

Report to:	Health and Wellbeing Board	Date of Meeting:	Wednesday 8 March 2023
Subject:	Report on the Public Health Annual Report 2022/23: Ageing in Sefton		
Report of:	Director of Public Health	Wards Affected:	(All Wards);
Portfolio:	Health and Wellbeing		
Is this a Key Decision:	N	Included in Forward Plan:	No
Exempt / Confidential Report:	No		

Summary:

The purpose of this briefing is to present the final draft Public Health Annual Report 2022 (PHAR) on Ageing in Sefton for noting and consideration by the Board. Production of an independent report on one or several aspects of health in the local population or in a specific population group is a statutory requirement upon Directors of Public Health.

This report provides an overview of how the PHAR was developed; structure and content; key conclusion and recommendations; and plans to publish and disseminate the report.

Recommendations:

Board members are recommended to,

- (1) Note this report and the accompanying final draft PHAR 2022, and provide any comment, feedback, or suggestions.
- (2) Affirm and support plans for publication and dissemination of the report.

Reasons for the Recommendation(s):

The PHAR contains valuable, up to date information about the challenges, opportunities, and experiences in the lives of senior Sefton residents. The report findings and recommendations can be put to good use by those with formal roles and responsibilities in the Health and Care system and in allied Community, Voluntary and Faith Sector organisations. The main report and other, more accessible versions and formats also aim to reach as many community and public stakeholders as possible, to support ongoing engagement on issues relevant to the needs and capabilities of senior adults.

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

None. Publication of an Annual Report is a legal duty of the Director of Public Health, and there are no pandemic dispensations in place.

What will it cost and how will it be financed?

(A) Revenue Costs

Production of the report has been resourced largely through commitment of time and effort of members of the public health Team, and support teams – Business Intelligence and Communications.

(B) Capital Costs

There are no direct capital costs associated with the recommendations in this report.

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):

As indicated in (A) resourcing was met from within the routine activities of the public health and other Council teams.

Legal Implications:

The Public Health Annual report is the independent report of the Director of Public Health. Health and Social Care Act 2012 sets out the legal requirement to produce and publish a report each year.

Equality Implications:

The equality Implications have been identified and mitigated.

Climate Emergency Implications:

The recommendations within this report will

Have a positive impact	
Have a neutral impact	Y
Have a negative impact	
The Author has undertaken the Climate Emergency training for report authors	Y

The recommendations in this report are advisory and do not specifically identify actions relating to energy sources or use, or the reduction or mitigation of climate impacts. However, the PHAR does highlight relevant issues, for example fuel poverty and the benefits of compact communities, served by active travel and sustainable transport options.

Contribution to the Council's Core Purpose:

Protect the most vulnerable:

The central theme of this report is the health and wellbeing of older people and what more we can do to promote healthy, happy ageing for all. The report examines a range of evidence, including the views of seniors themselves, about the things that risk and protect their health and wellbeing, and what contributes to or lessens a sense of vulnerability. This information can help inform the design and delivery of services and

other forms of support that help to protect the most vulnerable. It will also challenge a view of older age as a time of inherent vulnerability and how the language used about older people and ageing affects everyone.

Facilitate confident and resilient communities:

This report serves this core purpose in three main ways. It places considerable emphasis on the benefits of preventative care and healthy behaviours at any age; it highlights the key value of social and spatial connectedness for people of all ages, and it promotes a concept of senior people in our community as active, productive participants who can change the places we live for the better.

Commission, broker and provide core services:

The combination of epidemiological data, public health evidence and first-hand accounts provides a rich source of information about the needs, capabilities, and experiences of senior adults in Sefton, which can inform many aspects of work relevant to this core purpose.

Place – leadership and influencer:

This report captures the value of important aspects that already show Sefton's leadership and influence in the area of age and ageing – for example, our status as an Age Friendly Community, the Sefton Older People's Strategy, the work of the Dementia Forum and Older People's Forums. The report also uses case studies to highlight instances of good practice that exemplify the how learning points from the report can be implemented.

Drivers of change and reform:

The basis of most of the six recommendations in this report is less about what should be changed or reformed and more about how changes to improve health and reduce inequalities in health can be made. For example, taking a fresh look along with senior adults about how we communicate, where people would prefer to get information from, and the language we use.

