



	Health and Well-Being Board
	29 January 2015
Title	The Annual Report of the Director of Public Heath: From the Beatles to Beyoncé
Report of	Dr Andrew Howe, Director of Public Health
Wards	All
Date added to Forward Plan	June 2014
Status	Public
Enclosures	Appendix A - The Annual Report of the Director of Public Health: From the Beatles to Beyoncé
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Summary

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

Recommendations

1. The Board is requested to note the report.

1. WHY THIS REPORT IS NEEDED

1.1 Each year, the Director of Public Health must publish an independent report on health in the borough. 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 should be publicly accessible.

- 1.2 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 interagency action.
- 1.3 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
- 1.4 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.
- 1.5 The topics covered in the report are
- Cardiovascular Disease
- Tuberculosis
- Sexually Transmitted Infections
- Tobacco control
- Vaccine Preventable Infections
- Healthy life expectancy
- 1.6 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.

2. REASONS FOR RECOMMENDATIONS

2.1 The Board are asked to note this independent report.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 None

4. POST DECISION IMPLEMENTATION

4.1 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 heath 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.

5. IMPLICATIONS OF DECISION

- 5.1 Corporate Priorities and Performance
- 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..
- 5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT,

Property, Sustainability)

Not Applicable

5.3 Legal and Constitutional References

- The responsibility for public health transferred to local authorities in April 2013 under the reforms set out in the Health and Social Care Act 2012. Health and Wellbeing Boards are given statutory effect by s194 of this Act.
- The Council's Constitution (Responsibility for Functions, Annexe A) sets out the Terms of Reference of the Health and Wellbeing Board. The Board has the following responsibility:
- "To receive the Annual Report of the Director of Public Health and commission and oversee further work that will improve public health outcomes"

5.4 Risk Management

None

5.5 Equalities and Diversity

- 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:
 - 1. eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
 - 2. advance equality of opportunity between people from different groups
 - 3. 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.

5.6 Consultation and Engagement

 The report will be presented to the Clinical Commissioning Group and to any partnership board or community groups that would like to receive a presentation.

6. BACKGROUND PAPERS

6.1 None