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**To: Health and Social Care Scrutiny Board (5)**  
**Date: 30<sup>th</sup> October 2019**

**Subject: 2019 Director of Public Health's Annual Report**

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### **1 Purpose of the Note**

This paper updates Scrutiny Board 5 on the 2019 Director of Public Health's (DPH) Annual Report. The report includes recommendations for health and wellbeing partners across Coventry.

### **2 Recommendations**

The Health and Social Care Scrutiny Board (5) are asked to:

1. Note the content and recommendations of the 2019 DPH Annual Report;
2. Note the key achievements on last year's DPH Annual Report
3. Support the dissemination of the report
4. Endorse the actions proposed; and
5. Make recommendations to the appropriate Cabinet Member to support the achievement of recommendations within the DPH Annual Report

### **3 Information/Background**

This year's DPH Annual Report is entitled: 'Bridging the Gap: Tackling Health Inequalities in Coventry, a Marmot City'. The report focuses on health inequalities in Coventry, the determinants that contribute to these inequalities and the work being carried out to address them.

Health inequalities are differences in health between different groups of people or communities. They are determined by a range of factors including the kind of life a person is born into, where they live, the environment they grow up in, education and employment chances and lifestyle choices such as smoking, drinking, diet and physical activity.

Health inequalities are important because they have a significant impact on how long a person will live and the number of years they will live in good health. People in more affluent areas will live a longer life, with more years of good health, than people living in more deprived areas. In Coventry, this gap between groups can result in men in some areas of the city living on average 10.9 years less than people in better off areas. For women, the gap is 10 years. The gap in the number of years lived in good health is even bigger, with men in the most affluent areas experiencing 17 more years in good health than men in less affluent areas, and for women, the gap is 18 years.

There is no single solution to tackling health inequalities and in this report, we set out some of the reasons that these differences exist and how Coventry is working in a partnership approach, bringing together individuals, communities, organisations, businesses and universities, to reduce inequalities and improve health and wellbeing for all citizens.

#### **4 Updates since last year's report**

The Director of Public Health Report 2017/18 "Healthier for Longer" explored securing healthier futures for our communities. Much work has been done since the publication of the report to address the recommendations it set out. Some key achievements include:

- *Recommendations 1 & 2: Working with Communities in an asset based approach and promote ways to combat social isolation and loneliness:* Partners have come together to consider the best use of community assets to address social isolation and loneliness, with a multi-agency group now in place and an evidence review completed. Social isolation and loneliness have been identified as priority areas in the new Health and Wellbeing Strategy.
- *Recommendation 3: Embedding the Marmot City approach across the work of the Council and partners:* The evaluation of the Marmot City approach is described below. The evaluation found that the Marmot policy objectives reflected many of the existing values and views of Marmot City partners and gave them leverage to embed those values in their work.
- *Recommendation 4: Increase profile of ill health prevention:* The two Health and Wellbeing Boards in Coventry and Warwickshire are working together as a joint 'Place Forum' to create the necessary system conditions and leadership for an uplift in prevention.
- *Recommendation 5: Develop partnership working to improve immunisation rates:* A review of all routine vaccinations is being undertaken with a view to developing a Coventry and Warwickshire action plan focusing on improving immunisation rates across the life course by the end of 2019.
- *Recommendation 6: Encourage co-design of services with older people:* Service specifications have made reference to the needs of older people, including in the Domestic Abuse service, the Healthy Lifestyles Service and the drugs and alcohol service.
- *Recommendation 7: Design integrated health and care pathways to deliver high quality care:* As part of the improved Better care Fund Programme in Coventry, five proof of concept projects were approved in 2017 as preventative initiatives. These have been programme managed via public health and run to March 2020. The initiatives were designed to test different models to reduce demand upstream on formal services and potential admissions.

#### **5 Tackling Inequalities as a Marmot City**

Since 2013 Coventry has committed to being a Marmot City. The Marmot City approach has recently been evaluated. The evaluation involved interviewing a wide range of

people within Coventry City Council and partner organisations to find out what being a Marmot city has meant for how they work. It examined the history of the approach and how it has developed in Coventry.

