

Report to:	Overview and Scrutiny Committee (Adult Social care)	Date of Meeting:	21 June 2022
Subject:	Public Health Outcomes Framework (PHOF)		
Report of:	Director of Public Health	Wards Affected:	All Wards
Cabinet Portfolio:	Cabinet Member - Health and Wellbeing		
Is this a Key Decision:	No	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

To provide members of the committee with an update on the Public Health Outcomes Framework.

Recommendation(s):

(1) Members are requested to receive the report previously received at Cabinet Member for Health and Wellbeing brief in March 2022.

Alternative Options Considered and Rejected: (including any Risk Implications)

none

What will it cost and how will it be financed?

(A) Revenue Costs

No additional costs identified within this report

(B) Capital Costs

No additional costs identified within this report

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets): Not applicable
Legal Implications: Not applicable

Equality Implications:

There are no equality implications

Contribution to the Council's Core Purpose:

Protect the most vulnerable: Data is used to identify vulnerable populations.
Facilitate confident and resilient communities: Data helps identify possible harmful and protective factors impacting on local communities.
Commission, broker and provide core services: Data informs strategic and service delivery response to community needs.
Place – leadership and influencer: Framework enables comparison with other areas highlighting outcomes that require further scrutiny.
Drivers of change and reform: Data measures key health and wellbeing indicators that are used to plan and monitor the impact of the health and social care system as well as wider social policy.
Facilitate sustainable economic prosperity: not applicable
Greater income for social investment: not applicable
Cleaner Greener: not applicable

What consultations have taken place on the proposals and when?

The Executive Director Corporate Resources & Customer Services (FD 6825/22) has been consulted and notes the report indicates no direct financial implications for the Council in respect of these proposals

Chief Legal and Democratic Officer has been consulted and has no comments on the report (LD 5025/22/22)

(A) Internal Consultations

Not applicable

(B) External Consultations

Not applicable.

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Appendices:

Cabinet Member Update Report – Health and Wellbeing – Public Health Performance Framework - Briefing

Background Papers:

There are no background papers available for inspection.

1. Introduction/Background

The Public Health Performance Framework uses 26 indicators from the Public Health Outcomes Framework (PHOF) to describe the scale and distribution of health problems, their underlying causes and associated health inequalities, and is usually updated on a six-monthly basis at Health and Wellbeing Cabinet Member Briefing.

The report includes information about past, current and planned improvement actions, with a focus on Public Health services and wider programmes. It also continues to highlight the ongoing impacts of COVID-19 on services, population health needs and inequalities.

2. Key points are:

Sefton continues to reap rewards of good progress on smoking, but alcohol use and obesity are significant issues for the medium and long-term health chances of the population.

Health inequalities in Sefton are deeper than in many parts of England and are part of a bigger picture of north-south health inequality. Coronavirus has exacerbated health inequality, but data is only beginning to emerge in PHOF data.

Continuing socio-economic pressures present a clear added risk to health and wellbeing in terms of pandemic recovery and signal another series of big challenges for improving population health and reducing inequality. National, regional, and local action are all necessary to interrupt the trends described in the report.

Sefton's services are increasingly oriented towards joining up support across multiple health determinants. As individuals, communities and whole populations our health and wellbeing are constantly shaped by different influences - by behaviours like alcohol use, by the effectiveness and accessibility of health and care services, by the support available from social and community networks and by the environment around us. By working in partnership public health and other services can draw these threads together – building more effective and more cost-effective support, and better enabling communities and individuals to tap into their resourcefulness. Equitable approaches to pandemic recovery are essential to secure everyone's health, social, and economic prospects and are an investment in our pandemic resilience.

3. Encouraging trends and performance are seen in:

- Relatively lower rates of preventable, premature respiratory disease compared to local authorities in Liverpool City Region and other similar areas
- Reduced smoking in pregnancy, which has fallen in line with the national average and improved at a faster rate than in most of the North West.
- Improvements in successful drug treatment outcomes
- The continued fall in suicide rate, bringing Sefton back in line with the national average

4. Areas of concern include:

- In 2018-20, Sefton has the largest gap in life expectancy at birth in the north west - 14.2 years in men and 12.3 years in women. This reflects continuing large differences due to the influence of health determinants across the life course, and some of the two times higher mortality rate from Coronavirus in people from most compared to least deprived areas, which is also seen nationally
- The rate of preventable mortality from cardiovascular disease in under 75s is rising faster than the national trend. The same indicator for cancer showed a larger than average uptick in Sefton between 2019-20, and liver disease mortality increased by two thirds in women and one third in men
- All three low wellbeing (low satisfaction, high anxiety, low happiness) indicators show big increases in 2020/21 compared to 2019/20, reflecting the population-wide impact of the pandemic on mental wellbeing

5. Actions

Members are requested to receive the report previously received at Cabinet Member for Health and Wellbeing brief in March 2022.