



REPORT TITLE: Overview of the work of the Public Health and Communities team

Scrutiny meeting	Adult Social Care and Communities Scrutiny Committee
Chair	Cllr Lisa Spivey
Presenting Officer	Siobhan Farmer, Director of Public Health
Item Type	Overview
Purpose of Report	To provide members with an overview of the work of the Public Health and Communities team
Recommendations/ Action sought	Members to note the contents of this report.
Background Documents	Gloucestershire Joint Health and Wellbeing Strategy One Gloucestershire Interim Integrated Care Strategy Interim-Integrated-Care-Strategy-v1.1.pdf (onegloucestershire.net)
Appendices	Public Health and Communities Commissioning Intentions 23/24.
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1. Background

- 1.1. This paper presents a short overview of the work of the Public Health and Communities Hub at the Council. Officers will bring a follow-up presentation to the July meeting of the Committee and be available to answer any questions.

2. The Council's role in public health

- 2.1. Under the Health and Social Care Act 2012, responsibility for public health was transferred from the NHS to upper tier and unitary local authorities with effect from 1st April 2013. Under the Act, the County Council has a statutory duty to take appropriate steps to improve the health of the local population, including appointing a Director of Public Health, and delivering a number of mandated public health services.
- 2.2. GCC's public health responsibilities are delivered by the Public Health and Communities Hub; a core team of c. 37 WTE members of staff led by the Director of Public Health (DPH), Siobhan Farmer.
- 2.3. In line with the Council's and the DPH's statutory duties, the team's main purpose is to improve and protect the health and wellbeing of local people and reduce the differences in health outcomes and quality of life experienced by different groups. The team's vision is for Gloucestershire to be a county where everyone can thrive; where our places and communities enable people to live healthy lives and where we work with system partners to reduce inequalities in mental and physical health and wellbeing.
- 2.4. The DPH is a statutory chief officer of the local authority, accountable for the delivery of public health responsibilities, and the principal adviser on all health matters to elected members and officers. The DPH also has a vital system leadership role, working closely with ICS partners and place-based organisations in efforts to secure better public health.

3. Core elements of the public health approach

- 3.1. The factors which impact on our health and wellbeing are complex. While individual demographics and genetics play a part, our health and our individual lifestyle choices and behaviours are also influenced by the environments in which we live, work and play, and our access to healthcare.
- 3.2. Given the range of factors which influence our health, successful action requires the Council to work with its system partners, communities, and individuals. This focus on partnership is key to the work of the Public Health and Communities Hub.
- 3.3. In addition to partnership working, there are several other core elements which define a 'public health approach':
 - a focus on using data and intelligence to understand local health need and guide decision making.
 - a focus on evidence-based interventions.
 - a focus on prevention and early intervention to address the risk factors for poor health as soon as possible.
 - a focus on inequalities and those groups likely to be more vulnerable to poor health.

- a focus on the social determinants of health, such as employment, education, and the built and natural environment.
- a focus on working with communities to build on local assets and strengths.

4. Overview of our main programme areas

4.1. The Health and Social Care Act sets out a number of mandated services/functions which the Public Health team must deliver. These are:

- working with system and regional partners to ensure that there are **health protection arrangements in place to prevent and respond to** threats to the health of the local population, including infectious disease, environmental hazards, and extreme weather events.
- the provision of **public health advice to NHS commissioners** to help inform the development of healthcare services.
- the provision of **open access sexual health services** for the testing and treatment of STIs and provision of contraception.
- the **NHS Health Check programme** which contributes to the early identification and prevention of cardiovascular disease.
- the **National Child Measurement programme** which helps inform our understanding of childhood overweight and obesity and the development of weight management programmes for children and young people.
- the provision of **oral health promotion** programmes and participation in surveys to monitor oral health needs.

The team also play a central role in the development of the county's **Joint Strategic Needs Assessment (JSNA)** (a statutory requirement under the 2012 Health and Social Care Act). The JSNA provides the latest intelligence on the health of the local population to inform commissioning decisions. Appendix 1: 'Commissioning Intention 23/24' contains an overview of the key findings from the JSNA.

