

HAMPSHIRE COUNTY COUNCIL

Decision Report

Decision Maker:	Executive Member for Health and Public Health
Date:	17 October 2016
Title:	Towards a Healthier Hampshire – a Strategy for improving the Public's Health 2016-2021
Reference:	7820
Report From:	Director of Public Health (interim)

Contact name: Dr Sallie Bacon, Director of Public Health (interim)

Tel: 02380 383329

Email: Sallie.bacon@hants.gov.uk

1. Executive Summary

1.1 The Health and Social Care Act 2012 conferred responsibility on all Local Authorities to improve and protect the health of their population, including some mandated public health functions.

1.2 The purpose of this paper is to seek endorsement from the Executive Member for Health and Public Health for '*Towards a Healthier Hampshire*' a new Public Health Strategy for the County of Hampshire.

2. Contextual information

2.1. Public health is 'the science and art of promoting and protecting health and wellbeing, preventing ill health and prolonging life through the efforts of society'.

2.2. The County Council took on the local leadership for public health from the NHS in April 2013. The Health and Social Care Act 2012 set out the new responsibilities for upper tier and unitary authorities to improve the health of their populations, backed by a ring-fenced grant and a specialist public health team, led by the Director of Public Health.

2.3. Local Authority public health responsibilities are wide reaching. They include some mandatory functions:

- appropriate access to sexual health services

- steps to be taken to protect the health of the population, in particular, giving the local authority a duty to ensure there are plans in place to protect the health of the population
- ensuring NHS commissioners receive the public health advice they need
- the National Child Measurement Programme
- NHS Health Check
- the five universal health reviews carried out under the universal element of the Healthy Child Programme (for 18 months from October 2015)
- Oral health surveys

3. Finance

- 3.1. Under the transfer of responsibilities a public health grant was allocated to the County Council by the Department of Health for the discharge of the new public health functions. The grant is ring fenced until 2017/18.
- 3.2. The public health grant was subject to an in year cut of 6.2% in 2015/16 and is reducing year on year between 2.5% and 2.6% until 2019/20.

Year	% reduction	Grant
2016/17		£53.49m
2017/18	2.5%	£52.17m
2018/19	2.6%	£50.83m
2019/20	2.6%	£49.49m
2020/2021	-	£49.49m

- 3.3. The delivery of the Strategy over its lifetime, and the outcomes it is striving to achieve, will need to be met from within a reducing budget envelope as indicated in 3.2. Therefore, the detailed plans for implementation will be developed in line with the need to meet the challenge required by the reduction in funding.

4. The need for a public health strategy

- 4.1 Good health and wellbeing is a positive asset and something we all aspire to for ourselves, families, carers, friends and communities. It is essential for thriving, prosperous, resilient and safe communities and vital for the success of future generations.

- 4.2 Hampshire is a healthy place to live. People generally have good life expectancy, educational achievement, housing and living environments and employment. Fewer children live in poverty, infant mortality is low and fewer people die from avoidable health conditions. But we can do better – the gap between how long people live and how long they live in good health is widening, there is significant variation in health outcomes between the most and least deprived communities and too many of our most vulnerable citizens have poor health outcomes.
- 4.3 A wide and complex range of factors influence and determine population and individual health.
- 4.4 Our current health and care systems focus on treating illness rather than keeping people healthy. People have told us that being healthy, having a good quality of life and being in control and making their own decisions about their health is very important to them.
- 4.5 We know from our Joint Strategic Needs Assessment (JSNA) that the Hampshire population is changing, demand for services is rising and it is widely accepted that these services are not sustainable in their current form. We need to move to a 'wellness' model, with a shift to prevention and early intervention, and to change our reliance on services by supporting people to build resilience, to use their own strengths and assets and so reduce the need and demand for services.
- 4.6 The focus of the Strategy is on people being in good health, having good wellbeing and for communities to be resilient and has been informed by the JSNA bringing together work carried out by the Hampshire Public Health team with other Directorates and partners over the last two years. The strategy identifies a set of priorities for improving the health of Hampshire residents. It sets out proposals for how the County Council can use the breadth of its business and resources to deliver its public health responsibilities and maximise public value, by reducing duplication, identifying synergies in the work we are doing and addressing many of the influences on health through a place –based approach.
- 4.7 However, it is clear that there are many other agencies in Hampshire that have a vital role in improving and protecting the public's health – 'public health is everybody's business'. Effective delivery of improved public health requires continued and strengthened partnership working with Hampshire residents and other agencies across the system.
- 4.8 The Public Health Strategy will support delivery of the Corporate Strategy, the Hampshire Health and Wellbeing Strategy, the Children and Young People's Plan and local Sustainability and Transformation Plans.
- 4.9 Development of the Strategy has been informed and developed by discussions with key stakeholders and with insight research with the public.

5 Equality Impact Assessment

- 5.1 A wide and complex range of factors influence and determine population and individual health. The strategy has been developed to have a positive impact

on these factors and to improve outcomes for the most vulnerable citizens and communities in Hampshire. It aims to have a positive impact on outcomes for people across all the protected characteristics and to impact on poverty and will take account of the impact of where people live, in rural or urban areas.

