REPORT OF THE CABINET

A. ANNUAL REPORT OF THE DIRECTOR OF PUBLIC HEALTH 2018

<u>Introduction</u>

1. This report concerns the publication of the Director of Public Health's Annual Report 2018. The report is a statement on the health of the population of Leicestershire and is a key resource for shaping commissioning decisions to improve the health status of the population.

Background

- 2. The Director of Public Health is appointed jointly by Leicestershire County Council and the NHS and leads on improving the health and wellbeing of the people of Leicestershire. This is done by reporting publicly and independently on trends and gaps in the health and wellbeing of the population and by making recommendations for improvement to a wide range of organisations.
- 3. One of the roles of the Director of Public Health is to be an independent advocate for the health of their population. The Annual Reports are the main way by which Directors of Public Health make their conclusions known to the public.

Focus of the report

- 4. This year's report presents on the changing population of Leicestershire, the prevalence of individual and multiple conditions (otherwise known as multiple morbidity) in the population and data on excess winter deaths and place of death. The growing number of people living with multiple health conditions presents as bigger challenge to public services as the overall growth in the number of older people.
- 5. The health and care system should promote 'healthy ageing'. This can be achieved by:
 - a. tackling social isolation;
 - b. promoting social prescribing;
 - c. reducing falls:
 - d. promote physical activity throughout life and into older age;
 - e. support carers.
- 6. Being socially connected to friends, family and the wider community is a key element of healthy ageing. In addition to utilising the social prescribing model for Leicestershire to connect people with their communities, the Council's 'tackling loneliness and social isolation project', alongside the Government Strategy for tackling loneliness, will provide further opportunities for the whole council to 'do more' on loneliness.
- 7. 'Social prescribing' is a key way in which broader services can help support the frail, and those with multiple health conditions to maintain independence. The model for social prescribing in Leicestershire, with public health services at its heart, continues to be integral to the emerging integrated locality teams.

- 8. Falls are a serious health issue for older people, with around a third of all people aged 65 and over falling each year. Regular physical activity can develop and maintain strength and balance in frail patients. Public Health will continue to support the implementation of the Falls programme with an emphasis on evaluating the effectiveness of the postural stability programmes.
- 9. Physical activity is a key preventative element of healthy ageing from protecting against some forms of dementia, to reducing the risk of depression, heart disease and the risk of a fall in older age. Working with partners in Leicester-Shire and Rutland Sport (LRS) and district councils, Public Health will ensure that muscle strengthening activity and physical activities of older people are reflected in sport and physical activity plans.
- 10. Supporting Carers and including supporting them to be healthy is a key element to ensuring a good outcome for the frail and those with multiple health conditions. The recently adopted Carer's Strategy across Leicestershire, Leicester City and Rutland sets out a broad programme of support for carers.
- 11. The health and care system needs to continue its redesign work so as to enable the individual to be treated as a whole, not as a series of separate illnesses or conditions. The recently produced LLR Frailty Resource Pack is a welcome step to local health services understanding, and responding to, frailty.

Consideration by Scrutiny, Health and Wellbeing Board and Cabinet

- 12. The Health Overview and Scrutiny Committee at its meeting on 7 November welcomed and supported the Annual Report. The Committee welcomed the approach in the report to treat the patient as a whole rather than focussing on a specific illness or condition the patient had. The emphasis on social prescribing was particularly welcomed.
- 13. The Health and Wellbeing Board will consider the Annual Report at its meeting on 29th November, 2018 and its views will be reported to members.
- 14. The Cabinet at its meeting on 23rd November, 2018 noted the report and supported the recommendations contained therein.

(Motion to be moved:-

That the Director of Public Health Annual Report 2018 be noted with support.)

Background Papers

Director of Public Health Annual Report 2018

Appendices

Annual Report of the Director of Public Health 2018.