

## Summary Sheet

### Council Report

Health Select Commission 16.06.2016

### Title

Director of Public Health Annual Report 2015

### Is this a Key Decision and has it been included on the Forward Plan?

No not a key decision. Not on forward plan

### Strategic Director Approving Submission of the Report

Teresa Roche, Director of Public Health

### Report Author(s)

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### Ward(s) Affected

All

## Summary

This is my first Annual Report since joining the Council on the 29<sup>th</sup> June 2015 and the second Annual Report of the Director of Public Health in Rotherham since the Health and Social Care Act (2012) placed the responsibility for Public Health with Local Government.

The Director of Public Health has a statutory responsibility to produce an Annual Report and the Council has a statutory duty to publish it.

This report focusses on an analysis of some of the key issues that affect the health and wellbeing of Rotherham's Children and Young People, and explores the health inequalities that exist for children between Rotherham and the rest of England. This report describes Children and Young People's health through a life-course approach, from pregnancy and birth, through school years into young adulthood.

The Report aims to engage with professional stakeholders across the Borough, to work together to deliver on a clear set of recommendations that will help improve the health and wellbeing of our Children and Young People. The recommendations are aimed at all statutory and voluntary partners across the Borough.

The recommendations evolved from sections in the report which highlight '**our ambitions for Rotherham**'. The intention of this report is to sit alongside the Health and Wellbeing Strategy and to help inform the actions taken by the Health and Wellbeing Board. It also offers some practical interventions which will improve child health and contribute to reducing the health inequalities across the Borough. Future reports will report on progress against the recommendations and associated action plan.

## **Recommendations**

- 1.1 That the Health Select Commission receives and notes the report.
- 1.2 That the Health Select Commission consider and support the recommendations in the Report and seek further feedback on the progress made on the detailed action plan.

## **List of Appendices Included**

### **Background Papers**

The Director of Public Health Annual Report 2014 (produced by the former DPH)

### **Consideration by any other Council Committee, Scrutiny or Advisory Panel**

For Consideration by Cabinet and the Health and Wellbeing Board

### **Council Approval Required**

No

### **Exempt from the Press and Public**

No

## ***Director of Public Health Annual Report 2015***

### **1. Recommendations**

- 1.1 That the Health Select Commission receives and notes the report.
- 1.2 That the Health Select Commission consider and support the recommendations in the Report and seek further feedback on the progress made on the detailed action plan.

### **2. Background**

- 2.1 At the local level, the Health & Social Care Act (2012) gives local authorities the responsibility for improving the health of their local populations. The Act says that local authorities must employ a director of public health, and they will be supported by a new ring-fenced budget. The Act requires directors of public health to publish annual reports that can chart local progress.
- 2.2 This year's annual report is the first in a series that is planned to work through the life course, focusing on key health issues at different stages of our lives. The report looks at the importance of prenatal, childhood and young people's health issues.
- 2.3 The report identifies work already underway to tackle some of the key health issues for children and young people and highlights the areas where we need to focus our attention in the future to improve outcomes for them. From this, eight overarching recommendations have been made which prompt a partnership approach to tackle the health inequalities that exist and improve health outcomes for children and young people in Rotherham. These recommendations will be incorporated into a Specific, Measurable, Achievable, Realistic, Timely (SMART) action plan which summarises the 'what we'd like to see' actions, so that our progress will be measurable for review in the next report.

### **3. Key Issues**

- 3.1 Data from Public Health England on the health and wellbeing of Rotherham children and young people is given in its Child Health Profile.

The main issues for Rotherham children compared to the England average are:

- Children aged 16-18 not in education, employment or training (NEET)
- First time entrants to the youth justice system
- Children in poverty
- Children in care
- Children killed or seriously injured in road traffic accidents (though this indicator is based on very small numbers of deaths and varies year on year)

- Low birth weight babies
- Obese children aged 10-11 years (Year 6)
- Children with decayed, missing or filled teeth
- Mothers smoking in pregnancy
- Breastfeeding (initiation and continuation at 6-8 weeks)

#### **4. Options considered and recommended proposal**

Not applicable

#### **5. Consultation**

5.1 Consultation with Children and Young People is referred to throughout this report including the Rotherham Lifestyle Survey, which is undertaken annually with Year 7 and Year 10 pupils.

#### **6. Timetable and Accountability for Implementing this Decision**

Not applicable

#### **7. Financial and Procurement Implications**

None

#### **8. Legal Implications**

None

#### **9. Human Resources Implications**

None

#### **10. Implications for Children and Young People and Vulnerable Adults**

10.1 The report addresses how we can improve the health and wellbeing outcomes for children and young people across Rotherham and provides a focus on vulnerable groups.

#### **11. Equalities and Human Rights Implications**

11.1 The report highlights health inequalities and their impact on health outcomes for the population. Commissioned services are required to demonstrate how they meet equalities and human rights requirements.

#### **12. Implications for Partners and Other Directorates**

12.1 The recommendations from the report are a “call to action” for all partners and other directorates.

#### **13. Risks and Mitigation**

13.1 The recommendations will be supported by a comprehensive action plan, overseen by the Director of PH, which will track progress.

**14. Accountable Officer(s)**

**Teresa Roche**  
**Director of Public Health**

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