

Adults, Wellbeing and Health Overview and Scrutiny Committee

17th February 2011



Annual Report of the Director of Public Health 2009/10

Report of Corporate Management Team

**Rachael Shimmin, Corporate Director of Adults, Wellbeing & Health
Councillor Eunice Huntington, Cabinet Portfolio Holder for Healthier
Communities**

Purpose of Report

1. This report presents key messages from the Annual Report of the Director of Public Health 2009/10.

Background

2. The Annual Report of the Director of Public Health 2009/10 is the fourth in a series of annual reports which looks at improving health and reducing health inequalities in County Durham and Darlington.
3. The first report in 2006/07 set the scene for tackling health inequalities and highlighted the need for action on the wider determinants of health, lifestyle choices and fair access to services. The 2007/08 report focused in detail on heart disease and cancers which together account for more than 50% of the gap in life expectancy between our local population and England. Last year's report (2008/09) focused on the health of our children and young people, including safeguarding and child poverty and highlighted the important role of the Children's Trust arrangements in County Durham and Darlington.
4. The 2009/10 annual report highlights the health of our older people, key relevant issues, and action taken to address older people's needs. Contributions from Durham County Council are included and, for the first time, a guest chapter has been included, co-authored by Age Concern Durham and Age UK Darlington. This gives a valuable added perspective from the third sector.

Key Messages

5. The Annual Report of the Director of Public Health 2009/10 details work which has been undertaken and indicates areas of work which need to be progressed by a range of partners to improve the health of older people. As such, it can be used to support and inform the commissioning of services.

6. The annual report should be read in conjunction with the Joint Strategic Needs Assessment (JSNA). The JSNA 2010-11 is a full review of the health and wellbeing needs of the population of County Durham, comprising data analysis and trends, which are intended to inform priority and target setting across the county.
7. The key messages from the Annual Report of the Director of Public Health 2009/10 are attached as **Appendix 2**.
8. The Annual Report of the Director of Public Health 2009/10 has been received by the NHS County Durham and Darlington's Integrated Business Board.
9. A full copy of the Annual Report of the Director of Public Health 2009/10 can be obtained from: www.health-promotion.cdd.nhs.uk

Recommendations and reasons

10. It is recommended that the Adults Wellbeing and Health Overview and Scrutiny Committee accepts this report for information.

Contact: Anna Lynch, Director of Public Health, County Durham
Tel: 0191 374 4131

Appendix 1: Implications

Finance - Changes to the current public health arrangements across County Durham (for older people) will have an impact on budgets.

Staffing - No direct implications

Equality and Diversity - Social inclusion programmes and initiatives in place to address inequalities amongst older people in County Durham will need to be supported to continue.

Accommodation - No direct implications

Crime and disorder - No direct implications

Human rights - No direct implications

Consultation - Outcomes of consultation on the NHS White Paper and other new policies which develop will inform future services available for the older population.

Procurement - No direct implications

Disability Discrimination Act - No direct implications

Legal Implications - No direct implications

Appendix 2

Annual Report of the Director of Public Health 2009/10: Keeping Older People Healthy In County Durham and Darlington

Key messages:

- **The number of older people is increasing nationally and locally due to improvements in health and social care.** By 2020 in both County Durham and Darlington over 40% of the total population will be aged 50+ and 10% will be aged over 75 years.
- **The population of County Durham and Darlington is ageing.** Income deprivation in older people is worse in Durham and Darlington than the rest of England. Although death rates for COPD are lower than the England average in Darlington, for all other major causes of death County Durham and Darlington have higher mortality rates than the England average, and for cardiovascular disease and stroke death rates are higher than the regional average. **Focused work to tackle these local issues, such as the NHS Health Checks programme to address cardiovascular disease, form the basis of this report.**
- **The recent change in government administration clearly has a significant impact on policy direction for older people.** Outcomes of consultation on the NHS White Paper and other new policies that develop will inform future services available for the older population. There is therefore a collective responsibility for all stakeholders to provide input into any consultations on such policies with the ultimate aim of commissioning and providing the best services for older people locally.
- **Flu is easily and widely spread and can put those most vulnerable at increased risk of serious illness and even death.** Flu is easily prevented by an effective vaccination which is needed every year, ideally given BEFORE the onset of winter.
- **NHS Health Checks programme is working well and needs to maintain momentum to counter the high local prevalence of cardiovascular disease and stroke.**
- **Screening for conditions more prevalent in later life is an important approach to staying healthy.** Screening programmes for breast cancer, bowel cancer, diabetic retinopathy and abdominal aortic aneurysm therefore play a significant role in early detection of disease and reducing morbidity and mortality in later life.