Key Findings of the evaluation included:

- The evaluation found that for many organisations, joining the Marmot City Steering Group was based on an existing understanding of the impacts of social determinants on health, and a willingness to work in partnership to reduce the impacts of austerity as much as to reduce health inequalities.
- Many said that the benefit of being a Marmot city is that it makes clear the values that should underpin decisions. The Marmot principles connect to every function of the Council and help to communicate the role that everyone has in supporting the health of the community. This has influenced work in transport, housing, procurement, education and early years.
- The approach has been iterative, for example the steering group membership, the indicators they report, and their activities have evolved in response to changing needs and opportunities over time.
- Being a Marmot City has made it possible to embed consideration of the impacts that Council policies and investments have on health inequalities across the organisation.
- The Marmot City approach did not receive any funding except time as a resource and aimed to achieve public health objectives within a climate of diminishing resources.
- The impact of austerity on the Council's finances and on partner organisations has made it more difficult to continue business as usual, and many services such as children's centres, libraries and youth centres have ceased or been reduced significantly.
- It is 'co-produced' by partners rather than delivered. This means it relies on the active participation of Steering Group members and partner organisations to drive action. Many of the activities influenced by the Marmot City status do not have a direct link back to the Steering Group.
- More engagement with partners before setting priorities and agreeing indicators would have encouraged more organisations beyond the Council to see getting involved as a valuable use of their time.
- It is very difficult to demonstrate impact on nationally reported health indicators because there are many other factors that also impact the health of the population. Nevertheless, many indicators of inequality are worsening, and indicators of inequality in the early years (0-5 year olds) are a particular concern. There seems to be a growing gap in outcomes such as school readiness between children from deprived backgrounds and the rest of the population, and this gap continues to expand throughout their years in school.

Following this evaluation, the Marmot Steering group members will be reviewing progress to date and agreeing the future of the membership and how we progress action on the Marmot Review recommendations in October 2019.

The recommendations of the Director of Public Health report are to:

1. Review and revise the Marmot Action Plan taking account of the findings in the evaluation and considering how a One Coventry approach can help to embed partnership working and promote ownership of initiatives throughout organisations and community groups, and how using a place-based strategy as set out by Public Health England can facilitate effective action through civic, service and community interventions.
2. Improve partnership-working with Place Directorate within Coventry City Council to ensure that public realm works and developments in the city take account of their potential impacts on health inequalities and use initiatives in a proactive way to reduce inequalities.
3. Utilise community asset based approaches to improve health and wellbeing, maximising the legacy of City of Culture 2021.
4. Ensure there are strong links with the Skills Board and Local Enterprise Partnership to promote skills development to enable Coventry citizens gain the necessary qualifications and skills to fill local jobs.
5. Recognise and respond to barriers and challenges which may prevent people in some groups within Coventry from engaging with services which promote healthy lifestyles such as the 'Coventry on the Move' programme.
6. Council and partners to embed an integrated early help offer which improves life chances for more vulnerable families.
7. Evaluate the impact of the Year of Wellbeing and examine ways in which the Health and Wellbeing partnerships have raised the profile of health and wellbeing and maximise the legacy that can be achieved.
8. Maximise the opportunities available with the NHS as a key partner, through implementation of the NHS Plan around prevention and health inequalities and the Coventry and Warwickshire Health and Care partnership.
9. Mobilise the 2019-2023 Health and Wellbeing Strategy to ensure that the priorities are addressed, utilising the population health framework to underpin change.

There is a range of work currently underway which will support the achievement of these recommendations, including:

- A Marmot Steering Group workshop attended by Sir Michael Marmot to review and refresh the city's Marmot Priorities and develop a new and robust action plan which takes account of the work of partners, utilising the One Coventry approach.
- Public Health continue to work with the Place Directorate, helping to develop work such as the hot foods takeaway supplementary planning document, the Air Quality Alliance and the Water Refill programme.
- Working with the City of Culture Trust to ensure that community assets and the evidence gained from pilot programmes carried out locally are maximised to improve health and wellbeing of all people in the city, but with a focus on people in the most deprived areas.

- There are a range of programmes in the city which promote skills development and employability skills to local people. Work is underway to ensure that the organisations which provide these services are aware of the full range of services in the city. There is also a link between the Skills Board and the Marmot Steering Group, and the LEP are formally a member of the Marmot Steering Group.
- The Healthy Lifestyles Service works with people who want to make changes to their lives to become healthier. They will support people to access services such as smoking cessation, diet and exercise classes and is targeted at our communities most in need .
- The eight Family Hubs are now established in communities where need for support is greatest and provide a multi-agency service which focuses on delivering early help to children and young people.
- The Year of Wellbeing is continuing to encourage people to think about their health and wellbeing, with over 200 health champions trained, the launch of Good Gym, the involvement of local pharmacies, the Year of Wellbeing Festival, and the Year of Wellbeing bus being just a few of the initiatives created by the programme.
- Work is on-going with Health and Care partners to implement the health inequalities requirements of the NHS Long Term Plan.
- The Chair of the Marmot Steering Group sits on the Health & Wellbeing Board which will ensure that the work of the Marmot Group underpins the aims of the Health and Wellbeing Strategy.

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**Appendices:** Coventry Director of Public Health Annual Report 2019