

Delivering Public Health for North & West Northamptonshire

Northamptonshire County Association of Local Councils AGM

October 2020
Lucy Wightman



Introduction

We know that:

People are living longer, but more of us are living with long-term conditions such as diabetes and mental ill health. With inequalities such as the difference in social status, wealth, or opportunity between people or groups effecting how well we live with those conditions, living in good health, and not just living longer, should be our goal.

So we need:

Services that understand our sometimes complex needs, and can treat us as individuals.

We can do this by:

Local government organisations aligning resources, **including community assets**, with the NHS to improve and target health and care services for our local populations.



Context

Public Health Statutory Duties:

The Director of Public Health (Statutory Chief Officer* and the principal adviser on all health matters to elected members in both North and West Northamptonshire) are officers who must have specialist public health training and experience and have responsibility for leadership across the 3 main domains of public health:

- **Health Improvement** - Improvement in the health of the local population and reduction in health inequalities
- **Health Protection** - Plan for, and respond to, emergencies that present a risk to public health
- **Healthcare Public Health** - Advise the NHS and other partners on population need and evidence based interventions.

*Joint appointment by LA with SoS for Health and Social Care (executed by Public Health England)



Context

Covid-19:

In Local Authorities, Public Health continues to lead the current Covid-19 pandemic response. We are responsible for ensuring the prevention and control of Covid-19 in Northamptonshire, but this is very much a **partnership effort** not just within the NHS and Care services but across wider communities and their leaders in the County, without whom we would not be able to preserve the health and wellbeing of our population.

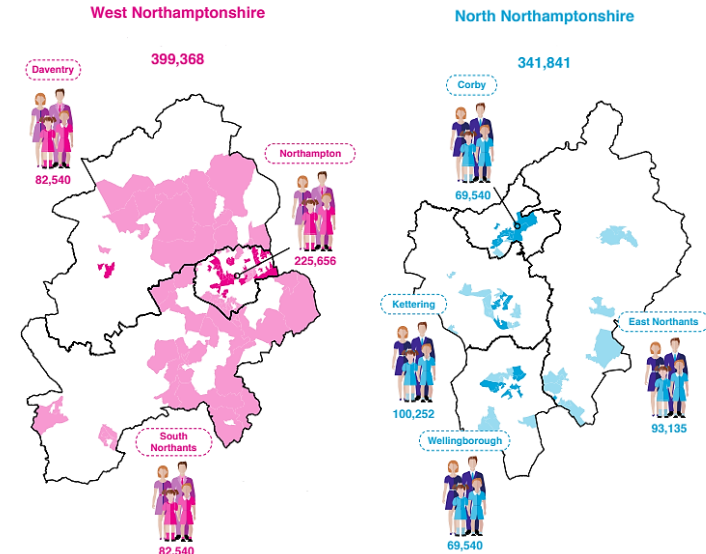
Additionally we utilise every opportunity to remind all people in the County to follow government guidance to protect ourselves and each other by **socially distancing, washing hands regularly for 20 seconds, wearing a face covering on public transport or in enclosed spaces and complying with test and trace measures.**



Context

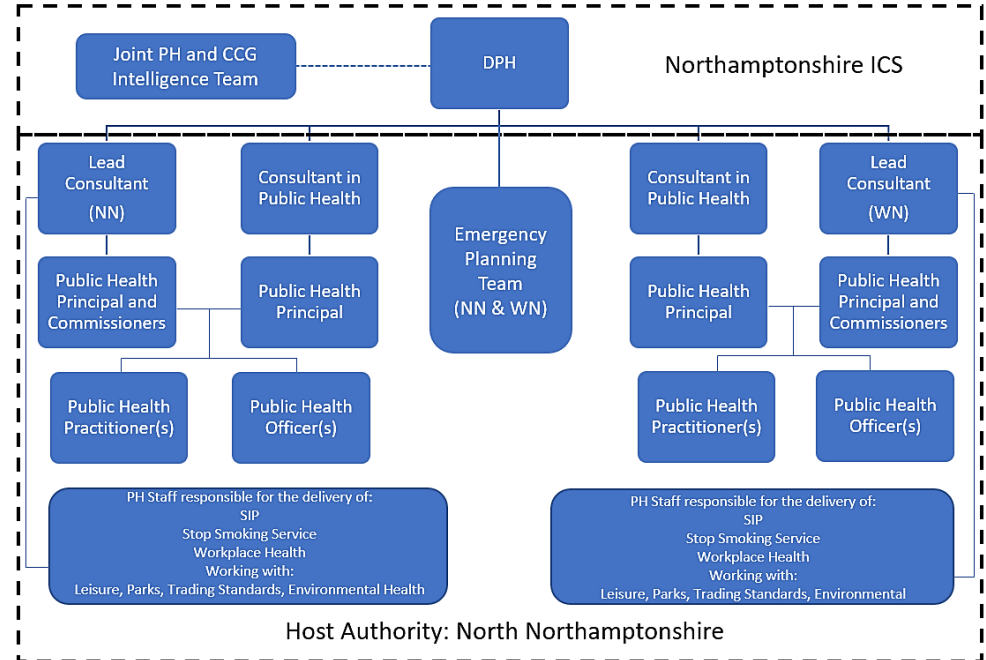
Local Government Reform:

All eight councils in Northamptonshire will be replaced with two brand new unitary authorities. One authority will provide services to residents in the west of the county, while the other will provide services in the north of the county and these new unitary authorities will be established on **1st April 2021**. Services currently provided by ourselves (NCC) and the district and borough councils will now be brought together under each of the two new unitary authorities.



