

Integration Joint Board

Agenda item:

Date of Meeting: 27th November 2023

Title of Report Public Health Highlights from 2022-2023

Presented by: Alison McGrory, Associate Director of Public Health

The Integrated Joint Board/Committee is asked to:

- Note the report on Public Health Team activity in 2022-2023
- Note wider prevention activity including the merger of the Public Health Living Well board and the Prevention Board.
- Endorse the role of the IJB in providing leadership to prevent health and social care problems from arising

1. EXECUTIVE SUMMARY

This paper outlines public health activity in Argyll and Bute to prevent ill-health and improve health and wellbeing outcomes for the population. The detail of the paper covers the Public Health Team Annual Report for 2021-2022

2. INTRODUCTION

Argyll and Bute Health and Social Care Partnership (HSCP) has a Public Health Team that works towards improving the health and wellbeing outcomes of the population of Argyll and Bute. This team is part of a wider NHS Highland directorate. The steer for this Public Health work comes from different directions, for example: national strategy; national Public Health priorities; HSCP strategic priorities; and community led aspirations. The Christie Commission of 2011 estimated that 40% of public sector spending is on problems that could be avoided given earlier intervention.

Prevention of health problems can take place at three levels:

Primary – population wide health improvement and laying the foundations of good health

Secondary – targeting health improvement to those at risk of ill-health

Tertiary – directed activity with people already experiencing ill-health to minimise escalating problems

3. DETAIL OF REPORT

3.1 Public Health Team Annual Report for 2021-2022

The Public Health Team in Argyll and Bute includes health improvement, health intelligence/data analysis and the Alcohol and Drug Partnership support team. An annual work plan sets out the work of the team and this is reported at the end of each year.

Throughout 2022 – 2023 there was an active remobilisation of core work following the cessation of COVID-19 related work in May 2022. There was recognition of the important contribution the team makes towards addressing the social determinants of health and prevention. The full report provides detail on the range of activity delivered; highlights of this work include:

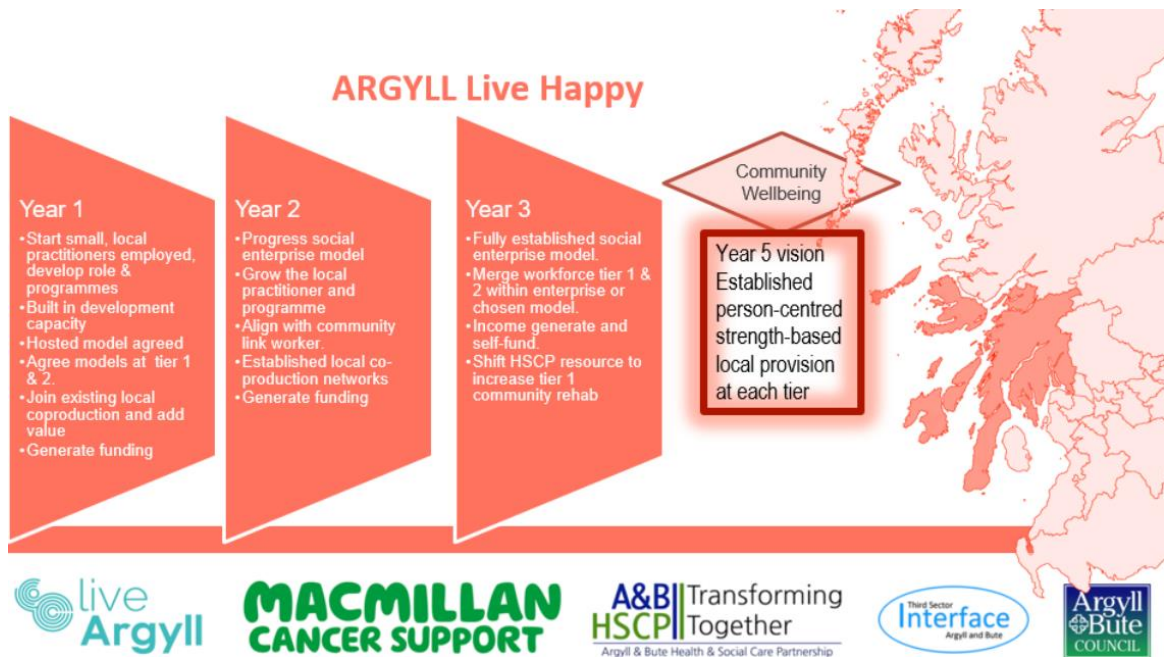
- Overseeing the commissioning of Community Links Workers in primary care
- Cool2Talk online support for young people
- Smoking cessation
- Smoke free education in primary and secondary schools
- Contribution to strategic priorities such as Suicide Prevention action plan, the Child Poverty plan and the Social Mitigation strategy
- Screening inequalities engagement
- Youth mental health first aid training
- Health psychology and weight management
- MAP health behaviour change training
- Income maximisation and child poverty work
- Pathway for residential rehabilitation for people with drug problems
- Implementation of treatment pathways for people with drug problems
- Naloxone training for those at risk of drug overdose