4.2. There are several other programmes which must be delivered as a condition of the public health grant. Firstly, local authorities must ensure there are public health services available in a local area to reduce **drug and alcohol misuse** and take steps to improve take up of and outcomes from these services. Secondly, local authorities must support the provision of the **Healthy Child Programme** (0-19 years) and commission five universal health visitor reviews for children up to age of 2.5 years. This service is delivered by the council commissioned **Public Health Nursing service**.

4.3. In addition to the services/programmes outlined above, the Public Health and Communities Hub also deliver a range of other programme areas to improve population health and wellbeing. These include:

- work to address the core behavioural/lifestyle factors which influence our health and risk of disease; enabling people of all ages to make healthier choices with respect to **smoking, physical activity, and diet/weight management**.
- work to improve population **mental health and emotional wellbeing** and prevent suicide and self-harm.
- support for the **Best Start in Life** agenda and healthy schools' programme.
- delivery of the Council's statutory duties for **domestic abuse** and the countywide domestic abuse prevention strategy.
- provision of **accommodation and community-based support** for individuals in vulnerable circumstances and/or with complex needs.
- delivery of the Council's **Build Back Better** grants programme.

4.4 The team report against a number of corporate strategic indicators covering areas such as childhood obesity, quit rates in pregnant smokers, and successful completion of drug and alcohol treatment programmes.

4.5 In recent years, the Public Health and Communities Hub have taken on new work areas which complement its focus on working with local communities. The team is currently working with district council and VCS colleagues to oversee the **Homes for Ukraine programme** and additional staff have been recruited on a temporary basis to support this work. Since the scheme's launch, the team have supported the needs of 766 sponsor households and the arrival of 1,490 Ukrainian guests in the county; and are now involved in wider programmes to address the health and wellbeing needs of refugees and asylum seekers.

4.6 The team are also responsible for leading priority objectives under the Build Back Better Council strategy which focus on the Council's commitment to listen to communities and shape services to build on local strengths. The team have led on the **Levelling Up Together grant programme**; overseeing the award of 52 grants totalling £1.5 million to community led initiatives.

5. Funding streams

5.1 The Council's Public Health functions are funded by the ring-fenced Public Health Grant which is determined nationally by the Department of Health and Social Care. The grant for Gloucestershire totalled £26.1 million in 23/24. In addition, the team receive separate Council funding which contributes to the delivery of the Domestic Abuse and Community and Accommodation Based Support (CABS) portfolios.

5.2 The Public Health and Communities team also oversee on behalf of the Council, the investment of government grant funding for domestic abuse, and grant funding for the delivery of the National Drugs strategy, as well as funding streams linked to the Contain Outbreak Management Fund (COMF) and Homes for Ukraine programme.

6. Partnerships and core strategies

6.1 As noted above, partnership working is central to the delivery of the Council's public health commitments, and the team work with system partners from across the public, private and VCS sectors.

6.2 Public Health are an active partner in the One Gloucestershire Health and Wellbeing Partnership which brings together NHS, social care, and other VCS sector partners, and the team are contributing to the development and delivery of the partnership's interim 5-year Integrated Care Strategy for the county.

6.3 Public Health are also members of the Gloucestershire Joint Health and Wellbeing Board, and are engaged in working with system partners to deliver the board's seven strategic priorities: healthy lifestyles, Adverse Childhood Experiences, mental wellbeing, housing, physical activity, social isolation and loneliness, and early years.

7. Current priorities

7.1 Appendix 1 sets out the Public Health and Communities Hub's commissioning intentions for 23/24 and includes an overview of our key strategic priorities. Recent achievements include the launch of a mental wellbeing helpline for adults providing drop-in support for people experiencing mild-moderate issues with their emotional health, and the roll out of a new healthy lifestyle/weight management service for children and young people.

7.2 We are currently taking forward the planned recommissioning of the countywide Drug and Alcohol treatment service and our adult Healthy Lifestyle Service. Work is also continuing on implementing the recommendations in the national Drugs strategy in conjunction with the new local Gloucestershire Combatting Drugs Partnership.

7.3 The team is supporting delivery of the three 'Exemplar Themes' in the One Gloucestershire Integrated Care Strategy: reducing smoking, prevention of high blood pressure, and the creation of employment and skills opportunities; and working with partners to develop a new Prevention and Health Inequalities toolkit. The resource will support individuals and organisations to learn about health inequalities and the role they can play in their reduction.

