

HEALTH AND WELLBEING BOARD		AGENDA ITEM No. 6(c)
26 MARCH 2015		PUBLIC REPORT
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CARDIOVASCULAR DISEASE PROGRAMME UPDATE

R E C O M M E N D A T I O N S	
FROM: Dr Liz Robin, Director of Public Health	Deadline date: 26 March 2015
<ol style="list-style-type: none"> 1. The Board is asked to consider the outcomes from the cardiovascular disease programme workshop held on 30 January 2015. 2. The Board is asked to nominate both senior champions and lead officers to support the cardiovascular disease programme as referenced in section 5.2. 3. The Board is asked to approve the proposal for a new Public Health Board, reporting to the Health and Wellbeing Programme Board, to become the 'steering group' for the cardiovascular disease strategy, as referenced in section 5.7. 	

1. ORIGIN OF REPORT

- 1.1 This report is submitted to Board following a request from the Corporate Director of People and Communities.

2. PURPOSE AND REASON FOR REPORT

- 2.1 The purpose of this report is to provide an update on work undertaken to develop the local cardiovascular disease strategy, to reduce prevalence and improve outcomes, for the population of Peterborough.

- 2.2 This report is for Board to consider under its Terms of Reference No. 3.3

'To keep under review the delivery of the designated public health functions and their contribution to improving health and wellbeing and tackling health inequalities.'

- 2.3 This report supports the Health and Wellbeing Board strategic priority of 'Preventing and treating avoidable illness' and particularly the linked outcomes of addressing disease and poor health indicators; and the HWB function

'To develop a Health and Well Being Strategy for the City which informs and influences the commissioning plans of partner agencies.'

3. BACKGROUND

- 3.1 The Health and Wellbeing Board has acknowledged that cardiovascular disease is the main cause of death at all ages, and that Peterborough is ranked among those local authorities with the highest prevalence. In fact Peterborough is ranked 125th out of 150 local authorities for premature deaths from heart disease and stroke.
- 3.2 Public Health have been tasked with developing a cardiovascular disease strategy to address the risk factors, reduce the prevalence of disease and associated mortality and improve the quality of life for local people affected by cardiovascular disease.

4. CARDIOVASCULAR DISEASE WORKSHOP

- 4.1 Public Health held a cardiovascular disease workshop for partners on 30 January 2015 focused on the three previously agreed workstreams of 'prevention and early intervention', 'treatment and reablement' and 'continuing care'.
- 4.2 Those attending the workshop considered local prevalence of cardiovascular disease,; underlying factors and wider determinants; population and individual interventions to address smoking, poor diet and physical inactivity; treatment for high blood pressure and other risk factors e.g. for a stroke.
- 4.3 National Institute for Health and Care Excellence (NICE) guidance for the prevention of cardiovascular disease was reviewed at the workshop to structure discussions and enable attendees to consider where the focus should be and to scope opportunities.

5. OUTCOMES

- 5.1 The NICE guidance reviewed at the workshop stressed the need to identify senior figures as champions for cardiovascular disease prevention and management and to identify lead officers to become actively involved in developing and implementing the strategy on behalf of their organisation.
- 5.2 As the lead for the local strategy, Public Health is drafting the terms of reference for the three workstream programme groups and intend that the first meetings are held in April 2015. Members of the Health and Wellbeing Board are therefore requested to identify both champions and lead officers from their respective organisations. Members are also asked to consider nominating other champions that could become involved in the programme, for example those representing charities, employers, clubs, self-help and community groups.
- 5.3 There was an overall commitment from those attending the workshop that a population-based approach to prevention should be adopted and that the programme should be linked with existing strategies for targeting people at particularly high risk of cardiovascular disease including promoting the uptake and appropriate referrals to services from Health Checks.
- 5.4 The need to consider policies which are likely to encourage healthier eating, tobacco control and increased physical activity were also reviewed at the workshop, as was the need to consider policies that may cover spatial planning, transport, food retailing and procurement. This area of work will be incorporated into the local cardiovascular disease prevention work programme with associated recommendations developed as the programme progresses for the Health and Wellbeing Board to consider.
- 5.5 In addition to the focus on prevention, the workshop identified scope to improve treatment pathways and outcomes for those with cardiovascular disease, to include acute interventions and reablement e.g. in stroke. It recognised the work of the coronary heart disease inequalities board and looks to learn from, and build on, this for the wider cardiovascular disease strategy. A clinical champion and engagement with hospital clinicians and GPs will be crucial to the work of this programme group.

- 5.6 The importance of access to rehabilitation and generic lifestyle support (opportunities for physical activity, smoking cessation and weight management) at all stages of the disease process was a feature of the workshop discussions. Support to access lifestyle services was identified as a key issue for those living with the long term consequences of cardiovascular disease.
- 5.7 Those attending the workshop endorsed the decision that Public Health should lead the development of the cardiovascular disease strategy and joint strategic needs assessment. A Public Health Board, to be chaired by the new Director of Public Health, Dr. Liz Robin is to be established in April 2015. It is recommended that this new board becomes the initial 'steering group' for the cardiovascular disease strategy, providing oversight and direction to the three workstream groups. The new Public Health Board will report to the Health and Wellbeing Programme Board.

6. REASONS FOR RECOMMENDATIONS

- 6.1 The key recommendations have been made following consultation at the local cardiovascular disease strategy workshop and consideration of associated NICE guidance.

7. ALTERNATIVE OPTIONS CONSIDERED

- 7.1 Consideration has been given to the Health and Wellbeing Programme Board continuing to operate as the 'steering group' for development of the cardiovascular disease strategy. However, considering the lead role of Public Health on the strategy, the more focused role of the Public Health Board and its membership and expertise, it was felt that this new board would be a more appropriate group to provide initial oversight and direction.

8. IMPLICATIONS

The development and implementation of the cardiovascular disease strategy will address the leading cause of premature death in Peterborough and contribute to tackling significant inequalities in health and wellbeing. The prevalence of risk factors and disease shows marked ethnic and gender differences which will be laid out in the associated JSNA.

9. BACKGROUND DOCUMENTS

NONE

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10/03/15

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