

# Report to Health and Wellbeing Board

**9 January 2019** 

Agenda Item: 6

## REPORT OF DIRECTOR OF PUBLIC HEALTH

## **DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2018**

## **Purpose of the Report**

- 1. To inform the Health and Wellbeing Board of the publication of the 2018 Director of Public Health (DPH) Annual Report and seek participation in implementing the recommendations from that report.
- 2. To update the Health and Wellbeing Board on progress relating to the recommendations in the Annual Report to 2017.

#### Information

- 3. The attached report at Annex A is the independent Annual Report of the Director of Public Health (DPH) for the year 2018. This report was submitted to Nottinghamshire County Council's Policy Committee for approval to publish on 19 December 2018.
- 4. The DPH Annual Report is a statutory requirement. In general, the statutory responsibilities of the DPH are designed to match exactly the corporate public health duties of their local authority. The exception is the Annual Report on the health of the local population. The DPH has a duty to write a report whereas the authority's duty is to publish it (section 73B (5) and (6) of the Health Act 2006 inserted by section 31 of the Health and Social Care Act 2012). The content and structure of the report is something to be decided locally.
- 5. The Association of Directors of Public Health together with the Faculty of Public Health has published guidance about the production of the independent Annual Report. This identifies the Annual Report as an important vehicle by which DsPH can identify key issues, flag up problems, report progress and thereby serve their local populations. It is also a key resource to inform stakeholders of priorities and recommend actions to improve and protect the health of the communities they serve.
- 6. The 2018 Nottinghamshire DPH Annual Report focuses on the topical subject of violence prevention, within the context of Public Health. This topic was selected after consultation with key local stakeholders such as Nottinghamshire Police and the Nottinghamshire Police and Crime Commissioner. Their views helped to shape the content of the report, which should be read alongside the violence prevention and community safety plans of other organisations in Nottinghamshire. The report takes a broad approach to the definition of violence, referencing

- violent crime, including knife crime; self-directed violence, such as suicide and self-harm; and violence within interpersonal relationships, such as domestic and sexual violence.
- 7. Chapter 1 introduces the report with a broad look at the health of the population of Nottinghamshire, and describes how prevention activity can work at an early stage to reduce later ill health and prevent the need for expenditure "downstream". Violence prevention is selected as a topic for in depth consideration of prevention in this year's report, as the farreaching impacts of violence and its close association with ill-health and poor wellbeing mean that it is increasingly identified as a problem which requires a public health approach. Chapter 2 describes in detail the nature of violence in Nottinghamshire and its prevalence within the local population. Chapter 3 explains how Public Health approaches can help to prevent or reduce the impact of violence, describing some case-study examples and making recommendations about how to improve data sharing and routine enquiry to help identify survivors of violence.
- 8. The following four chapters each focus on a particular aspect, as follows:
  - a. Chapter 4 young people and the link between adverse experiences in childhood and violence. The report recommends training for front line staff in how to recognise and appropriately respond to signs of abuse and other types of trauma in children & young people. It also describes activity underway to develop resilience in order to reduce the impact and incidence of violence among young people.
  - b. Chapter 5 self-directed violence. This chapter describes work underway in Nottinghamshire to prevent suicide deaths and to support good mental health. It makes recommendations for additional activity, such as promoting the Every Mind Matters selfcare guide and ensuring that all A&E departments follow best practice guidance in the assessment and treatment of self-harm.
  - c. Chapter 6 domestic and sexual violence. The chapter recommends actions to improve the response to and reduce the incidence of domestic violence and abuse. It also references the importance of working with perpetrators and people at risk of becoming perpetrators, through pilot activities and programmes working with young people.
  - d. Chapter 7 alcohol and its association with violence. The chapter describes the work of the Nottinghamshire Local Alcohol Action Areas and makes recommendations to reduce the consumption of alcohol through availability controls via use of licensing and pricing mechanisms and through behavioural approaches.
- 9. Chapter 8 concludes the report, signposts readers to other sources of information, and collates all of the report's recommendations.
- 10. Annex 1 to the report contains an update on progress against the recommendations contained in the previous year's Annual Report.
- 11. The recommendations within the Annual Report are not just for the Council but are also for other agencies, including those represented on the Health and Wellbeing Board. Annex 1 within the report provides an update on progress against recommenations in the 2017 report. The 2017 Annual Report came to the Health and Wellbeing Board for information in January 2018.
- 12. The Update within Annex 1 of the report covers the period up to October 2018 and was compiled with contributions from a number of organisations, including the County Council and NHS Clinical Commissioning Groups. Members of the Health and Wellbeing Board may be

- interested to read the update, as it shows what other organisations are doing in response to the recommendations.
- 13. A similar update will be prepared with regard to recommendations in the 2018 Annual Report and contributions will be requested from relevant partners in due course.

## **Other Options Considered**

14. Another option would be to publish the report and not agree a supporting programme of publicity, but this would reduce the potential impact of the report.

#### Reason for Recommendations

15. Preparation of the DPH Annual Report is a statutory duty. It is the responsibility of the County Council to publish it. Another option would be not to bring the report to the Health and Wellbeing Board, but that would miss the opportunity for the document to be formally shared with the Health and Wellbeing Board partners, or to update the Health and Wellbeing Board partners on progress made against recommendations.

## **Statutory and Policy Implications**

16. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **Financial Implications**

17. Design and print costs and staff time involved in preparing the report form part of the Public Health divisional running costs, which are met from within the Council's allocation of Public Health grant.

#### Implications in relation to the NHS Constitution

18. In line with the values of the NHS Constitution, the DPH Annual Report highlights work undertaken across organisational boundaries to protect and improve the health and wellbeing of the County's population. The recommendations within the Annual Report are not just for the Council, but for other agencies, including CCGs.

#### **RECOMMENDATION/S**

- 1) Health and Wellbeing Board Members receive and comment on the DPH Annual Report for 2018.
- 2) Health and Wellbeing Board Members agree to contribute towards implementing the recommendations contained within the 2018 report where applicable.
- 3) Health and Wellbeing Board Members note the update on progress on implementing the recommendations from the previous 2017 DPH Annual Report.

## Jonathan Gribbin Director of Public Health

## For any enquiries about this report please contact:

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## **Constitutional Comments (SLB 21/12/2018)**

19. Health and Wellbeing Board is the appropriate body to consider the content of this report.

#### Financial Comments (DG 21/12/2018)

20. The financial implications are contained with in paragraph 17 of this report.

## **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

 Faculty of Public Health and Association of Directors of Public Health, Guidance on production of DPH Annual Report, October 2016; <a href="http://www.adph.org.uk/wp-content/uploads/2013/08/DPH-Annual-Report-guidelines.pdf">http://www.adph.org.uk/wp-content/uploads/2013/08/DPH-Annual-Report-guidelines.pdf</a>

#### Electoral Division(s) and Member(s) Affected

All