Appendix 1 Copy of the Public Health and Communities Commissioning Intentions for 23/24

Directorate	Adults (Public Health & Communities Commissioning)
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Context and Strategic Direction

The Council strategy 'Building Back Better' provides the strategic context for our work to support local communities to recover from the pandemic. We will take a lead role in delivering the Council's commitment to listen to our local communities and work alongside neighbourhoods to develop plans that build on their strengths and meet the needs and aspirations of residents.

The pandemic highlighted the inequalities facing the most vulnerable and the cost-of-living will also bring challenges for our communities. Tackling inequalities underpins our strategic direction and we will continue to prioritise work to reduce disparities in health outcomes and ensure that all residents have the same opportunities to enjoy good health and wellbeing.

As a county, we are learning to live safely with Covid and in line with the Council's statutory responsibilities for health protection, the team will continue to work with system partners to monitor the situation and provide assurance that Gloucestershire is prepared to deal with any resurgence, alongside other infectious disease threats.

The war in Ukraine is continuing to shape lives, and over the course of the last year, the team has been working with system partners to deliver the Homes for Ukraine programme, welcoming over 1,200 Ukrainians into the county (as of October 2022). This will remain a strategic priority over the next 12 months alongside work with partners to support the health and wellbeing of other migrant and refugee communities in the county.

Our local health and care system is also changing. Our strategic direction in 23/24, will be shaped by the Council's role in the *One Gloucestershire Health and Wellbeing Partnership*, the county's new Integrated Care System (ICS). As a public health team, we will work with the local NHS, social care and the wider public, voluntary and community sector to take a joined-up approach to delivering the new ICS strategy; alongside the ongoing delivery of the strategic priorities in the county's Joint Health and Wellbeing Strategy.

Needs Analysis

Our understanding of need in the local community is set out in our Joint Strategic Needs Assessment (JSNA) which is a strategic planning tool that brings together the latest information on the health and wellbeing of people who live in Gloucestershire. It tells us that overall, health outcomes are above the national average and deaths from the major diseases like cancer, heart disease and strokes are below the national average and falling.

However, there are areas of the county where residents' outcomes fall well below national averages and where, as a result, local people are more likely to depend on the services we provide. 19,415 people (3.1% of the county's population) live in areas amongst the most deprived 10% in England. We also have an ageing population. The proportion of people in Gloucestershire aged over 65 has increased from 18.7% of the population in 2011 to 21.7% of the population in 2021.¹ The proportion of people over 65 is set to increase by over 50% from the 2018 baseline by 2043, highlighting the ongoing need for effective preventative interventions across the life course that will help people to age well.

The health of people living in Gloucestershire has not been improving over time as seen in other parts of the country. Life expectancy at 65 years of age is better in Gloucestershire compared to England overall, but it is not improving in line with the national trends, especially for females. Although less pronounced than the England average, there is a gap in life expectancy between our most and least deprived areas. In Gloucestershire (2018-2020), inequality in life expectancy at birth is 7.6 for males in the most deprived areas of the county when compared to the least deprived, and 5.8 years for females.²

Evidence tells us that some individuals may be more likely to experience poorer health outcomes than others often linked to other vulnerabilities or disadvantages in their lives. This includes, but is not limited to people from ethnic minorities, those with disabilities, LGBTQ+ individuals, and people with mental ill-health. Understanding and addressing these inequalities remains a priority.

When we compare Gloucestershire to other similar areas (local authorities with a similar demographic), there are some key areas that stand out as needing additional focus.³ For example, most recent data (2019/20) shows that our prevalence of childhood obesity in reception age children, although comparable to our statistical neighbours, increased in the last year of complete data. Additionally, we exceed our statistical neighbours' average for late diagnosis of HIV, and for rates of smoking at time of delivery in pregnant women. The pandemic has impacted on many people's mental health and under 75 mortality for those with a Severe Mental Illness in the county is higher than average, and has been for some time.

It is vital that we maintain an up-to date picture of local need, particularly given the legacy of the pandemic for our communities and current economic challenges. Data is only part of the story, and we will continue to listen to our communities and build local insight into our commissioning decisions.

¹ Gloucestershire County Council. Census 2021 The First Release – a briefing.