Facilitate sustainable economic prosperity:

There are no proposals that directly facilitate economic prosperity. However, the report does raise the profile of the productive work that seniors bring to their communities, whether as carers, volunteers or in the workplace. The report also shows the societal and economic costs of health inequality and the benefits of prevention at every step.

Greater income for social investment:

N/A

Cleaner Greener:

As noted under climate emergency implications

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD7156/23.....) and the Chief Legal and Democratic Officer (LD.5356/23....) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

A formal proposal to undertake focus groups in community groups used by senior adults was signed off virtually by the Consultation and Engagement Panel in mid-October.

Focus groups took place in community venues in North, Central and South Sefton during November. They reached 28 individuals - 11 men and 17 women, whose ages ranged from 50 to 86 years-old. Groups were facilitated by a member of the public health team and a member of the communications team. Detailed plans and resources, for example participant information sheets and consent forms, were drawn up and used according to established ethical research practice.

The purpose of the focus group was to capture relevant thoughts, opinions and experiences of people living in Sefton on the topic of ageing. This information was analysed and presented as themes and anonymised quotations in the PHAR.

Implementation Date for the Decision

Immediately following the Committee meeting.

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Appendices:

The following appendices are attached to this report:

Final Draft PHAR 2022 PDF document.

Background Papers:

There are no background papers available for inspection.

1. Introduction

The purpose of this report is to present the final draft Public Health Annual Report 2022 (PHAR) on Ageing in Sefton for noting and consideration by the Board.

The information provided covers:

- Report development
- Structure and content
- Report conclusions and recommendations
- Publication, formats, and dissemination

2. Background

The PHAR is a statutory requirement upon Directors of Public Health. It is an independent report about one or several aspects of health in the local population or in a specific population group.

There is an expectation that a PHAR should include some health statistics as well as other types of information and be presented in an accessible, public-facing format. The Annual Report is a useful means of spotlighting particular issues and supporting positive change in key areas of population health by further engaging a broad range of stakeholders.

This topic was selected for several reasons,

- It has been several years since Sefton devoted the PHAR to the health and wellbeing of a specific age group
- Sefton has a larger than average proportion of older people in its population
- The needs and capabilities of older people have been highlighted during the Coronavirus pandemic and the impact of rising cost of living
- Local Health and Care strategies take a life-course and preventative approach to health equity, which recognises the cumulative effect of health determinants from birth to oldest age
- This is an important opportunity to challenge negative stereotypes and language around ageing that often centre on concepts of deficit, loss, suffering and demand

This PHAR combines evidence-based health information and data with the voices of senior residents themselves, to present a more balanced, nuanced, and positive view of ageing. The report has tried to capture the pleasures and meaning in later life; as well as fears, frustrations, and some myths; and the creativity and energy which Sefton's senior residents bring to their communities. The recommendations encourage everyone to value older people, by supporting their participation and independent voice.

2.1 Report development

The scope and structure of this report was agreed with the assistance of a small task and finish group comprising public health, business intelligence, and communications colleagues, as well as representatives from Community, Voluntary and Faith sector organisations with experience of working with or advocating for older people.

This phase took place in summer 2022 and was very helpful to identify illustrative case studies, align plans for focus groups with the report themes, and to consider how tone, language and formats could improve reach and accessibility of the final report.

Members of the public health team led on scoping out the report and developing plans and resources to undertake qualitative insight work. This involved organising short focus groups to capture the thoughts, opinions and experiences of people living in Sefton on the topic of ageing. The formal proposal was signed off virtually by the Consultation and Engagement Panel in mid-October.

Focus groups took place in community venues in North, Central and South Sefton during November. They reached 28 individuals - 11 men and 17 women, whose ages ranged from 50 to 86 years-old.