- **Safeguarding adults is a key responsibility of everybody and one that has quickly developed a high profile, particularly in the last ten years as people have become more aware of ‘vulnerable’ adults experiencing harm in institutions, in their own homes and in the community.**
- **Participation in physical activity declines significantly with age for both men and women, with numbers of those achieving more than 30 minutes of at least moderate intensity activity decreasing with age. This reduces health overall and increases the risk of falls.** It is therefore vital that the co-ordination and delivery of age appropriate physical activity opportunities continue to be developed and supported and address barriers associated with this age group.
- **Smoking is one of the most significant factors underlying the differences in the health and life expectancy of the wealthiest and the poorest in our society.** The implementation of international, national and regional tobacco control programmes delivered and driven locally via partners within local tobacco control alliances, will address these smoking derived inequalities within our communities.
- **There is the need to raise awareness of alcohol related harms in older people through information, education and training.** Improved identification of misuse, targeted interventions, referral to treatment and support services need to be further developed, including specific support for carers. Data on alcohol use in older people needs to be improved.
- **Good nutrition can help to combat chronic disease and undernutrition predisposes to disease and adversely affects its outcome. (This also has important economic implications as it increases complications of disease and delays recovery from illness).** By implementing the Food and Health Delivery Plan 2008-2011, County Durham and Darlington Community Health Service staff will ensure that older people and partner agencies with a remit for older people’s health are targeted for future training courses and that consistent messages are promoted concerning nutrition in later life.
- **A significant rise in the older population and in related mental health problems is predicted in the next 10-15 years.** Addressing the wider determinants of health is essential in order to address mental wellbeing in later life. Public education with regard to tackling stigma and understanding dementia needs to be prioritised.
- **When older people suffer from an accident or fall, it can significantly influence their physical and mental ability to recuperate and rehabilitate to their optimum health and social capacity.** In County Durham and Darlington, the NHS and the local authorities have jointly commissioned a number of integrated services to reduce the risk of falls and the implementation of these should be maintained and prioritised.

- **Social inclusion and benefit maximization are key priorities for both County Durham and Darlington. Rural areas pose additional problems to older people.** Access to good quality advice and information including benefit maximisation is essential to enable older people to make the best use of services and maintain their independence, quality of life and promote their social inclusion. Existing significant partnership working and new initiatives should be maintained to address these priorities.
- **Excess winter deaths are higher in the North East than elsewhere in the country and the North East is the region with the highest rates of fuel poverty.** Local figures in Darlington and County Durham reflect these rates. To address this in County Durham and Darlington, appropriate links need to be made to other NHS programmes, particularly flu and winter planning. It is also essential to continue and improve partnership working on fuel poverty.
- **Dignity is the essence of care and should be at the heart of everything delivered for patients and clients. Within health and social care staff are volunteering to become dignity champions.** Part of the dignity and respect agenda means that commissioners of NHS care must ensure compliance with national requirements for same-sex accommodation provision in hospital wards.
- **Older people are telling us that they want to remain physically and mentally healthy, retaining their independence and ability to carry out everyday tasks.** To make this possible, older people want to have access to exercise, social and learning opportunities and affordable, healthy food. Older people are often unaware of help and services available therefore agencies also need to consider how they convey this information.
- **Having an adequate income is essential if older people are to maintain a decent standard of living – eating properly, heating their homes adequately and being able to afford to socialise.** Many older people are not claiming the welfare benefits to which they are entitled and long term action is required to address this issue and that of fuel poverty.
- **Effective health protection relies on good partnerships between the PCTs, HPU (Health Protection Unit), local authorities and others.** It is vital that these effective partnerships are maintained and strengthened following the future changes likely in the NHS and local authorities.
- **NHS County Durham and Darlington commissioners have challenging Clostridium difficile targets and a challenging MRSA objective to meet across the region. Work is required with all providers in order to achieve this.**
- Work on antimicrobial prescribing and stewardship needs to continue within secondary care and become more focused in primary care in order to achieve the reduction in Clostridium difficile infection across the ageing population of County Durham and Darlington.