



# Title: ABUHB Director of Public Health Annual Report 2022

### Paper sponsor: Dr Sarah Aitken, Executive Director of Public Health and Strategic Partnerships, ABUHB

## Paper author: Stuart Bourne, Consultant in Public Health, ABUHB

#### Date: 15<sup>th</sup> December 2022

### 1. Introduction

1.0 This paper has been written to provide Gwent Public Service Board members with a summary of the Director of Public Health Annual Report 2022. It has been written as a cover paper for the main report included in the Public Service Board papers at Appendix A.

### 2. Background

2.0 This year's report is centred on the theme of inequity and fairness, and the importance of acting on the social determinants of health. In taking this approach, the report is structured around the eight Marmot principles originally developed by Professor Sir Michael Marmot and the Institute of Health Equity in 2010<sup>1</sup>. These eight principles have already been presented to Gwent Public Service Board on a number of occasions and will be familiar to members.

#### The eight Marmot principles

- 1. Give every child the best start in life;
- 2. Enable all children, young people and adults to maximise their capabilities and have control over their lives;
- 3. Create fair employment and good work for all;
- 4. Ensure a healthy standard of living for all;
- 5. Create and develop healthy and sustainable places and communities;
- 6. Strengthen the role and impact of ill-health prevention;
- 7. Tackle racism, discrimination and their outcomes;
- 8. Pursue environmental sustainability and health equity together.

2.1 The Marmot principles are central to this year's report for two reasons; firstly, the aim is to provide members of Gwent Public Services Board with practical suggestions as to how to respond to the eight principles, and secondly, it provides the Director of Public Health with an opportunity to reflect on progress three years on from the 2019 Annual Report 'Building a Healthier Gwent'<sup>2</sup>.

### 3. Assessment

3.0 The opening to this year's report re-states the ambition set out in the 2019 annual report to ensure: "In 2030 the places where we live, work, learn and play make it easier for people in our communities to live healthy, fulfilled lives". Three years on, this remains the ambition, framed through the lens of the eight Marmot principles. The following summarises the key messages in each chapter.

3.1 **Chapter 1** acknowledges that achieving this ambition has in many ways got harder. The COVID-19 pandemic has acted to exacerbate and magnify health inequalities, an effect that will endure in communities experiencing the poorest health outcomes into the future. Alongside this, the economic situation in the UK is about to make life harder for many individuals and communities, and to limit the ability of public services to intervene. Whether measured by differentials in healthy life expectancy, childhood obesity or consumer spending, the present position makes tackling inequity both more difficult but also more urgent.

3.2 **Chapter 2** explains the Marmot principles, as well some other important concepts such as proportionate universalism and the social determinants of health. For an NHS Wales audience, this chapter also includes a framework for how the NHS can respond to the social determinants of health. Developed by the Health Foundation, this contains four quadrants through which NHS organisations can think about how they should address the social determinants of health. Each of these quadrants is explored further in chapter 2.

3.3 Chapters 3 – 10 of the report concentrate on each of the Marmot Principles in turn. In each chapter, the importance of each principle is discussed, examples of what organisations in Gwent can do are highlighted, and a case study is included to illustrate work that is already taking place. Taken in turn, these chapters recommend the following:

3.4 **Chapter 3** (Give every child the best start in life) makes the case that collective action from all public service partners needs to focus on ensuring a consistent universal offer of support to all families throughout the early years AND a focus on enhanced support for families with a low income to ensure that they don't get left behind. In this context, the importance of addressing adverse childhood experiences is highlighted, as

well as the importance of the Healthy Child Wales Programme and the Early Years Integration Transformation Programme.

3.5 **Chapter 4** (Enable all children, young people and adults to maximise their capabilities and have control over their lives) suggests a starting point is sharing good practice about what each organisation in Gwent is doing in respect of recruitment. Commitments set out in the Aneurin Bevan University Health Board People Plan 2022–2025<sup>3</sup> are put forward as examples of good practice. This includes, supporting widening access for school leavers and the unemployed into work, designing workforce plans that ensure an inclusive workforce and trialling new selection methods in place of traditional interviews to encourage applications from all parts of the population.

3.6 **Chapter 5** (Create fair employment and good work for all) lists six areas where partners in Gwent can have an effect on inclusive, fair, sustainable work. The six areas are:

- Area and place-making;
- Job creation and attracting fair work employers;
- Encouraging and incentivising fair work practice;
- Supporting pathways to access to that work;
- Being exemplars as good employers and anchor institutions;
- Implementation of the Socio-Economic Duty.

3.7 Gwent Public Services Board can set the direction by incorporating fair work into the Gwent Well-being Plan, with partners translating that collective commitment into action by their own organisations. Regional Economic Frameworks and Implementation of City and Growth Deals, supported by Regional Skills Partnerships are also recognised as having an important role in embedding fair work approaches.