2.2 Structure and content

The final scope of the report retains all the key points identified in the initial Cabinet Member Briefing for this PHAR, presented in May 2022. However, a more logical flow was developed for the report chapters, as follows:

- **Talking about ageing** – explores what terms like ‘ageing’ and being ‘old’ mean.; and confronts ageist stereotypes and language, showing how these affect seniors in everyday life. The use of the term ‘senior’ in the report came through focus groups discussions on this topic.
- **Sefton’s population** - shares some basic facts and figures about the number of older adults living in Sefton compared to other places and introduces concepts around health determinants and inequality.
- **Health of older adults** – provides an overview of common, preventable long-term conditions and explores health inequality in Sefton.
- **Prevention and healthy ageing** – explains the value of healthy changes at any age and looks at some ways senior adults in Sefton are taking care of their health, whilst highlighting the impact of problems and barriers that prevent many older adults from making healthy choices.
- **Living Well** – focuses on mental wellbeing and the connection between our surroundings, health, and wellbeing, illustrated with case studies.
- **The report also includes** – a foreword and acknowledgements section, a summary of the main learning points and recommendations from each chapter, a brief reflection on last year’s PHAR, a list of information sources used, and where to look for advice and support.

An important aim of developing this report was to use different types of information in an as accessible way as possible. The text is written in a plain English style, structured with headings, with jargon kept to the minimum. Graphs and tables are not used excessively and all images in the report are provided with alternative text attachments so their content can be delivered through text reader software. Photographs are from the open access Centre for Ageing Better resource centre.

2.3 Report conclusions and recommendations

Learning points and recommendations are provided at the end of each chapter. The main findings of the report can be summarised as,

- **Negative language and false assumptions** about ageing affect senior residents in their daily lives.
- There is an undoubted role for **prevention at any age**, but meeting this need must take account of barriers senior adults may currently face, from cost, transport, and the way information about services is shared.

- **Connection to people, places and rewarding activities** is treasured by seniors and is central to their sense of health and wellbeing.
- **Health issues such as obesity, problem drinking, and low mental wellbeing can start or persist into later life** and support options must reflect need and demography.
- Some **senior adults are worried about** their ability to pay for the basics of health, like food and warmth and about requiring more health or social care services in the future and becoming lonely.
- Senior adults want **more sources of information on hand in places they usually visit**, rather than more services or support groups. Finding out about groups and services often relies on word of mouth.
- **Design aspects of what makes for a healthy place** can be applied small-scale to large-scale.
- Sefton's seniors offer a **major capability to shape strategic changes** that meet their varied needs and benefit the wider community.

The six recommendations are,

- 1) All organisations should identify, call out, and tackle age unfriendly language and stereotypes in how they operate and communicate
- 2) Senior adults that reflect the diversity of this age group should be actively and visibly valued as key collaborators in shaping plans and changes happening in Sefton today and into the future
- 3) The principles of providing person-centred health and care should be extended to population health plans, with the goal of achieving community-centred health and care improvements that reflect specific needs from place to place
- 4) Organisations should seek the views of senior service users on how to publicise their services to all senior adults, including those who are not online
- 5) Organisations should work together to further embed age-friendly cities design and sustainability principles, and promote overlaps with the needs of more vulnerable groups, for example, children, those with a physical or learning disability
- 6) Health, care, and other support providers should know how to identify and act on risks to wellbeing and mental health needs in seniors

2.4 Publication, formats, and dissemination

Publication on the Council website will take place soon after today's meeting of the Health and Wellbeing Board, following any final amendments.

The report will be presented in a range of formats,

- Initially as a pdf and as an accessible web document, presented with a dropdown menu so the report can be read in standalone chapters or listened to using Recite Me and other text reader software [Public Health Annual Report - 2022/2023 \(sefton.gov.uk\)](https://sefton.gov.uk)
- Publication of a short, magazine/newsletter style document, also in a pdf and web accessible format, and in British sign language will follow
- An Easy Read summary of the main points will also be available

Dissemination of the report will draw on external networks involved in the original steering group, and through appropriate committee meetings and boards to share key findings and recommendations with decision-makers.

It is anticipated that the PHAR 2022 on Ageing in Sefton will be received as a useful resource, which can be used to inform the wider work of the Council and partners and support relevant campaigns and initiatives over the coming year.

3. Recommendations

Board members are recommended to:

- (1) Note this report and the accompanying final draft PHAR 2022, and provide any comment, feedback, or suggestions.
- (2) Affirm and support plans for publication and dissemination of the report.