Public Health Operating Model

It is currently proposed that Public Health team is hosted in North Northamptonshire (and providing our services across both authorities) with the Director of Public Health leading the service but also providing a system-wide leadership role within the Integrated Care System (ICS) in Northamptonshire. This is where NHS providers and commissioners and local authorities work in partnership, providing leadership, taking collective responsibility for managing resources and improving the health of the population they serve.



Health Inequalities

Health inequalities can exist across the whole of the life cycle:

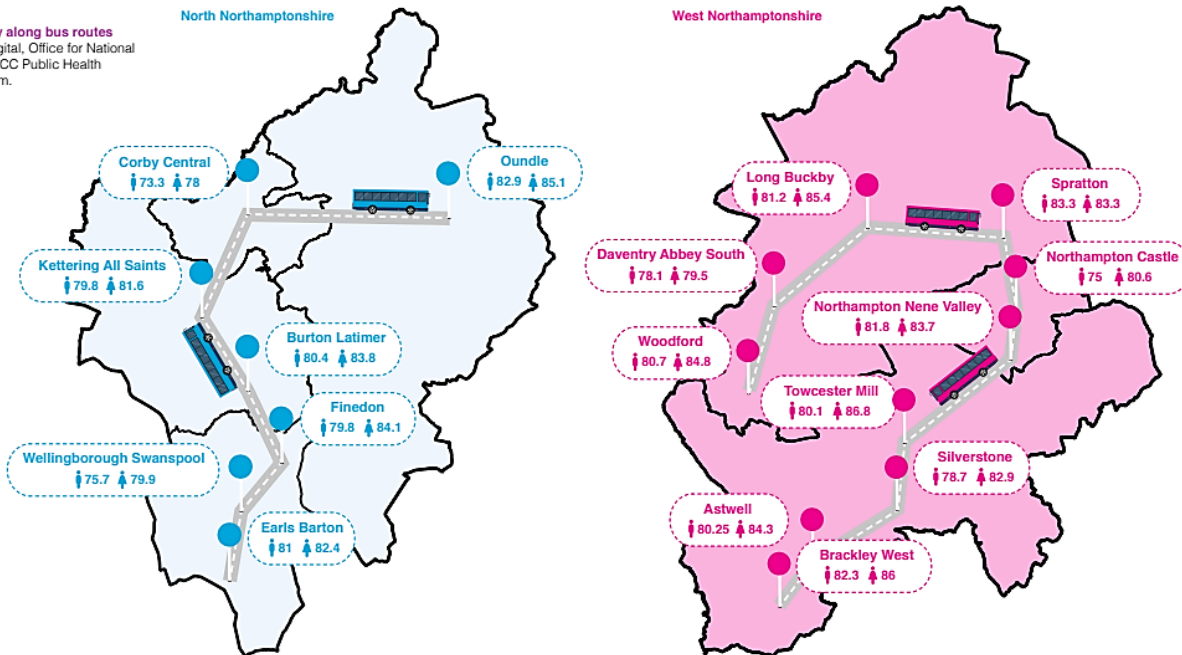
- A mother's **access to healthcare** or lifestyle factors will affect how healthy a baby is at birth
- Children growing up in more deprived areas often suffer disadvantages throughout their lives, from educational attainment through to employment prospects, which in turn affects their **physical and mental** wellbeing
- Throughout adulthood there can be **differences in health status and outcomes** such as having high blood pressure and lifestyle factors
- An older person who lives in poverty is more likely to **have ill health and frailty at an earlier age** compared to someone the same age from a more affluent background. They are also **more likely to die earlier from preventable conditions** such as heart disease, stroke, and cancer.



Health Inequalities

Life expectancy along bus routes

Source: NHS Digital, Office for National Statistics, and NCC Public Health Intelligence Team.

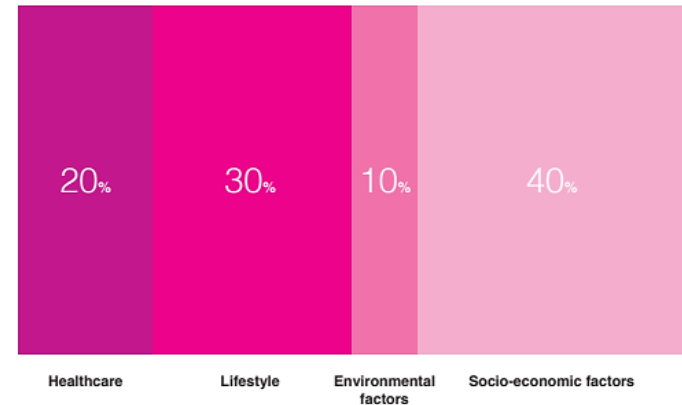


Health in All Policies

To enable communities and residents to truly flourish, we need to understand what drives our health and wellbeing. The circumstances in which people are born, grow, live, work and age provide the foundations for people to live healthy or unhealthy lives.

The relative contributions of major factors that determine our health, with social, economic and environmental factors contributing considerably to health and wellbeing. **To make sure that our towns, villages, communities and economy are all having a positive impact on health and wellbeing, and not limiting residents' ability to thrive, we can employ and approach known as "Health in all Policies".**

The relative contribution of major determinants of health
Source: Bookse et al 2014



Working in our Communities

Community determinants underpin health and wellbeing - positive health outcomes can only be achieved by addressing the factors that protect and create health and wellbeing and many of these are at a community level.

Community-centred ways of working are important for all aspects of public health, including health improvement, health protection and healthcare public health. It's not about expecting communities to do more and saving public money but about investing in more sustainable and effective approaches to reduce health inequalities.



Questions

