

28th January, 2016

**To the Chair and Members of the  
Council**

**Director of Public Health Annual Report 2015**

**EXECUTIVE SUMMARY**

1. The 2015 Doncaster Director of Public Health (DPH) Annual Report is the first authored by Dr Rupert Suckling and is the third since the transfer of the specialist public health function from the NHS to the council in April 2013.

The Annual Report describes the health of Doncaster people, what makes us healthy, how the health of Doncaster varies across different communities and population groups. The report identifies four key challenges for the council and partners:

- Improving children's health and wellbeing
- Making the link between education, work and health
- Addressing low Disability Free Life Expectancy and high levels of preventable health conditions
- Reducing inequalities in health between and within Doncaster communities

**EXEMPT REPORT**

2. No

**RECOMMENDATIONS**

3. Council is asked to NOTE 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 public health.

**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 DPH annual report.

## IMPACT ON THE COUNCIL'S KEY OUTCOMES

- 8.

	<b>Outcomes</b>	<b>Implications</b>
	<p>All people in Doncaster benefit from a thriving and resilient economy.</p> <ul style="list-style-type: none"> <li>• <i>Mayoral Priority: Creating Jobs and Housing</i></li> <li>• <i>Mayoral Priority: Be a strong voice for our veterans</i></li> <li>• <i>Mayoral Priority: Protecting Doncaster's vital services</i></li> </ul>	<p>The health and wellbeing of residents is central to developing a thriving and resilient economy.</p>
	<p>People live safe, healthy, active and independent lives.</p> <ul style="list-style-type: none"> <li>• <i>Mayoral Priority: Safeguarding our Communities</i></li> <li>• <i>Mayoral Priority: Bringing down the cost of living</i></li> </ul>	<p>The health improvement and health protection duties of the council contribute directly to this outcome</p>
	<p>People in Doncaster benefit from a high quality built and natural environment.</p> <ul style="list-style-type: none"> <li>• <i>Mayoral Priority: Creating Jobs and Housing</i></li> <li>• <i>Mayoral Priority: Safeguarding our Communities</i></li> <li>• <i>Mayoral Priority: Bringing down the cost of living</i></li> </ul>	<p>The health improvement and health protection duties of the council contribute directly to this outcome</p>
	<p>All families thrive.</p> <ul style="list-style-type: none"> <li>• <i>Mayoral Priority: Protecting Doncaster's vital services</i></li> </ul>	<p>The health improvement and health protection duties of the council contribute directly to this outcome</p>

	Council services are modern and value for money.	Integrated evidence-based partnership work to address the four challenges will contribute to this outcome
	Working with our partners we will provide strong leadership and governance.	Making progress on the challenges and then recommendations highlighted in this report will require partnership working, strong leadership and governance

## **RISKS AND ASSUMPTIONS**

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

## **LEGAL IMPLICATIONS**

10. The Director of Public Health has a duty to produce an annual report and the council has a duty to publish it (section 73B (5) & (6) of the 2006 Act, inserted by section 31 of the 2012 Act).

## **FINANCIAL IMPLICATIONS**

11. Nil.

## **HUMAN RESOURCES IMPLICATIONS**

12. Nil.

## **TECHNOLOGY IMPLICATIONS**

13. Nil.

## **EQUALITY IMPLICATIONS**

14. This report specifically examines how health varies across the Borough and describes some of the impacts of geography, ethnicity and disability health.

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.

Ethnicity impacts both on how people perceive their own health and the health that they experience. Addressing these issues may require different approaches in different ethnic groups.

25% of Doncaster people may live with a disability and 10% of Doncaster people have a disability that limits them a lot.

The report makes recommendations about how the health needs of specific protected groups should be assessed and about how the council and partners may address preventable disability.

Any policy or strategy response to this report will require the local public bodies to demonstrate 'due regard' under section 149 of the Equality Act 2010: the Public Sector Equality Duty (PSED).

## **CONSULTATION**

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

## **BACKGROUND PAPERS**

16. Director of Public Health Annual Report 2015

## **REPORT AUTHOR & CONTRIBUTORS**

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