JOINT MEETING FOR THE CABINET MEMBERS OF ADULT SOCIAL CARE, SAFE AND ATTRACTIVE NEIGHBOURHOODS AND SAFEGUARDING CHILDREN AND ADULTS 6th July, 2011

Present:- Councillor Doyle (in the Chair); Councillors Beaumont, Gosling, Goulty, Lakin, McNeely and P. A. Russell.

G1. EXCLUSION OF THE PRESS AND PUBLIC

Resolved:- That, under Section 100A(4) of the Local Government Act 1972, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Paragraph 4 of Part 1 of Schedule 12A to the Local Government Act 1972 (as amended March 2006) (information relating to any consultations/negotiations).

G2. DRAFT PUBLIC HEALTH ANNUAL REPORT 2011

John Radford, Director of Public Health, NHS Rotherham, introduced the draft 2011 Public Health Annual Report.

There had been a lot of changes in Public Health over the last year since the election of the new Coalition Government which had led to the publication of a new Public Health White Paper. This built on the work of the Marmot Review and sought to tackle the major public health challenges facing communities including rising levels of obesity, alcohol and substance misuse and a high prevalence of smoking. The review had a crucial relevance to the health of Rotherham residents as it set out a framework for systematically thinking through how to reduce inequalities at a local level.

Marmot's review identified 6 high level priorities for action and evidence based objectives within each:-

- Give every child the best start in life
- Enable all children, young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure a healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill health prevention

Discussion ensued on the report together with the latest health statistics/health profile for Rotherham with the following issues raised/highlighted:-

- Life expectancy for men was 76.6 years, 1.7 years worse than the national average; 80.7 years for women, 1.6 years worse than the national average
- 10 years variation between the most deprived and least deprived parts of the Borough

- There had been a number of initiatives that had performed very well and met their objectives but did not appear to have made an impact on the Borough
- The Marmot Review argued that work should start with children under 3 years of age with all the resources available but what about secondary school aged children?
- o Need to target funding from the Council and partners at the deprived areas
- o A Joint Strategic Asset Assessment may give a different picture

The Director of Health and Wellbeing reported that the Joint Strategic Needs Assessment, which had been quite narrow in its focus in the past, would now take a slightly broader view around health determinants. It would then feed into the Health and Wellbeing Strategy, reflecting the priorities, and from that should flow the actions that would inform the Children's Strategy, Adult Strategy, Public Health and Clinical Commissioning Consortia Strategy, which would then be approved and monitored by the Health and Wellbeing Board

It was noted that the report was to be submitted to Cabinet.

Resolved:- That the format of the draft report be approved.