PROFORMA

AGENDA ITEM

REPORT TO CABINET

13TH MARCH 2014

**REPORT OF CORPORATE
MANAGEMENT TEAM**

CABINET / COUNCIL DECISION

Adult Services and Health – Lead Cabinet Member – Councillor Jim Beall

DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2012/13

1. Summary

This is the first report of the Director of Public Health for Stockton Borough Council under the new arrangements introduced in the Health and Social Care Act 2012. The Report outlines the key health and wellbeing challenges and opportunities in Stockton Borough, including the data and evidence and details of current work and planned next steps. The Report fits with the priorities in the Joint Health and Wellbeing Strategy and outlines some key messages and challenges to partners and communities.

Key areas of work and ongoing challenges are outlined in relation to:

- Addressing the wider determinants of health e.g. smoking, mental health
- Reducing inequalities e.g. between people with learning disabilities and the rest of the population
- Addressing key health and wellbeing issues e.g. cancer and lung disease
- Healthcare quality and commissioning e.g. through work Hartlepool and Stockton-on-Tees Clinical Commissioning Group
- Protecting the health of the population e.g. management of outbreaks and increasing uptake of screening programmes

The Report also outlines three key challenges for our colleagues and our communities:

- No alcohol in pregnancy
- Fizzy drinks full of added sugars should only be a rare treat, especially for children
- Read to your child every day – a great way to bond with your child and help them develop

The Report outlines the significant opportunity presented by the location of the Public Health team within the Local Authority.

2. Recommendations

1. Cabinet is asked to note the Report
2. Cabinet is asked to recommend the Report to Council

3. Reasons for the Recommendations/Decision(s)

Under the Health and Social Care Act (2012), the Director of Public Health in the Local Authority has a statutory duty to publish an independent report on the health of the population in their area. The Local Authority has a duty to publish the Report. Cabinet is therefore asked to recommend the Report to Council.

4. Members' Interests

Members (including co-opted Members) should consider whether they have a personal interest in any item, as defined in **paragraphs 9 and 11** of the Council's code of conduct and, if so, declare the existence and nature of that interest in accordance with and/or taking account of **paragraphs 12 - 17** of the code.

Where a Member regards him/herself as having a personal interest, as described in **paragraph 16** of the code, in any business of the Council he/she must then, **in accordance with paragraph 18** of the code, consider whether that interest is one which a member of the public, with knowledge of the relevant facts, would reasonably regard as so significant that it is likely to prejudice the Member's judgement of the public interest and the business:-

- affects the members financial position or the financial position of a person or body described in **paragraph 17** of the code, or
- relates to the determining of any approval, consent, licence, permission or registration in relation to the member or any person or body described in **paragraph 17** of the code.

A Member with a personal interest, as described in **paragraph 18** of the code, may attend the meeting but must not take part in the consideration and voting upon the relevant item of business. However, a member with such an interest may make representations, answer questions or give evidence relating to that business before the business is considered or voted on, provided the public are also allowed to attend the meeting for the same purpose whether under a statutory right or otherwise (**paragraph 19** of the code)

Members may participate in any discussion and vote on a matter in which they have an interest, as described in **paragraph 18** of the code, where that interest relates to functions of the Council detailed in **paragraph 20** of the code.

Disclosable Pecuniary Interests

It is a criminal offence for a member to participate in any discussion or vote on a matter in which he/she has a disclosable pecuniary interest (and where an appropriate dispensation has not been granted) **paragraph 21** of the code.

Members are required to comply with any procedural rule adopted by the Council which requires a member to leave the meeting room whilst the meeting is discussing a matter in which that member has a disclosable pecuniary interest (**paragraph 22** of the code)

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SUMMARY

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RECOMMENDATIONS

1. Cabinet is asked to note the Report
2. Cabinet is asked to recommend the Report to Council

DETAIL

The Report is attached in Appendix 1.

FINANCIAL IMPLICATIONS

There are no direct financial implications of the Report, though decisions may be made around service development and commissioning based on the work for the Public Health team which is summarised in the Report. There are also likely to be implications for joint commissioning with partners through this work.

LEGAL IMPLICATIONS

There are no specific legal implications of this Report.

RISK ASSESSMENT

There are no specific risks inherent in this Report, though the report emphasises the importance of ensuring health and social care services are high quality, meet population need, are value for money and particularly support the most vulnerable.

COUNCIL PLAN

The Report supports the Council Plan themes and, in particular, through focussing on both improving health and reducing health inequalities. Evidence shows that more equal societies have better outcomes for health and wellbeing; and many aspects of health and wellbeing also tends to be poorer in areas of greater deprivation. Social capital and community development models have been shown to be important in building healthy communities and the Report outlines examples of this work. The two key priorities of the Joint Health and Wellbeing Strategy are 'Giving every child the best start in life' and 'Addressing ill health prevention'. These are reflected as key themes in the Report, focussing on children and young people and also on adults. Addressing the wider determinants of health such as environment, transport and employment opportunities are important for improving health and wellbeing and the Report sets out how Public Health will work with other Council departments and with partner organisations to progress this. This includes the priority to ensure safe, strong communities. Public Health focuses on early intervention throughout life, including in the early years which evidence shows has a beneficial impact on educational attainment and other outcomes such as contact with the Criminal Justice system.

The Report will also support implementation of the Joint Health and Wellbeing Strategy.

EQUALITIES IMPACT ASSESSMENT

This report is not subject to an Equality Impact Assessment because it is not seeking approval for a new policy, strategy or change in the delivery of a service

CORPORATE PARENTING

The Report outlines the Public Health focus on early intervention throughout life, including in the early years. Evidence shows that effective early intervention can have a positive impact on the need for social care support for children and families, with implications for the numbers of children entering the Looked After system.

CONSULTATION INCLUDING WARD/COUNCILLORS

The Report is based on the JSNA and Joint Health and Wellbeing Strategy, plus additional evidence from other sources e.g. Balance and therefore has been developed through consultation with partners and communities. The implementation of plans from the Report will involve further consultation on specific issues. The draft Report has also been approved by the Health and Wellbeing Board.

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Education related? Yes, in relation to the link between Public Health, education and life chances.

Background Papers **Please see references in Appendix 1 for relevant information.**

Ward(s) and Ward Councillors: **All**

Property

There are no direct implications of the Report in relation to the Council's property. Decisions may be made around service development and commissioning (including joint commissioning) based on the work for the Public Health team which is summarised in the Report.