

A review of the key messages in the Director of Public Health Annual Report, *Keeping Older people Healthy in County Durham and Darlington, 2009/10* and actions taken to address recommendations

SUMMARY REPORT

Purpose of the Report

1. *Keeping Older People Healthy in County Durham and Darlington: Annual Report of the Director of Public Health 2009/10* was the fourth in a series of reports that described relevant actions and issues taken to improve health and reduce health inequalities.

The report in 2009/10 focused on the health of older people with contributions from Darlington Borough Council and a guest chapter co-authored by Age Concern Durham and Age UK Darlington.

At an earlier meeting of the Adults and Housing Scrutiny Committee the Director of Public Health summarised the key messages of the Annual Report and was invited to present a report to the committee reviewing actions taken in response to the key messages.

Summary

2. A short description of key actions taken to address “What needs to be done...” sections of the 2009/10 Annual Report is attached in the report.

By undertaking a review of the work against actions specified in the Annual Report the NHS County Durham & Darlington Public Health Directorate meets the Faculty of Public Health standards in relation to the impact of the Director of Public Health Annual Report.

Elected members are invited to note particularly the work in relation to mental health improvement, safeguarding vulnerable adults and the Care Quality Commission report on *Dignity and Nutrition for Older People (2011)*.

Recommendations

3. It is recommended that:-
 - (a) Members note the actions taken to address the key messages in the Director of Public Health Annual Report 2009/10 with the overall aim to help people get the most from later life.

MIRIAM DAVIDSON, DIRECTOR OF PUBLIC HEALTH, DARLINGTON

Background Papers

Keeping Older People Healthy in County Durham and Darlington: Annual Report of the Director of Public Health 2009/10

Mark McGivern, Public Health Trainee

Miriam Davidson, Director of Public Health, Darlington

S17 Crime and Disorder	This report has no direct implications for Crime and Disorder.
Health and Well Being	This report has implications to the address Health and Well Being of residents of Darlington, through scrutinising the services provided by the NHS Trusts.
Carbon Emissions	There are no carbon impact implications in this report.
Diversity	There are no issues relating to Diversity which this report needs to address.
Wards Affected	The impact of the report on any individual Ward is considered to be minimal.
Groups Affected	The impact of the report on any individual Group is considered to be minimal.
Budget and Policy Framework	The issues contained within this report do not represent change to Council budget or the Council's policy framework.
Key Decision	This does not represent a key decision.
Urgent Decision	This does not represent an urgent decision.
One Darlington: Perfectly Placed	The report contributes to the delivery of the objectives of the Community Strategy in a number of ways through the involvement of local elected Members contributing to the Healthy Darlington Theme Group.
Efficiency	There are no impacts arising from this report.

MAIN REPORT

1. *Keeping Older People Healthy in County Durham and Darlington: Annual Report of the Director of Public Health 2009/10* was the fourth in a series of reports that described relevant actions and issues taken to improve health and reduce health inequalities.

The report in 2009/10 focused on the health of older people with contributions from Darlington Borough Council and a guest chapter co-authored by Age Concern Durham and Age UK Darlington.

2. At an earlier meeting of the Adults and Housing Scrutiny Committee the Director of Public Health summarised the key messages of the Annual Report and was invited to present a report to the committee reviewing actions taken in response to the key messages.
3. Men and women are living longer due to improved health and social care. The Darlington population is ageing and by 2020 over 40% of the total population will be aged 50 years plus and approximately 10% will be aged 75 years and over. Older people express their wishes to remain physically and mentally healthy, retaining their independence and ability to carry out everyday tasks.
4. The projected changes in the age structure of the population of Darlington have significant implications for planning health and social care services. Many long term conditions (LTCs) including cardio vascular disease (CVD), osteoarthritis, chronic obstructive pulmonary disease (COPD), diabetes, dementia and cancer tend to have a later onset and are likely to increase as people age.

Key messages

5. The following key messages in the report “*Keeping Older People Healthy*” reflect the main causes of premature death and ill health and the actions to be taken to address them.

The key message is in bold, the following text describes in summary the work that has been undertaken in response to the challenge posed in the key message.

5.1 **The NHS Health Checks programme needs to maintain momentum to counter the high local prevalence of cardiovascular disease and stroke**

The NHS Health Checks programme is working well, there are three main providers – GP practices, community pharmacies and community based services.

Since the programme started over 9000 health checks have been conducted in Darlington, 65% expected eligible population have had a check.

5.2 Screening for conditions more prevalent in later life is an important approach to staying healthy i.e., early detection of disease

The screening programmes that most relate to older people are:

Breast cancer
Bowel cancer
Diabetic retinopathy
Abdominal aortic aneurism

The work of breast screening units has been to maintain standards of quality care while also extending the programme age range from 50 – 70 years to 47 – 53 years.