- 5.2 An equalities impact assessment has been carried out. The final impact of the strategy will be dependent on the success of implementation and there could be a bigger and more positive impact on certain groups. A detailed action plan will be drawn up to implement the strategy and Equality Impact Assessments will be undertaken for the individual programmes of work as these are progressed. This will ensure that the specific impacts of individual services and interventions are understood and steps can be taken to mitigate any negative impacts if they are identified.
- 5.3 The strategy has five priority areas. While overall the strategy aims to have a positive impact on those in the protected groups some more specific impacts for people with protected characteristics have been identified and these are set out below.
- 5.4 Priority area 1. Healthy: making healthy lifestyles the norm for everybody across the lifecourse. This includes reducing the inequalities in sexual health for vulnerable groups with the focusing of dedicated resources on engaging with population groups at most risk of poor sexual health , including young people age d 15-24, men who have sex with men and people of black or mixed ethnicity and working to reduce the gap in life expectancy and healthy life expectancy between the populations in the most and least deprived areas in Hampshire - this will have a positive impact on age, disability, race and will also impact on poverty and people living in both rural and urban areas of deprivation.
- 5.5 Priority area 2. Happy: good emotional wellbeing and mental health for all. This promotes parity of esteem and includes implementing the emotional wellbeing and mental health strategy for children (positive impact on younger people) and improving access to support for mental wellbeing across the County (positive impact on all protected groups , although some services will focus on groups with specific needs ,for example specific services or initiatives tailored for men or women, gender re-assignment, sexual orientation and will consider the needs of people living in both urban and rural areas).
- 5.6 Priority area 3. Resilient: resilient and healthy children, young people and families. This includes ensuring good support for the most vulnerable families and identifying those at risk and with complex needs as early as possible (age and disability) and improving perinatal mental health (pregnancy and maternity).
- 5.7 Priority area 4. Thriving Communities: making local places healthy and safe places. This includes reducing social isolation (impacts particularly on age, sex, disability, pregnancy and maternity and people living in both urban and rural areas)

- 5.8 Priority area 5. Protect: effective health protection arrangements. This includes input to community safety and crime reduction, including domestic violence, alcohol and drugs and tobacco control. These measures are likely to impact all the protected characteristics. Ensuring that we have high quality screening and immunisation programmes and supporting initiatives to improve uptake is part of this priority and will positively impact on age, sex, pregnancy and maternity and race.

6 Future direction

- 6.1 The Strategy will inform the development of priorities for the Hampshire Health and Wellbeing Board and a detailed implementation plan will be developed that will take account of available resources, as described in section 3.

7 Recommendation(s)

- 7.1 That the Executive Member for Health and Public Health endorses '*Towards a Healthier Hampshire*' a new Public Health Strategy for the County of Hampshire.

CORPORATE OR LEGAL INFORMATION:**Links to the Corporate Strategy**

Hampshire safer and more secure for all:	yes
Maximising well-being:	yes
Enhancing our quality of place:	yes

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

IMPACT ASSESSMENTS:

1. Equality Duty

1.1. The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- 1.1.1 The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
- 1.1.2 Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
- 1.1.3 Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.

1.2. Equalities Impact Assessment:

The proposal is to obtain endorsement for the first Public Health strategy for Hampshire. Good health and wellbeing is a positive asset and something we all aspire to for ourselves, families, carers, friends and communities. It is essential for thriving, prosperous, resilient and safe communities and vital for the success of future generations. Hampshire is a healthy to live and people generally have good life expectancy, educational achievement, housing and living environments and employment. Fewer children live in poverty, infant mortality is low and fewer people die from avoidable health conditions. However, we know that we can do better for the people who live in Hampshire – the gap between how long people live and how long they live in good health is widening, there is significant variation in health outcomes between the most and least deprived communities and too many of our most vulnerable citizens have poor health outcomes.

1.3 The strategy has been informed by the Hampshire Joint Strategic Needs Assessment (JSNA) and brings together work carried out by the Hampshire Public Health team with other Directorates and partners over the last two years. The JSNA includes the data that identifies the groups that will be impacted by the strategy.

1.4 A wide and complex range of factors influence and determine population and individual health. The strategy has been developed to have a positive impact

on these factors and to improve outcomes for the most vulnerable citizens and communities in Hampshire. It aims to have a positive impact on outcomes for people across all the protected characteristics and to impact on poverty and will take account of the impact of where people live, in rural or urban areas.

- 1.5 An equalities impact assessment has been carried out. The final impact of the strategy will be dependent on the success of implementation and there could be a bigger and more positive impact on certain groups. A detailed action plan will be drawn up to implement the strategy and Equality Impact Assessments will be undertaken for the individual programmes of work as these are progressed. This will ensure that the specific impacts of individual services and interventions are understood and steps can be taken to mitigate any negative impacts if they are identified.
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- 1.9 Priority area 3. Resilient: resilient and healthy children, young people and families. This includes ensuring good support for the most vulnerable families and identifying those at risk and with complex needs as early as possible (age and disability) and improving perinatal mental health (pregnancy and maternity).
- 1.10 Priority area 4. Thriving Communities: making local places healthy and safe places. This includes reducing social isolation (impacts particularly on age, sex, disability, pregnancy and maternity and people living in both urban and rural areas)

- 1.11 Priority area 5. Protect: effective health protection arrangements. This includes input to community safety and crime reduction, including domestic violence, alcohol and drugs and tobacco control. These measures are likely to impact all the protected characteristics. Ensuring that we have high quality screening and immunisation programmes and supporting initiatives to improve uptake is part of this priority and will positively impact on age, sex, pregnancy and maternity and race.

2 Impact on Crime and Disorder:

- 2.1 Creating and supporting thriving communities will have a positive impact on Crime and disorder. One aspect of the strategy is good emotional health and wellbeing which includes reducing substance misuse, again this will positively impact on Crime and disorder

3 Climate Change:

- 3.1 How does what is being proposed impact on our carbon footprint / energy consumption?
- 3.2 How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

Increasing physical activity will have a positive impact on our carbon footprint/energy consumption by increasing walking and cycling for essential journeys and so reducing car journeys.