



Report to Healthier Communities and Adult Social Care Scrutiny and Policy Development Committee 14th September 2016

Report of: Greg Fell, Director of Public Health

Subject: Development of a public health strategy for SCC

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Summary:

This paper is the draft public health strategy for SCC, setting out an answer to a question of what Sheffield City Council as “a public health organisation” would look like. This follows the transfer of responsibility of “the public health function” to SCC from the NHS in 2013, and a period of integration. There has also been a 2015 review of this function. Iterations of this document have been to each of the PLTs on a number of occasions, and the feedback has been useful and constructive. The strategy has also been discussed in EMT, again with helpful feedback. The strategy attached incorporates that feedback.

Type of item: The report author should tick the appropriate box

Reviewing of existing policy	
Informing the development of new policy	x
Statutory consultation	
Performance / budget monitoring report	
Cabinet request for scrutiny	
Full Council request for scrutiny	
Community Assembly request for scrutiny	
Call-in of Cabinet decision	
Briefing paper for the Scrutiny Committee	
Other	

The Scrutiny Committee is being asked to:

The committee is asked to consider the draft strategy in terms of the key messages, the length and depth, the specific areas suggested for early priority. Specifically feedback and comment is requested on whether the strategy provides a clear enough narrative and is appropriately ambitious.

Finally the committee is asked to consider issues of alignment of this work with other plans and strategies.

Background Papers: Draft Public Health Strategy
Category of Report: **OPEN**

Report of the Director of Public Health –
Development of a public health strategy for SCC

1. Introduction/Context

- 1.1 The ambition is to achieve a strategy that sets the direction of travel for “Public Health” (in the broadest possible sense of the words) that doesn’t override existing plans, but enhances them. The ambition is also to engage a wider set of stakeholders into “public health”.
- 1.2 This strategy is a statement of intent and is deliberately not voluminous. It is not intended to replace existing plans and strategies, but to boost their implementation, to signal opportunities to further enhance progress against our priorities, and a tool to provoke debate on where more ambitious/radical approaches need exploring. This strategy should also be a tool to change the debate about “health” to something that is considerably wider than “health services” and considerably further upstream than the current debate.
- 1.3 The strategy was developed following a 2015 review of the public health function and some linked external work undertaken by the Kings Fund. Specifically

2. Structure of the draft strategy

- 2.1 Critical to the success of this strategy is the ability to shift the deployment of the current resource commitment (upstream), to maximise the health and well being impact of all SCC activities and to link agendas together that have not been historically linked.
- 2.2 The aim of this strategy is to increase healthy life expectancy by 1 year over the next 10 years, explicitly focused on improving fastest in those with lowest healthy life expectancy. If achieved this equates to 560,000 person years of illness and disability avoided. The benefits of this in terms of care costs avoided are obvious. It also equates to an impact on the productivity of the economy.
- 2.3 There are 4 objectives. The objectives reflect some substantial areas where we would like to see some progress.
- 2.4 There isn’t a single big intervention that will resolve the challenges of the city in this area. An approach based on a range of interventions including education, service provision, regulation and structural or policy initiatives will be needed.

- 2.5 The strategy does not set out all the areas for detailed work on interventions beyond the headlines below. The identified early priorities below are a combination of easy wins, big gain areas and strategically important issues.
- 2.6 Obviously this needs to link to, and influence a wide range of other strategies and programmes without rewriting them. The strategy is clear that the Public Health Grant (transferred from NHS in 2013) will not “solve” the health and well being challenges for the city; to meet that challenge it will be necessary to influence a much larger resource commitment.
- 2.7 The draft strategy has not yet been through the cabinet process and the purpose of bringing it to scrutiny is to solicit views from members of the committee on the content and aims set out. It is intended this draft will go to Cabinet towards the end of the year.

3 What does this mean for the people of Sheffield?

- 3.1 It is fair reflection that the strategy as it is currently drafted is not particularly public facing. This is an issue that will be addressed. The intention is to set out the position of SCC with regard to “public health” and provide a narrative for a debate.
- 3.2 The intention is to clarify the role of SCC as “a public health organisation” and push towards a more preventive approach.
- 3.3 Obviously there isn’t a single intervention, or set of interventions that will by themselves address the central challenge of improving healthy life expectancy and health inequalities. The intention of the strategy is to begin to mobilise the resource deployment of SCC around the aims.
- 3.4 There is some further work to undertake around aligning this work with already existing (or developing) plans and strategies. There is also some further work to do around providing some specific examples & case studies.

4. Recommendation

- 4.1 The committee is asked to consider the draft strategy in terms of the key messages, the length and depth, the specific areas suggested for early priority. Specifically feedback and comment is requested on whether the strategy provides a clear enough narrative and is appropriately ambitious. Finally the committee is asked to consider issues of alignment of this work with other plans and strategies.

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