<https://www.gloucestershire.gov.uk/media/2116831/first-release-full-briefing.pdf>

² Public Health England, Fingertips Dashboard: <https://fingertips.phe.org.uk/profile/public-health-outcomes-framework/data#page/1/gid/1000049/pat/6/ati/402/are/E10000013/iid/90362/age/1/sex/1/cat/-1/ctp/-1/yr/3/cid/4/tbm/1>

³ Public Health England, Public Health Dashboard: Gloucestershire (2020). [Healthier Lives - Area Details \(phe.org.uk\)](https://www.phe.org.uk/healthier-lives/area-details)

4. [Local Authority Health Profiles - Data - OHID \(phe.org.uk\)](https://www.phe.org.uk/local-authority-health-profiles)

Resources

The directorate receives a c.£25 million annual Public Health grant from the Government to commission our core programme of health and wellbeing services; and deliver our mandated duties. We also receive separate funding from the Council to support the provision of Community and Accommodation Based Support and Domestic Abuse support services.

The Council is receiving additional grant funding from the Department of Levelling Up and Communities (DLUHC) (currently on an annual basis) to deliver its new statutory duties under the Domestic Abuse Act 2021. Separate to this the council also expects to receive additional government funding from the Supplemental Drug and Alcohol Treatment and Recovery Grant to support the local implementation of the recommendations from the National Drugs Strategy 2021.

The team is currently administering funding received by the Council from the Government to support delivery of the Homes for Ukraine programme.

Outcomes and Priorities for the year – *headline bullets*

- Deliver on our strategic commitment to support the Levelling Up priorities in the Council Strategy; including launching the ‘Levelling Up Together’ grants programme, allocating the ‘Build Back Better’ – Councillor Grants, and continuing to work alongside our diverse neighbourhoods and communities to better understand and respond to their needs.
- Continue prioritising work to tackle health inequalities throughout all our workstreams, including championing a new Health Inequalities toolkit, and developing a county wide Anchor Institutions approach.
- Ensure we continue to build our understanding of local need and inequalities both in access to support and health outcomes; and use this insight to guide how we shape our services and work with individuals and communities.
- Work with system partners to encourage and enable individuals and communities to adopt healthier lifestyles across the life course, particularly those who face the greatest challenges.
- Continue to lead and support work to ensure that all children and young people have the best start in life, including supporting the development of Family Hubs,

embedding the new community weight management service for children and young people; and continuing our work to reduce smoking in pregnancy.

- Implement the Council's statutory responsibilities for health protection assurance; and work with system partners, including the UK Health Security Agency to oversee delivery of the county's Living Safely with Covid plan; monitor Covid-19, ensure we can deal with any resurgence, and respond to threats from other infectious illnesses.
- Deliver mandated public health functions including health protection assurance, sexual health services, oral health promotion, the National Child Weighing & Measuring Programme, NHS Health Checks, Public Health Nursing Services and providing a public health "core offer" to the ICS.
- Continue to work with system partners to lead the Homes for Ukraine programme.
- Contribute to the development and delivery of the new Integrated Care Strategy for 'One Gloucestershire'- the county's new Health and Wellbeing Partnership.
- Deliver against the 7 priorities of the Joint Gloucestershire Health and Wellbeing Strategy (Physical activity, Adverse Childhood Experiences (ACEs), Mental wellbeing, Social isolation and loneliness, Healthy lifestyles, Best Start in Life, and Housing)
- Contribute to the development of the Council and partner's plans for improving air quality and ensuring health and wellbeing are prioritised within transport, infrastructure and building plans.
- Work with system partners to support the health and wellbeing needs of individuals with complex needs and continue to manage commissioning through the Community and Accommodation Based Support Framework.
- Lead the Domestic Abuse Local Partnership Board and implementation of our statutory duties for Domestic Abuse.
- Work with partners to improve population mental health and wellbeing in line with the countywide Mental Health and Wellbeing Strategy; and roll out a new mental wellbeing helpline for adults.
- Work with our Provider and system partners to ensure a high-quality adult community drug and alcohol service is delivered and implement the recommendations in the National Drug Strategy.
- Continue to work with providers and partners to ensure access to high quality sexual health services in the county and promote the prevention and early

diagnosis of sexually transmitted infections and HIV.