

Lanarkshire NHS Board
31 January 2018

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Public Health 2016/17
The Annual Report of the Director of Public Health

1. PURPOSE

This paper is coming to the Board:

For approval	<input type="checkbox"/>	For endorsement	<input checked="" type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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The report will be the subject of a presentation by Mr Gabe Docherty.

2. ROUTE TO THE BOARD

This paper has been:

Prepared	<input checked="" type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
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by Gabe Docherty who chairs the DPH Annual Report Editorial Committee.

3. SUMMARY OF KEY ISSUES

The DPH Annual Report is an independent report whose objectives are to:

- Report on the health of the population in Lanarkshire;
- Promote and protect the public's health in Lanarkshire;
- Look at the future public health and health service challenges that NHS Lanarkshire and its partners will need to plan for; and
- Inform, stimulate discussion and promote change to improve health in Lanarkshire.

This year's report will only be available in electronic format. The link to the report will be published on FirstPort and made widely available.

<http://www.nhslanarkshire.org.uk/Services/PublicHealth/Pages/Directors-Annual-Report-2016-2017.aspx>

Each section in the report contains key points and priorities for action. A "Snapshot" which summarises the report will be available in hard copy (this is attached to this report).



Key Issues summary
16.17.pdf

There has been a call for a new wave of Public Health characterised by enabling government, greater interdependence and cooperation across sectors and geographies. In Lanarkshire, the vision is for people to be at the centre of the efforts to improve health and wellbeing with public services working

together to empower individuals and communities to take greater control of these efforts. In practical terms this will entail the following:

- Reducing inequalities with significantly lower numbers of people, especially children and families living in poverty. This would focus effort upon the wider determinants of health such as homelessness, financial inclusion, employment and the development of living and working environments that are conducive to good health and wellbeing;
- Realising the ambitions of Achieving Excellence with hospitals only providing care for those who need to be in hospital and shifting the balance of care to the community in a safe and effective manner;
- Implementing the aspirations of the Christie Commission to have a greater focus on prevention; and
- Delivering Realistic Medicine (Realistic Healthcare) across Lanarkshire.

Key points:

Lanarkshire's population increased from 2015 to 2016 to an estimated population of 656,490 and is predicted to grow by 1.2% in the next twenty years. It is projected that by 2036 there will be a 71.2% increase in the number of people aged 75 years and over, an increase of 35,629.

Life expectancy increased in the 10 years between 2003/2005 and 2013/2015 with life expectancy of males rising from 72.8 to 75.3 years and of women rising from 77.6 years to 79.6 years. Life expectancy is still below national levels. People in Lanarkshire live on average a year less than the population of Scotland as a whole.

There is a continuing reduction in the combined proportion of all deaths due to the so-called "big killer" diseases of cancer, coronary heart disease (CHD) and stroke. Since 2012 they have accounted for less than 50% of all deaths and in 2016 the proportion fell further to 45.9%.

Compared to Scotland, a great proportion of the population live in one of the 15% most deprived data zones. Overall 118,673 people live in one of the 15% most deprived data zones in Scotland.

The report highlights an increase in the percentage of children living in poverty which can have a long lasting and detrimental effect on children's health and affect future life chances. The 2011/12 Director of Public Health Annual Report warned that welfare reform could result in an increase in poverty and exacerbate health inequalities. We cannot underestimate the negative impact of some aspects of welfare reform make on the health of some of the most vulnerable people in Lanarkshire.

The report focuses on the impact of Adverse Childhood Experiences (ACES) and how childhood trauma can lead to the adult onset of chronic diseases and poorer life outcomes.

The report provides highlights of some of the innovative practices in terms of delivering the aspirations of Realistic Medicine. There is the need to deliver Realistic Medicine across the whole of Lanarkshire.

The report considers dilemmas surrounding service pressures, funding, the need to achieve the aspirations of the Christie Commission and the challenge of investing in prevention.

Whilst recognising the role that people's life circumstances can play in determining behaviours and health outcomes, the report highlights the need for individuals to make changes to improve their own health and wellbeing. The concept of supported self-management is also explored in the report.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	LDP	<input checked="" type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive	<input checked="" type="checkbox"/>	Statutory requirement	<input checked="" type="checkbox"/>	AHF/local policy	<input checked="" type="checkbox"/>
Urgent operational issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input checked="" type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

Measures for improvement form part of the individual areas of work or programmes identified in the report.

7. FINANCIAL IMPLICATIONS

The report identifies priority areas for funding.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

Not applicable.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance management	<input checked="" type="checkbox"/>	Equality	<input checked="" type="checkbox"/>
Sustainability	<input type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

Not applicable.

11. CONSULTATION AND ENGAGEMENT

The report will be available online to everyone with the opportunity to comment or ask questions. The report will be discussed at various forums, with the feedback helping to take forward the issues raised in the report.

12. ACTIONS FOR THE BOARD

The Board are asked to:

Approval	<input type="checkbox"/>	Endorsement	<input checked="" type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	

The report has highlighted a number of priorities for action, dilemmas and challenges. My challenge to the Board, Health and Social Care Partnerships and Community Planning Partnerships is to respond to the issues that have been raised and identify actions that will be taken. I believe that there is merit in some form of focused seminar(s) to explore the issues in more detail.

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact Gabe Docherty, Interim Director of Public Health and Health Policy. Telephone: 01698 858241. Email: gabe.docherty@lanarkshire.scot.nhs.uk.