



# Doncaster Council

## Report

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Date: 5<sup>th</sup> March 2020

To the Chair and Members of the Council  
Director of Public Health Annual Report 2019

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Cllr Nigel Ball	All	No

### EXECUTIVE SUMMARY

1. The 2019 Doncaster Director of Public Health Annual Report is the fifth authored by Dr Rupert Suckling.

In an increasingly digital world, this year the delivery of the main report is as an online document which will be accessible at

<https://www.doncaster.gov.uk/services/health-wellbeing/about-public-health>

This report includes an assessment of whether or not health is improving in Doncaster. The report shows that there is a slowdown in health improvement. It also shows how averages mask inequalities between different groups of people in Doncaster. The report demonstrates how the public health grant is committed locally, how those commissioned services perform and how the public health grant and the action of the public health team and partners combine to address the most pressing local health issues.

The comparison of the performance of public health commissioned services is included for the first time. The ranking of tobacco control is based on the high rates of smoking in the in the adult population (19.6%) and smoking during pregnancy (15.9%). This national indicator does not include any data in the effectiveness of local specialist smoking cessation services. This annual report does include a call to action on tobacco control. Tobacco is still the leading cause of preventable ill health and premature deaths in the Borough. Despite high quality specialised smoking cessation services in Doncaster, as many people are starting to smoke each year as quit resulting in no overall reduction in smoking numbers.

The Best start in life indicator is made up of 2 process measures, the

percentage of new birth visits within 14 days and the percentage of children receiving an 'Ages and Stages' assessment between 2 and 2 1/2 years old. It also includes an assessment of school readiness that is improving and an assessment of breast-feeding at 6-8 weeks, which is 30%.

Whilst alcohol and drug treatment indicators are good in this report, there will be changes as to how these indicators are calculated in future years. It is likely that performance will deteriorate, as both indicators will include an assessment of unmet need.

Finally, the report provides a summary of progress on the recommendations from my previous reports and I make three new recommendations for 2020.

- Doncaster partners should continue to embed a population health approach focussed on four related activities addressing:

The wider determinants of health

Our health behaviours

The places and communities we live in and with

Integrating health and care services into an integrated health and care system

- Doncaster Council should consider an LGA prevention peer review
- Doncaster Council public health function should continue to take a sector led improvement approach to quality improvement

## **EXEMPT REPORT**

2. No

## **RECOMMENDATIONS**

3. Council is asked to NOTE, DISCUSS and PUBLISH the report.

## **WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?**

4. The publication of this report demonstrates the council's commitment to its leadership duties with regard to health improvement, health protection and health and social care quality.

## **BACKGROUND**

5. The Director of Public Health (DPH) has a statutory duty to write a report on the health of the local population and the authority has a duty to publish it (section 73B (5) & (6) of the 2006 Act, inserted by section 31 of the 2012 Act). The content and structure of the report is something to be decided locally.

## **OPTIONS CONSIDERED**

6. No other options considered.

## REASONS FOR RECOMMENDED OPTION

7. The recommendation fulfils the council's duty to publish the Director of Public Health annual report.

## IMPACT ON THE COUNCIL'S KEY OUTCOMES

8.

	Outcomes	Implications
	<p><b>Doncaster Working:</b> Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future;</p> <ul style="list-style-type: none"> <li>• Better access to good fulfilling work</li> <li>• Doncaster businesses are supported to flourish</li> <li>• Inward Investment</li> </ul>	<p>Good health and wellbeing is a contributor to increased productivity. Equally good quality work contributes to good health and wellbeing.</p>
	<p><b>Doncaster Living:</b> Our vision is for Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time;</p> <ul style="list-style-type: none"> <li>• The town centres are the beating heart of Doncaster</li> <li>• More people can live in a good quality, affordable home</li> <li>• Healthy and Vibrant Communities through Physical Activity and Sport</li> <li>• Everyone takes responsibility for keeping Doncaster Clean</li> <li>• Building on our cultural, artistic and sporting heritage</li> </ul>	<p>All these wider determinants of health improve health and wellbeing. Combining universal and targeted investment could reduce health inequalities.</p>
	<p><b>Doncaster Learning:</b> Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> <li>• Every child has life-changing learning experiences within and beyond school</li> <li>• Many more great teachers work in Doncaster Schools that are good or better</li> <li>• Learning in Doncaster prepares young people for the world of work</li> </ul>	<p>Good health and wellbeing is a contributor to improved learning outcomes. Equally good learning outcomes contribute to good health and wellbeing.</p>

	<p><b>Doncaster Caring:</b> Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> <li>• Children have the best start in life</li> <li>• Vulnerable families and individuals have support from someone they trust</li> <li>• Older people can live well and independently in their own homes</li> </ul>	<p>Universal and targeted prevention approaches can improve health and reduce burdens on health and care services.</p>
	<p><b>Connected Council:</b></p> <ul style="list-style-type: none"> <li>• A modern, efficient and flexible workforce</li> <li>• Modern, accessible customer interactions</li> <li>• Operating within our resources and delivering value for money</li> <li>• A co-ordinated, whole person, whole life focus on the needs and aspirations of residents</li> <li>• Building community resilience and self-reliance by connecting community assets and strengths</li> <li>• Working with our partners and residents to provide effective leadership and governance</li> </ul>	<p>A more connected council could support better health and wellbeing in Doncaster people and improved health and wellbeing in the workforce could increase the effectiveness of the council.</p>

## RISKS AND ASSUMPTIONS

9. There are no specific risks associated with this report.

## LEGAL IMPLICATIONS [Officer Initials NC Date 19/02/2020]

10. The Director of Public Health (DPH) has a statutory duty to write a report on the health of the local population and the authority has a duty to publish it (section 73B (5) & (6) of the National Health Service Act 2006, inserted by section 31 of the Health & Social Care Act 2012). The content and structure of the report is something to be decided locally.

## FINANCIAL IMPLICATIONS [Officer Initials HR Date 18/02/20]

11. There are no specific financial implications arising from this report.

## HUMAN RESOURCES IMPLICATIONS [Officer Initials BT Date 02/01/2019]

12. There are no specific human resource implications with this report.

### **TECHNOLOGY IMPLICATIONS [Officer Initials PW Date 31/12/18]**

13. There are no specific technology implications with this report.

### **HEALTH IMPLICATIONS [Officer Initials RS Date 18/02/2020]**

14. There are no additional health implications in this report.

### **EQUALITY IMPLICATIONS [Officer Initials RS Date 08/02/2020]**

15. This report continues to identify reducing health inequalities and addressing fairness as one of five building blocks for health and wellbeing. Health varies across the Borough and is associated with deprivation, with those living in the most affluent parts of the Borough perceiving, experiencing and having better health than those living in the less affluent parts of the Borough.

### **CONSULTATION**

16. No formal consultation has taken place to contribute to this report.

### **BACKGROUND PAPERS**

17. Director of Public Health Annual Report 2019.

### **REPORT AUTHOR & CONTRIBUTORS**

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