

<b>3 November 2022</b>		<b>ITEM: 11</b>
<b>Health and Wellbeing Overview and Scrutiny Committee</b>		
<b>Annual Public Health Report 2022</b>		
<b>Wards and communities affected:</b> All	<b>Key Decision:</b> None	
<b>Report of:</b> Jo Broadbent, Director of Public Health		
<b>Accountable Director:</b> Jo Broadbent, Director of Public Health		
<b>This report is</b> Public		

## Executive Summary

This paper presents the following report: Reducing the Impact of Cardiovascular Disease in Thurrock, Annual Report of the Director of Public Health, 2022.

### 1. Recommendation(s)

#### 1.1 That Members note the contents of the Annual Public Health Report 2022 and approve its publication.

### 2. Introduction and Background

2.1 Directors of Public Health in England have a statutory duty to write an Annual Public Health Report (APHR) to demonstrate the state of health within their communities. The Association of Directors of Public Health describes the core purpose of the Director of Public Health as independent advocate for the health of the population and system leadership for its improvement and protection. The DPH Annual Report is an important vehicle for providing advocacy and recommendations on population health to both professionals and public.

2.2 The APHR can focus on any topic of key relevance to improving the public's health, and in recent years, topics of focus have included Youth Violence & Vulnerability and Improving Older People's Health Through Housing. Previous reports can be found here <https://www.thurrock.gov.uk/public-health/other-public-health-reports> .

### 3. Overview

3.1 The attached APHR 2022 is a follow-up to the APHR 2016, which explored the sustainability of health and social care systems in Thurrock, with particular reference to Long Term Conditions (LTCs) amongst adult residents. The

2022 report demonstrates the progress that has been made in terms of LTC care as a result of the recommendations in that report. It also makes recommendations to the wider Thurrock health and care system to further improve LTC outcomes, looking through the lens of improving outcomes for cardiovascular disease (CVD).

3.2 The recommendations will be taken forward through the Better Care Together Thurrock (BCTT) working group on Population Health and Inequalities, chaired by the DPH. Actions will include:

- Continued quality improvement in primary care services for CVD
- Embedding a more holistic, co-produced approach to long term conditions care
- A focus on reducing inequalities in CVD outcomes, particularly for people from a minority ethnic background, people with serious mental illness and people with learning disabilities.

#### **4. Reasons for Recommendation**

4.1 Directors of Public Health in England have a statutory duty to write an Annual Public Health Report to report on the state of health within their communities.

#### **5. Consultation (including Overview and Scrutiny, if applicable)**

5.1 This report is being presented to Health Overview & Scrutiny, the Health & Wellbeing Board and the Cabinet. It has also been shared for comment with Thurrock Integrated Care Alliance (TICA).

#### **6. Impact on corporate policies, priorities, performance and community impact**

6.1 This report adds further detail and granularity to the aims of the Health & Wellbeing Strategy to Level the Playing Field and reduce inequalities in Thurrock, specifically the aims of Domain 1 – Staying Healthier for Longer. This includes a specific Goal to –  
*Continue to enhance identification and management of Long Term Conditions (LTCs) to improve physical and mental health*

6.2 The report also sets out some specific actions to support the Better Care Together Thurrock adult health and care strategy, in particular Chapter 6 – Improved Health & Wellbeing through Population Health Management. This sets specific Goals as follows –  
*The Public Health Team will co-design with PCN, NELFT and EPUT clinical leaders, a more detailed case-finding strategy setting out revised protocols for hypertension, AF and depression, targets, training requirements and required resources*  
*We will embed lifestyle modification services, social prescribing and ASC support within the multi-morbidity care models, ensuring that they are holistic, can respond to the individual context of residents including addressing wider*

*determinants of health, self-care and in-depth motivational interviewing, creating a new blended coach role*

## **7. Implications**

### **7.1 Financial**

Implications verified by: **Mike Jones**  
**Strategic Lead – Corporate Finance**

Expenditure relating to the provision of public health services is contained within the ring-fence of the public health grant.

The report will influence transformation of NHS and public health services and will be used as part of the basis for the allocation of the funding and will be contained within the overall allocation. This will be addressed as part of the medium term financial planning for the public health service.

### **7.2 Legal**

Implications verified by: **Gina Clarke**  
**Corporate Governance Lawyer & Deputy Monitoring Officer**

This report fulfils the statutory obligation of the Director of Public Health to produce an Annual Public Health Report on the health of the population in the Council's area. The content and the structure of the report is a matter to be determined locally. However, the Council has a statutory duty to publish the Annual Public Health Report.

### **7.3 Diversity and Equality**

Implications verified by: **Roxanne Scanlon**  
**Community Engagement and Project Monitoring Officer**

The report makes a number of recommendations aimed at reducing health inequalities from LTCs, including inequalities in service access, condition diagnosis and quality of care, all of which contribute to inequalities in outcomes. Community groups identified as experiencing such inequalities include minority ethnic groups, people living in deprived areas, people living with serious mental illness or learning disability.

### **7.4 Other implications** (where significant) – i.e. Staff, Health Inequalities, Sustainability, Crime and Disorder, or Impact on Looked After Children

This report aims to influence activity in the local NHS, particularly primary care and will be used to support TICA in NHS service quality improvement.

## **8. Appendices**

Appendix 1 - Executive Summary

Appendix 2 - Reducing the Impact of Cardiovascular Disease in Thurrock,  
Annual Report of the Director of Public Health, 2022; Full Report

### **Report Author:**

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Director of Public Health