Actions have been taken to provide screening in areas where uptake (for any screening service) is low, supplemented by regional initiatives e.g., a campaign to increase bowel cancer screening rates.

5.3 There is a need to raise awareness of alcohol related harms in older people through information education and training.

A wide range of agencies who work with older people have sent staff and volunteers to participate in alcohol training. Alcohol services have developed measures to assess older people's needs e.g., for people over 65 years, the Darlington alcohol service includes a specialist to work with older people and a link is being developed between the alcohol services and the falls service.

5.4 Smoking is one of the most significant factors underlying the differences in health and life expectancy within Darlington

The Darlington Tobacco Alliance has developed an action plan to address all elements of tobacco control activity. The eight strands of the plan will contribute to reducing smoking prevalence in older people. A key action has been to target high risk groups e.g., COPD patients, using the awareness raised by the COPD media campaign in 2011. The NHS Stop Smoking services continue to be high performing with the highest client group being amongst "routine and manual" groups.

5.5 Participation in physical activity declines with age for both men and women this reduces health and increases the risk of falls.

The co-ordination and delivery of age appropriate physical activity continues to be a key action directed towards older people e.g., Exercise on Referral, One Life Scheme, community opportunities offered by Darlington Borough Council (approx. 50% of physical activity opportunities are access by people over 50 years).

The Age UK Darlington run programme "Fit as a Fiddle" has evaluated positively, providing a large number of people over 65 years with opportunities to nurture physical and social health.

5.6 Good nutrition helps combat chronic disease and the lack of it delays recovery from illness.

The County Durham and Darlington Food and Health Action Plan includes a range of actions to support older people in the community and train frontline staff in nutrition awareness. Cook4Life, a practical course in healthy eating, has been delivered in Darlington. Two courses were run by Age UK Darlington with the YMCA to bring young and older people together.

A Darlington Focus on Undernutrition has been implemented in the majority of elderly care homes. The course covers nutritional needs of older people, menu planning for a range of health needs.

In addition to the focus on the Undernutrition service which works with GP practices and care homes, NICE guidance sets out clear recommendations for nutrition screening in hospital which NHS services have taken account of.

The Care Quality Commission published a report *Dignity and Nutrition for Older People* (2011) following a review of a number of hospital wards where older people were patients. Where problems were identified some of the important issues included:

- Patients privacy not being respected
- Call bells out of patients' reach
- Patients not being given the help they needed to eat
- Patients being interrupted during meals and having to leave their food unfinished

The hospitals of County Durham Acute Foundation Trust were not sampled in the review however the NHS Country Durham and Darlington lead for Patient Quality and Safety continues to monitor the Trust's practices.

5.7 A rise in mental health problems is predicted along with the rise in the older population

The "Living Well with Dementia" programme is being delivered in Darlington which covers identification of dementia, how to access support, addressing stigma and understanding the needs of people caring for those with dementia.

The Dementia Collaborative brought together doctors, nurses, social workers and other staff from TEWV Mental Health Foundation Trust, County Durham & Darlington Acute Foundation Trust, Darlington Borough Council and NHS County Durham & Darlington to improve care for people with dementia.

By working together to identify where improvements could be made hospital stays have been reduced, access to services improved and clinical staff are spending more time with patients.

5.8 Flu is easily and widely spread putting the most vulnerable people at increased risk of serious illness.

The seasonal flu campaign is promoted every year, via regional and national media and targeted support for NHS settings to promote the flu jab. The flu vaccine continues to be offered to “at risk” groups to protect them from catching flu and developing complications.

5.9 Excess winter deaths are higher in the North East than elsewhere in England and is the region with the highest rates of fuel poverty.

Work to address excess winter deaths link to the actions taken to plan for winter pressures, flu planning and resilience planning.

Partnership work in Darlington to address excess winter deaths and fuel hardship has attracted media interest. The partners DBC, Age UK Darlington, DAD, CAB and Evolution have secured Department of Health *Warm Homes, Health People* funding.

5.10 Safeguarding adults is a key responsibility of everybody, it has developed a high profile as people have become more aware of vulnerable adults experiencing harm in institutions, their own homes and in the community.

The Darlington Safeguarding Adults Board has senior representation across a range of agencies. The Board support the “No Secrets” guidance with well-developed safeguarding adults policies and procedures. The purpose of the Adult Safeguarding Board is to safeguard and promote the welfare of adults at risk in Darlington through inter-agency collaborations. It is also to promote public confidence in safeguarding systems in Darlington, making sure that human rights are balanced with protecting the public from harm.