

# Communities Committee

Item No.

<b>Report title:</b>	<b>Public Health Strategic Framework: Member Working Group</b>
<b>Date of meeting:</b>	<b>16 March 2016</b>
<b>Responsible Chief Officer:</b>	<b>Dr S.J. Louise Smith, Director Public Health</b>
<b>Strategic impact</b> The Working Group will: <ol style="list-style-type: none"><li>1. Propose a Public Health Strategy.</li><li>2. Discuss the key issues related to the Public Health Strategy and the impact of future savings.</li><li>3. Consider options for building a better understanding of public health across the council, with a focus on how the service contributes to Norfolk County Council priorities.</li><li>4. Examine the scope for working with localities and district councils to address public health issues.</li></ol>	

## Executive summary

At the last meeting (27<sup>th</sup> January 2016) the Committee agreed to establish a Public Health Working Group. The group met on 24<sup>th</sup> February and one of its first tasks was to agree the terms of reference and to review the Public Health Strategic Framework which sets out the public health aims.

### Recommendations

1. **To agree the proposed Public Health Strategic Framework as set out paragraphs 1.2 – 1.4**
2. **To agree the proposed Terms of Reference for the Public Health Working Group set out in Appendix A.**

## 1. Public Health Strategic Framework

- 1.1. At the first meeting of the Working group (24 February 2016) members reviewed the Public Health Strategic Framework. Our overall aim is to

*“Help the people of Norfolk live in healthy places, promote healthy lifestyles; prevent ill-health; and reduce health inequalities”*

### 1.2. What the Service Aims to do

The service proposes to:

1. **Promote** healthy living and healthy places;
2. **Protect** communities and individuals from harm;
3. **Provide** services that meet community needs;
4. Work in **Partnership** to transform the way we deliver our services

1.3. The service will

**Promote healthy living and healthy places by:**

- a) Delivering a package of health improvement and prevention services, including NHS Health Checks, and addressing obesity.
- b) Working with district councils to deliver joint programmes that address the wider issues that impact on health, such as road safety, housing, air quality, leisure services and green spaces.
- c) Developing a comprehensive approach to promoting healthy workplaces to help employer offer good jobs and reduce sick leave.

**Protect communities and vulnerable individuals from harm by:**

- d) Re-designing the drug and alcohol services to focus on moving people to a drug and alcohol free lifestyle.
- e) Leading the Tobacco Control Alliance and commission stop smoking services focussed on key vulnerable groups: pregnant women, and those living in deprived areas.
- f) Developing multi-agency working for issues such as mental health, domestic abuse and substance misuse; sexual violence, child sexual exploitation, and female genital mutilation.
- g) Continuing to assure local strategic plans for emergency planning, protection and resilience.

**Provide services that meet the needs of communities by:**

- h) Commissioning a high quality children's health visitor and school nursing service [0 – 19 Healthy Child Service] linked with children's centres, early help hubs and schools.
- i) Through the 0 – 19 Healthy Child Service, promoted health improvement for example to address obesity.
- j) Commissioning comprehensive sexual health services and implementing a sexual health prevention strategy.
- k) Providing strategic support for NHS commissioning with a focus on health and social care integration and prevention.
- l) Leading infection control and prevention in care homes.

**Support our partners to transform the way we deliver services by:**

- m) Co-ordinating the work of Health and Wellbeing Board to address the goals of integration, prevention and reduced inequalities, in relation to the priority areas.
- n) Delivering a new Joint Health and Wellbeing strategy in 2017 and a new Joint Strategic Needs Assessment.
- o) Prioritising investment in information and analysis and strengthening alignment between evidence and strategy.
- p) Undertaking analysis to monitor service performance and population health outcomes.

1.4. **By 2020 the service aims to have**

- a) High quality Health Checks with average or better uptake from deprived areas.
- b) A working partnership with Districts Councils, with a public health approach embedded in all policies.
- c) Maintained the reduction in the number of people killed or seriously injured on Norfolk's roads.

- d) Rolled out a workplace health offer with employers to reduce sickness absence and improve productivity.
- e) Re-commissioned drug and alcohol service with improved outcomes, based on recovery, delivered in the community.
- f) Reduced smoking rates amongst pregnant women and people living in deprived areas.
- g) Halved the number of people infected with HIV who do not know that they have the disease.
- h) Reduced the transmission of infections in care homes.
- i) Ensured that all looked after children under five have their health needs assessed and met.
- j) Ensured that children's development checks at 2½ years are delivered in collaboration with early years' services.
- k) Maintained the 2013 levels of teenage pregnancy for Norfolk, with further reductions in hot-spot areas.
- l) Led the implementation of the Health and Wellbeing Board's priorities: mental health, obesity, early years and dementia.
- m) Developed a new Joint Strategic Needs Assessment and reviewed the joint Pharmaceutical Needs Assessment.
- n) Used knowledge and intelligence to support the transformation to a sustainable health & social care system.
- o) Worked with business intelligence and performance to develop a single, fit for purpose approach to information and analysis across the Council.

The Public Health Strategic Framework for Norfolk will be launched on World Health Day on 7<sup>th</sup> April 2016.

## 2. Financial Implications

- 2.1. There are no direct implications arising from this report. The Finance Plan for 2016 – 2019 which supports the delivery of this strategy, was agreed by Committee on 27<sup>th</sup> January 2016. Any further financial implications, risks, issues and innovation, will be considered by the Working Group and recommendations made to this Committee, as needed.

### Officer Contact

If you have any questions about matters contained in this paper or want to see copies of any assessments, eg equality impact assessment, please get in touch with:

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