

25 March 2015		ITEM: 13
Council		
The 2014 Annual Public Health Report		
Wards and communities affected: All	Key Decision: Non-Key	
Report of: Councillor Barbara Rice, Cabinet Member for Adult Social Care and Health		
Accountable Head of Service: Debbie Maynard, Head of Public Health		
Accountable Director: Roger Harris, Director of Adults, Health and Commissioning / Andrea Atherton, Director of Public Health		
This report is public		

Executive Summary

The Health and Social Care Act 2012 requires the Director of Public Health to prepare an independent report on the health of the people in the area of their local authority each year. This year the focus of the Thurrock Annual Public Health Report is on the health and wellbeing of older people.

1. Recommendation(s)

1.1 That the contents and recommendations of the 2014 Annual Public Health Report be noted.

2. Introduction and Background

2.1 Annual Public Health Reports have played an important part in public health practice ever since the early days of Medical Officers of Health. They remain an important vehicle for informing local people about the health of their community as well as providing the necessary information for decision makers in local authorities and local health services on key priorities that need to be addressed to improve the health and wellbeing of the population.

2.2 The Annual Report of the Director of Public Health is intended to be an independent assessment of the health of the community based on sound epidemiological evidence and interpreted objectively. With the transfer of public health into local authorities, the Health and Social Care Act 2012 has placed a statutory duty on the Director of Public Health to prepare an Annual Report and on the local authority to publish it.

3. Issues, Options and Analysis of Options

The 2014 Thurrock Annual Public Health Report: Key Issues

- 3.1 This year's Annual Public Health Report focuses on the health and wellbeing of older people. Thurrock has a lower proportion of people aged 65 years and over compared to the England average (13.6% of the total population compared to 17.3% respectively). However, the number of older people in Thurrock is set to increase substantially over the next 20 years, with the greatest increase in those aged 85 years and over. There are significant implications for health and social care services associated with managing issues arising from an ageing population.
- 3.2 The health and well-being of older people is influenced by an interplay of the determinants of health, such as poverty and housing, genetic factors and lifestyle behaviours. This makes it vitally important for agencies and communities to work together to ensure that older people have active, independent and fulfilling lives for as long as possible.
- 3.3 To ensure the health and wellbeing of the growing numbers of older people there needs to be greater focus on health promotion and disease prevention in old age. The evidence suggests that making healthy lifestyle choices particularly at the age of 40-60 years can have a marked impact on health in later years, including a reduction in the risk of developing cardiovascular disease, cancer, other long term conditions and dementia.
- 3.4 In 2012/13, it is estimated that only 41.89% of people with dementia in Thurrock had received a formal diagnosis. Further work is required to reduce this 'dementia gap' to ensure that people with dementia, and their family and carers have early access to services and support.
- 3.5 Disability -free life expectancy in people aged 65 years and over is significantly lower for males and females in Thurrock compared to the England average. Respiratory conditions including chronic obstructive pulmonary disease and pneumonia, and urinary tract infections are the most common causes of emergency hospital admission for people aged 65 year and over in Thurrock. A review of respiratory services has been undertaken by Thurrock Clinical Commissioning Group.
- 3.6 Carers play a vital role in helping to maintain the independence and wellbeing of those they support. There are approximately 300 carers aged over 65 who are known to the Care and Information Advice Service in Thurrock. It is recognised that demands of being a carer can have a negative impact on their quality of life, including their ability to work, their finances and their physical and mental health. The 2012-13 Carers Survey highlighted that carers aged 65 years and over in Thurrock report a better quality of life compared to the England average.

4. Reasons for Recommendation

- 4.1 The Health and Social Care Act 2012 requires Directors of Public Health to prepare an annual report on the health of the local population.

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

- 5.1 None

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

- 6.1 The report highlights the key actions that will help to improve the health and wellbeing of people aged 65 and over in the local population.

7. Implications

7.1 Financial

Implications verified by: **Kay Goodacre**
Finance Manager

There are no direct financial implications that relate to this report however the content raises concerns for future cost pressures in Adult Social Care. Decisions arising from recommendations by the Director of Public Health that may have a future financial impact for the council would be subject to the full consideration of the cabinet before implementation.

7.2 Legal

Implications verified by: **Dawn Pelle**
Adult Care Lawyer

There are no legal implications as the report is being compiled in accordance with our statutory duty under the Health and Social Care Act 2012.

7.3 Diversity and Equality

Implications verified by: **Rebecca Price**
Community Development Officer

An equality impact assessment on the annual report of the Director of Public Health has not been carried out. The report contains key data which should inform equality impact assessments of health and social care programme areas, strategies and policy. Each programme included in the annual report identifies relevant inequalities and variations.

7.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

There are no other implications.

8. **Background papers used in preparing the report** (including their location)

Background papers are referenced in the Annual Public Health Report.

9. **Appendices to the report**

- Appendix 1 – Annual Public Health Report

Report Author:

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Adults, Health and Commissioning