

Cabinet

25 January 2012



Annual Report of the Director of Public Health County Durham and Director of Public Health Darlington 2010/11

**Report of Corporate Management Team
Report of Anna Lynch, Director of Public Health, County Durham
Councillor Lucy Hovvels, Cabinet Portfolio Holder for Safer and Healthier Communities**

Purpose of Report

1. This report presents the joint 2010/11 annual report of the Director of Public Health for County Durham and the Director of Public Health for Darlington. The report is available in the Members library.

Background

2. The annual report of the DPH is an independent professional statement about the health of local communities, based on sound epidemiological evidence and objectivity. Directors of Public Health in PCTs were tasked with publishing an annual report by the Chief Medical Officer.
3. The aims of the independent annual report are to:
 - Contribute to improving the health and wellbeing of local populations
 - Reduce health inequalities
 - Promote action for better health through measuring progress towards health outcomes
 - Inform the planning, commissioning and monitoring of local programmes and services that impact on health locally.
4. The annual report for 2010/11 is different to those published over the last four years in that it is a 'slimmed down' version that highlights some of the key public health programmes across County Durham and Darlington. The report references earlier board reports and specific annual reports that are publically available, either through the PCT website or on request.

5. In addition, the reader is directed to the two joint strategic needs assessments, both available on the PCT and the local authorities' websites. Further information on all public health programmes can also be found in the public health business plan.
6. Former DPH annual reports included a chapter that provided updates and progress on recommendations made in the previous year's report. This is being captured by a project undertaken by a public health specialist registrar based within NHS County Durham and Darlington as part of the national training programme.
7. In addition, former reports included a chapter provided by the Health Protection Agency North East (HPA NE) on local health protection related issues. The HPA NE has changed its reporting method and for 2010/11 has published two north east-wide reports which are available on request. These are 'Protecting the population of the north east from communicable diseases and other hazards, annual review 2010' and 'Protecting the population of the north east from communicable diseases immunisation report 2010'.

Key messages

8. County Durham has higher uptake rates than the North East and the England average for most childhood immunisation programmes but needs to reach a 95% uptake rate for each one to ensure children are protected from specific diseases. The One Point integrated children and young people's service has an important role to play by encouraging parents to have their children vaccinated.
9. The seasonal flu vaccination is highly protective of pneumonia, hospital admissions and deaths from flu in the elderly and at risk groups. A higher uptake rate is necessary to ensure as many vulnerable and at risk individuals are protected in County Durham. Staff working with these clients groups should promote the seasonal flu vaccination.
10. During the NHS transition year 2012/13 it is important that emergency planning and resilience infrastructure and plans are robustly sustained to protect the health of communities in County Durham. The DPH must continue to ensure these plans are in place.
11. Cardiovascular diseases (coronary heart disease and strokes) are the main causes of deaths in County Durham accounting for almost one third of all deaths between 2007 and 2009.

Early deaths (under 75 years) from CVD have fallen by 56% in County Durham since 1995, faster than the England average but still account for 26% of all early deaths in County Durham residents.

Reducing early deaths from CVD requires action by partner organisations. The Durham County Council Healthy Heart Programme

is a comprehensive starting point together with development of the NHS Health Checks programme.

12. Cancer is the second most common cause of death in County Durham after CVD. Earlier diagnosis of cancer could prevent 200 deaths a year in County Durham. Good progress is being made on raising awareness of symptoms and signs and the death rate for cancer is reducing. Screening is very important in reducing deaths from cancer and both breast and cervical screening rates are higher than both the NE and England average.
13. Smoking remains the major cause of lower life expectancy, higher heart disease and cancer rates in County Durham. For this reason tobacco control and smoking reduction remains a top priority and work through the County Durham Tobacco Alliance should continue to be supported by partner organisations.
14. Alcohol consumption remains a major public health issue in County Durham with hospital alcohol related admissions one of the highest in the UK for both adults and young people under 18. Partners should continue to support the multi-agency strategy and action plan to reduce the impact and harm alcohol causes in communities across County Durham.
15. Reducing teenage pregnancy continues to be challenging in County Durham but there has been a reduction in the rate of almost 20% since 1998. Although very positive, County Durham is still significantly higher than the England average and the emphasis on partnership working to reduce the rate further must be maintained.

Recommendation

Cabinet is requested to:

- receive the joint annual report of the Director of Public Health for County Durham and the Director of Public Health for Darlington,
- note the different report format and references to publically available documents
- note the key messages that inform partner organisations commissioning plans
- note that from 2013 Directors of Public Health will be employed by local authorities and will be directed under the Health and Social Care Act to publish an independent annual report about the health of local communities.

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Appendix 1: Implications

Finance

No implications directly from the report but potential implications related to commissioning in response to identified health needs.

Staffing

No implications from the report.

Risk

Independent DPH annual report will be a statutory responsibility for all local authorities.

Equality and Diversity/Public Sector Equality Duty

DPH annual report provides evidence that whole population health needs are assessed and considered.

Accommodation

No implications.

Crime and Disorder

No implications.

Human Rights

No implications.

Consultation

No need for consultation. DPH annual report is independent and based on health needs identified by the DPH.

Procurement

No implications unless report outcomes lead to commissioning changes.

Disability Discrimination Act

No implications.

Legal Implications

No implications.