

## Healthy Communities 2012: 19<sup>th</sup> September 2012

On behalf of Future Years (and Leeds Older People's Forum) I attended the above Conference and Exhibition along with around 400 others from the health sector- predominantly professionals. The Conference had been organised by Govtoday.co.uk and the theme was "delivering healthier, happier and longer lives" and ensuring that health inequalities are addressed and reduced.

The *morning session* examined the new NHS landscape and how health inequalities are being dealt with at local level. Speakers covered the role of local government, the new role of the Directors of Public Health and the role of the voluntary sector.

**Fred Turk**, Chair for the Conference, who is Co-Chair of the DoH's Responsibility Deal Physical Network and Chair of the Fitness Industry Association, gave a few facts:

- Over 1 million people will soon reach the age of 100
- Those from poorer neighbourhoods die, on average, 7 =years earlier than those from richer areas
- Physical inactivity counts for 6% of all deaths. Britain is the 3<sup>rd</sup> most inactive country in Europe. These deaths can be prevented.
- There is a high incidence of Diabetes associated with inactivity
- Huge numbers of the UK's population are overweight or obese.
- On average an inactive person spends 38 days more in hospital over a lifetime
- 13.1 million days are lost due to stress, anxiety or depression.
- The National Institute for Health and Clinical Excellence, NICE, have produced 16 guidance notes on preventative issues (visit their website to view and download them)
- All society has a role to play. We must all challenge ourselves to help improve lives in our communities.
- 9.8% of children entering Primary School are obese. And this rises to 19% as they leave school.
- Exercise is the most cost-effective medicine. GPs must encourage patients to incorporate physical exercise in their daily lives.

- Reductions in LA funding will, inevitably, reduce services. We must use public health investment and lifestyle modifications to prevent rather than cure.
- Central and local government cannot do everything. It is therefore important for business to play a greater role in fostering the well being of their employees and local communities.
- This is the focus of the DoH "Responsibility Deal". Public/Private Partnerships that cost nothing to the tax payer. Over 200 companies are now signed up to the Deal.
- Opportunities of the Digital era. A new online facility (" SPOGO") has been introduced. It is a platform to easily find local facilities for activities and allows online booking. It seeks to address previous accessibility problems.

**Philip Woodward**, Chair of the Local Authority Reference Group of NICE, then spoke. The Group had been set up in April of this year and was independent. It comprised Councillors, key Officers, eg Directors of Adult Services, and also included representation for the voluntary and community sectors. He provided a local authority perspective on the Conference Agenda. He said that the Reference Group had produced a series of succinct, evidence based public health briefings, primarily aimed at Councillors, covering a wide range of topics. They are designed to help Las when they assume the new public health responsibilities from April 2013. They should help with investment or disinvest decisions. The briefings could all be viewed on the NICE website ([www.nice.org.uk](http://www.nice.org.uk)). 37 guidance notes had been produced to date and covered older people's issues, health and well being, cancer, obesity, and mental well being etc. These notes are now under review by the Reference Group.

The first batch were published in July and covered physical and workplace health and tobacco. A second batch is scheduled for October covering alcohol and health inequalities. Each note has a menu of options and it is envisaged that they will be helpful to, for example, Scrutiny Boards, in terms of informing their work, as well as informing the development of JSNAs and assessing the delivery against the public health outcomes frameworks. There is an opportunity for delegates to get involved in topic selection for future briefings and also to become involved in Committees, Panels and Working Groups. See website more further detail.

The next Speaker was **Dr Janet Atherton**, President of the Association of Directors of Public Health. She outlined the history of the Association and referred to its influencing role and acting as a stimulus to action and change.

In a time of reduced resources we need to mobilise the whole of society to tackle the complex health challenges we face. In terms of the role of DPHs she said that they would be

- key players on the new Health & Well Being Boards,
- have responsibility for managing a ring fenced Public Health Budget (only 4% of total NHS spending)
- advise CCGs
- produce an annual Public Health Report
- be the Chief Officer with lead responsibility for LA's new public health role

**Paul Hayes**, Chief Executive of the National Treatment Agency, Before he talked the Conference observed 2 minutes silence for the 2 police women shot the previous day. He gave a brief overview of his Agency's work to address incidence of drugs misuse.

**Simon Blake OBE**, Chair of Compact Voice ([www.compactvoice.org.uk](http://www.compactvoice.org.uk)) spoke about the role of the voluntary sector. He said that the sector had a clear role in advocacy and campaigning, developing networks and continuing to work collaboratively. The sector also had a part to play in terms of service delivery.

The sector provided an independent voice for their constituents, was a critical friend to other organisations and agencies, could influence the content of JSNAs and be a shaper of services and a resource for improving health outcomes.

After Lunch there were a series of Master Classes that delegates could select from. I chose "Innovation for Healthier Communities", led by **Mike Moran**, from the Institute for Ageing and Health at Newcastle University. He covered the challenges and opportunities created by an ageing society. His Institute had received European funding for a project working with SMEs to look at innovative aids to assist older people enjoy a better quality of life. The fastest growing age group are the older people so that there is a currently under-tapped market to address. Over the last 200 years we have each added 5 hours

per day to our life expectancy and half of all children born today could live to be 100. The annual funding for local government is due to fall by 7.5% between 2011 and 2015 so we need new ways of thinking and doing things. The 50+ age group own 80% of the Country's wealth so have huge economic impact. They represent 40% of consumer spend but only receive 10% marketing focus. It is "crazy" not to maximise on the opportunities to provide more and better services to the older age group.

The Institute had 250 researchers working on this agenda and he hoped that the area around the campus could become the "silicon valley for ageing". It was developing a "Changing Age Network", used the Newcastle Elders Council as a sounding board for new ideas and had introduced a Livewell project focused on nutrition, lifestyle, exercise and social connections. Loneliness now kills more people than cancer. We all need interventions and solutions to address this issue. The Institute used focus groups to work with business on design solutions and used the older people's wealth of experience, wisdom and knowledge to create new and innovative products or modify existing products.

The Institute fostered student placements, supported MBA projects, contracted research and created Knowledge Transfer Partnerships. It also directly funded projects with a strong focus on developing aids for independent living and care. One of the examples he used to illustrate this was the development of a new type of outdoor seating that had been developed using a panel of older users. I have more information on this if anyone wants to see.

On a final note delegates were promised copies of the slides used in the various presentations. So, again, do let me know if you wish to see.

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Vice-Chair, Future Years

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