3.8 **Chapter 6** (Ensure a healthy standard of living for all) recommends the following actions:

- Purchasing goods and services from local businesses and organisations;
- Opening buildings and spaces to support local communities and staff;
- Widening access to quality work, including reviewing whether current 'difficult to recruit' vacancies can be converted into wider opportunities such as apprenticeships and placements, to provide local employment;
- Ensuring that services across Gwent remain accessible financially and physically to service-users, e.g., cost of travelling to an appointment; time of appointment to avoid having to take unpaid absence from work;

- Providing brief intervention and signposting service-users to help on financial inclusion, mental health and well-being, plus having referral pathways in place for support with fuel and food poverty;
- Supporting staff visiting service-users' homes to recognise and take action on the signs of fuel and food poverty and assist with access to social support, e.g. Healthy Start and Pension Credit.

3.9 **Chapter 7** (Create and develop healthy and sustainable places and communities) makes the case for ensuring community buildings continue to operate to address isolation and loneliness, as well as being safe warm spaces offering information and signposting. Digital inclusion should become everybody's business, and be available at community level. Frontline staff and volunteers need to have the knowledge and skills to signpost community members to wellbeing services and support in the place people live and work. Finally, there should be community support available for individuals to address isolation and loneliness.

3.10 **Chapter 8** (Strengthen the role and impact of ill-health prevention) recommends embedding Make Every Contact Count across organisations, supporting staff to make healthier choices whilst at work through encouraging breaks, incorporating physical activity into the day, promoting healthy eating habits and access to NHS Stop Smoking Services. Specifically for the NHS, chapter 8 recommends building healthy lifestyle changes into care pathways, such as support to lose weight as part of the All Wales Diabetes Prevention pathway, stopping smoking during pregnancy and maximising the potential of 'teachable moments' when people have contact with NHS services

3.11 **Chapter 9** (Tackle racism, discrimination and their outcomes) suggests local economic partnerships and chambers of commerce work with businesses, the NHS, local authorities and other public sector bodies to gather ethnicity data by pay and grade, and to use this data to address wage gaps and inequalities in seniority. All businesses, public sector and third sector organisations should ensure legal equality duties are met in recruitment and employment practices, including pay, progression and terms. All efforts should be made by health and social care providers to ensure equitable access to their services. Organisations should improve the workforce's cultural literacy and invest in the human and other resources required to develop the workforce to be fully culturally competent and inclusive. All significant policy and planning should have equality built in from the start. Finally, reducing ethnic health inequities should be included as a well-being goal for organisations.

3.12 **Chapter 10** (Pursue environmental sustainability and health equity together) recognises the draft steps set out in the draft Gwent Public Services Board Well-being Plan to protect and improve the natural

environment. In consulting on the Well-being Plan, Gwent Public Services Board are recommending the following steps:

- Reducing the environmental impact of production and consumption.
- Declaring a nature emergency in Gwent;
- Responding to the climate emergency and protecting and preparing communities for the risk associated with climate change;
- Exploring and promoting community energy projects;
- Transforming food transport and energy in Gwent;
- Recognising biodiversity as an asset, addressing the root causes of biodiversity loss and better managing the pressures on natural environments.

3.13 **Chapter 11** provides a summary of the report's key points and reflections from the departing Director of Public Health. A full copy of the report is available at:

https://abuhb.nhs.wales/healthcare-services/staying-well-andhealthy/building-a-fairer-gwent/

### 4. Recommendations

4.0 Gwent Public Services Board is asked to **DISCUSS** and **NOTE** the main points in the Director of Public Health Annual Report 2022.

### References

1. Michael Marmot, Peter Goldblatt, Jessica Allen, et al. Institute of Health Equity (2010), *Fair Society, Healthy Lives (The Marmot Review)* [Online]. Accessed on 16/09/22. Available at:

https://www.instituteofhealthequity.org/resources-reports/fair-societyhealthy-lives-the-marmot-review

2. Dr Sarah Aitken (2019), *Director of Public Health Annual Report 2019: Building a Healthier Gwent* [Online], Aneurin Bevan Gwent Public Health Team. Accessed on 16/09/22. Available at: https://abuhb.nhs.wales/healthcare-services/staying-well-and-

healthy/building-a-healthier-gwent/further-information/

3. Aneurin Bevan University Health Board (2022) *People Plan 2022–2025-Putting People First.* Aneurin Bevan University Health Board [Online]. Accessed 21/09/22. Available at: <u>https://nhswales365.sharepoint.com/sites/ABB\_Pulse/SitePages/People-Plan-2022-25---Putting-People-First.aspx</u>