



## 1. HEALTH AND WELLBEING BOARD

### 1.1 Public Health Papers for noting

1.2 Circulation: This report is for general publication

1.3 **19 OCTOBER 2017**

1.4 **BRYAN HURLEY** [bryan.hurley@iow.gov.uk](mailto:bryan.hurley@iow.gov.uk)

## 2 Summary

2.1 The three documents presented for consideration at the Health and Wellbeing Board (HWB) at the request of the Director of Public Health includes the Public Health Annual Report for 2016 - 2017 (PHAR), the Prevention and Early Intervention Strategy and a description of the Public Health Outcome Framework (PHOF). It is hoped that these documents will be useful in identifying the current thinking regarding public health on the Isle of Wight and may assist in the planning, priority setting and monitoring of the health and wellbeing of the local community.

2.2 With the focus of this year's PHAR being on physical activity, the intention is to address physical inactivity as a matter of social justice, community health and wellbeing and overall effectiveness of interventions. It provides an update to key stakeholders who share an interest and/or responsibility for influencing and addressing inactivity as part of their work.

There is a strong case for aligned, whole system approach and action towards addressing physical inactivity as a matter of social justice. To achieve this, an evidence-informed framework has been offered, along with opportunities identified by stakeholders who have contributed to the development of the Public Health Annual Report to take forward and implement within practice. To realise this, a set of key recommendations have been set out to generate shared benefits which cut-across fulfilling wider partner outcomes.

2.3 Regarding the Isle of Wight's Prevention and Early Intervention Strategy, this identifies focused action to: embed prevention and self-care; Recognise and Nurture the contribution and impact that our communities; Enable people to have access to high-quality information and lifestyle interventions; Informed decision-making at the right time and place to reduce and delay the need for care. The Strategy is designed as 'live co-produced approach' delivered jointly in conjunction with linked strategies and action plans over 2017-2020. Key issues identified

requiring attention for the IoW are mainly reflecting the key priority areas identified as RED/Worsening in the PHOF and these include children; lifestyle and risky behaviours (including alcohol, obesity and physical activity) and higher Recorded diabetes; mental health and safety.

2.4 The PHOF provides indicators that help us understand trends in public health both nationally and locally. The Public Health Outcome Framework - at a glance document identifies the most recent set of indicators published by Public Health England (PHE). It is hoped that this may be of help in identifying information that may be of use to the HWB. At present most indicators for the IOW are similar or better than the England average. Those that are not include:

- multiple indicators relating to mental health, learning disability and drugs and alcohol (including higher admissions, mortality, less employment and overall worsening outcomes);
- Children and Young people related indicators—including some lifestyle behaviours (smoking, alcohol, obesity, and diet), immunisations, educational achievement etc.
- Indicators relating to wider determinants, deprivation, inequalities and economic development including homelessness, child poverty, and overall excess winter mortality

### **3 Decisions, recommendations and any options**

3.1 The Board is asked to:

Note and adopt the PHAR setting out the approach to working with people/communities towards solutions.

Note the Prevention Strategy and early intervention strategy presentation, and its key implications and link to the main HWB strategy, LA corporate strategy and Stakeholders strategies as conduits of integrated implementation within existing resources.

Note the PHE document Public Health Outcome Framework – at a glance, as the main guiding national benchmarking for measuring improvement and progress.

### **4. Important considerations and implications**

4.1 Legal

Section 73B (5) of the National Health Service Act 2006 (s31 Health and Social Care Act 2012) identifies that the Director of Public Health is obliged to write an annual report on the health of the people in the area of the local authority.

By virtue of s73B (6) of the National Health Service Act (s31 Health and Social Care Act 2012) the local authority must (mandatory duty) publish such report.

Therefore in order to adhere to its statutory obligations it is recommended that the Health and Wellbeing Board adopt the report and arrange for its publication in line with the recommendations outlined in the report.

#### 4.2 Finance

No additional financial implications noted at this time; implementation will be within existing resources and by transforming current way of working.

#### 4.3 Performance information and benchmarking

Key PHOF indicators may be considered for review as key performance indicators that may be used by the HWB for debate, scrutiny and action.

#### 4.3 Equalities and Diversity

1. The council as a public body is required to meet its statutory obligations under the Equality Act 2010 to have due regard to eliminate unlawful discrimination, promote equal opportunities between people from different groups and to foster good relations between people who share a protected characteristic and people who do not share it. The protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
2. Under the Equality Act 2010 we are required to have due regard to our equality duties when making decisions, reviewing services, undertaking projects, developing and reviewing policies. This must be done at the formative stage of your proposal, not retrospectively as justification for the recommendation.
3. The equality impact assessment looks at how a service promotes equality and diversity to ensure legal compliance and how the services we provide and the decisions that we make meet the needs of our local community. It should also identify methods for mitigating or avoiding any adverse impact (further information is available through the following link):  
  
[http://wightnet.iow.gov.uk/equality\\_diversity/Default.aspx](http://wightnet.iow.gov.uk/equality_diversity/Default.aspx)
4. An equality impact assessment (EIA) is more than a 'tick box' exercise and requires the council to view a range of information in relation to the local demographic profile. IW Facts and Figures in relation to local equality and diversity demographical information can be found on the following link:  
  
[http://wightnet2000.iow.gov.uk/staff/personnel\\_services/images/Diversitypages2011-12v2Apr2011.rtf](http://wightnet2000.iow.gov.uk/staff/personnel_services/images/Diversitypages2011-12v2Apr2011.rtf)
5. If the report introduces new or revised Policy or Procedure or is a significant decision, an equality impact assessment must be undertaken and the results should be summarised in this section. Usually, the EIA should also be attached.

4.5 Future Proofing / Exit strategy

No implications.

4.6 Health, social care, children's services and public health and other partners may be effected by these reports.

**5 Supporting documents and information**

APPENDICIES

[Appendix 1](#): Annual Public Health Report for the Isle of Wight 2016 - 2017

[Appendix 2](#): Isle of Wight Prevention and Early Intervention Strategy

[Appendix 3](#): Public Health Outcomes Framework – at a glance

Contact Point: Bryan Hurley, Public Health Principal, ☎ 821000 e-mail [bryan.hurley@iow.gov.uk](mailto:bryan.hurley@iow.gov.uk)

RIDA ELKHIER  
*Director of Public Health*

CLARE MOSDELL (CLLR)  
*Cabinet Member for Adult Social Care and Public Health*