3.2 Wider Prevention Activity

In July 2023 a merger of the Public Health Living Well Board and the Prevention Board took place, the resultant board is called the Living Well Board. The Living Well Board has responsibility for developing the Living Well programme. The programme will seek to support and build upon existing health and wellbeing opportunities within each locality, with the vision of helping our communities to be environments where people support each other to thrive. The programme has funding from Argyll and Bute HSCP, Macmillan Cancer Care, NHS Charities Together and Argyll and Bute Third Sector Interface and will work closely with local partners Live Argyll and Lorn and Oban Healthy Options. The Living Well board will ensure that a multi-agency approach is taken, with all partners working with shared vision and responsibility to provide cohesion and clarity around wellbeing services. This will include ensuring funding is allocated

wisely, aligned with the shared vision of all partners, avoiding duplication across partners.

The Living Well board will coordinate the efforts of associated subgroups, providing strategic direction, authorisation, accountability and support to their respective aims. The board has three subgroups that focus on implementation of the Living Well Programme, these are: community rehab, community health and wellbeing, and community wealth building/assets. There is also a management committee of key partners overseeing the financial delivery. Recruitment is currently ongoing for the community rehab workers who will be located with our partner Live Argyll. The community wellbeing programme is at the planning stage and anticipates launching in April 2024.



4. RELEVANT DATA AND INDICATORS

Full details of the outputs of Public Health activity is published in the reports.

5. CONTRIBUTION TO STRATEGIC PRIORITIES

The work of the Public Health Team is linked to:

The Strategic Plan

- Promote health and wellbeing across our communities and age groups

The Commissioning Plan

- Prevention, early intervention and enablement
- Living Well and active citizenship
- Community Co-production

6. GOVERNANCE IMPLICATIONS

6.1 Financial Impact

The Public Health Team is resourced from core HSCP funds and in-year Scottish Government allocations to the sum of approximately £1.5 million. This

paper is not asking for additional investment in Public Health. However, it is a topic for debate to consider early upstream intervention can avoid the need for downstream service delivery.

6.2 Staff Governance

No issues in this paper.

6.3 Clinical Governance

No issues in this paper.

7. PROFESSIONAL ADVISORY

No issues in this paper. The Associate Director of Public Health works closely with the other professional advisors, in particular the Associate Director for Allied Health Professions.

8. EQUALITY & DIVERSITY IMPLICATIONS

No issues in this paper. Equality and diversity are key principles of Public Health work and interventions and strategies are designed to ensure those most in need will benefit the most. This is with the intention of reducing the gap between the most well off and the worst off in our communities.

9. GENERAL DATA PROTECTION PRINCIPLES COMPLIANCE

No issues in this paper.

10. RISK ASSESSMENT

No immediate risks in this paper although there are risks to the sustainability of health and social care service from rising demand.

11. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

Community engagement is a core principle of Public Health and interventions and programmes always include engagement to ensure effectiveness and suitability. The Living Well strategy was developed following comprehensive community and stakeholder engagement.

12. CONCLUSIONS

The paper provides an update on ongoing wellbeing and prevention activity overseen and delivered by the Public Health Team in Argyll and Bute. There is a compelling need to prevent health and social care problems before they arise. The HSCP is well placed to both continue and expand upon the recent successes outlined in the detail of this report.

DIRECTIONS

Directions required to	Directions to:	tick
	No Directions required	
	Argyll & Bute Council	

Council, NHS Board or both.	NHS Highland Health Board	
	Argyll & Bute Council and NHS Highland Health Board	

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