



Report to Health & Adult Social Care Select Committee

Date: Thursday 17th November 2022

Title: Director of Public Health Annual Report.

Hearts and Minds. Preventing Heart Disease and Stroke in Buckinghamshire

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Officer support:

Recommendations/Outcomes: The Health and Adult Social Care Select Committee is requested to note the Director of Public Health report and the recommendations contained within it.

1. Background

The Director of Public Health is required to produce an annual report on the health of Buckinghamshire's population. This year's themed report is on preventing cardiovascular disease which includes heart disease and stroke. It provides an overview of the impact of cardiovascular disease on the health and wellbeing of Buckinghamshire residents and what needs to be done to address it.

Cardiovascular disease is one of the largest drivers of poor health and death in the county and the biggest contributor to the gap in life expectancy between residents living in our most and least deprived areas. It is the second commonest cause of dementia. A large proportion of cardiovascular disease is preventable. The report highlights the need for a renewed focus on preventing cardiovascular disease and the risk factors that lead to it. The Council has a key role in this agenda through the services it provides and commissions and the Opportunity Bucks programme. Addressing the key risk factors will improve health in a variety of other ways including reducing the risk of cancer, diabetes, dementia, musculoskeletal problems and poor mental health and produce many other societal and economic benefits, making Buckinghamshire an even better place to live.

2. Main content of report

The report contains data on the impact of cardiovascular disease and the prevalence of risk factors for cardiovascular disease between different groups and areas in Buckinghamshire and what we can do to prevent it.

It highlights the risk factors for cardiovascular disease in 3 categories – behavioural risk factors such as smoking, often invisible clinical risk factors such as high blood pressure and diabetes, and social and environmental risk factors. We need to address all these categories of risk factors to tackle cardiovascular disease.

The social and environmental risk factors include stress at work and poor working conditions, working long hours, poor air quality and experiencing adverse temperatures such as very cold housing or insufficient protection from heat waves.

The behaviours people adopt are very heavily influenced by the commercial, social and physical environment around them, so a focus on individual change alone will be much less effective than changing the environments in which people live, learn, work and play. For example the availability, pricing and advertising of alcohol and unhealthy foods affect behaviour and drive social norms. Children and young people are particularly vulnerable to these environmental influences and many unhealthy behaviours are initiated during childhood and the teenage years and then hard to stop.

Some risk factors like diabetes, high blood pressure and high cholesterol often cannot be detected without clinical tests as many people have no symptoms till later in the course of their illness. It is important to increase the detection and management of these conditions, especially in groups at higher risk of cardiovascular disease, so effective preventive action can be taken.

The report identifies that people living in deprived areas and people from South Asian and black ethnic groups are at higher risk of cardiovascular disease. This is due to a combination of interlinked factors that may include adverse living and working conditions, exposure to chronic stress, opportunities to adopt healthy behaviours and biological factors. People living with serious mental illness are also at increased risk of cardiovascular disease. It is important to identify and address the modifiable risk factors to help prevent or delay cardiovascular disease in these groups.

The report highlights some of the preventive work already underway in Buckinghamshire but also identifies where more could be done. Action is needed from all partners who have an interest in the health and wellbeing of people who live and work in Buckinghamshire and the following recommendations are made for the council and its partners including the NHS.

Recommendations within the Director of Public Health Annual Report:

We need to work together with partners and communities across Buckinghamshire to

1. **Act on the broader determinants of health** such as income, debt, good quality employment, high quality education and healthy environments to level up outcomes across Buckinghamshire. Tackling these issues is an essential component of reducing inequalities in health and cardiovascular disease.
2. **Support a systematic large-scale improvement in behavioural risk factors** by
 - ensuring the physical, social, commercial and economic environments in which people live, work and learn support healthy behaviours
 - increasing the understanding and the skills required to design effective behaviour change interventions across Buckinghamshire Council, the NHS and partners including rolling out the behaviour change Making Every Contact Count programme. This enables people to have “healthy conversations” to support behaviour change in their day-to-day interactions
 - working with communities to understand what would support them to reduce their risk of cardiovascular disease and co-design and evaluate appropriate approaches
 - supporting NHS trusts to implement the NHS Long Term Plan smoking cessation support requirements as smoking is the single biggest modifiable driver of health inequalities
 - working together with partners and communities to develop a whole system approach to healthy eating and physical activity to combat the rise in unhealthy weight and obesity.
 - working together to tackle smoking via the Tobacco Control Action Plan.
 - working together to address harmful alcohol misuse through development of our new drug and alcohol strategy
3. **Increase detection and management of modifiable risk factors in people at higher risk of cardiovascular disease** including those living in more deprived areas, ethnic groups at higher risk of cardiovascular disease and those with mental illness by
 - increasing capacity in primary care in more deprived areas to undertake NHS health checks and detect and manage clinical risk factors such as high blood pressure and diabetes, and refer to appropriate interventions such as smoking cessation
 - working with people from ethnic minority groups to design effective, culturally competent approaches to increase detection of risk factors and management of risk factors
 - working with NHS and local authority partners to develop and implement the whole system plan to tackle inequalities in cardiovascular disease
4. **Improve data collection and monitoring to track progress**
 - Improve data collection in primary and secondary care to enable monitoring of outcomes by ethnicity and areas of deprivation and improve the quality, accuracy and completeness of ethnic monitoring data
 - Undertake equity audits to determine access to and uptake of prevention and treatment initiatives of cardiovascular disease by different groups

3. Next steps and review

Partners are working together to develop a plan to help prevent cardiovascular disease especially in groups at higher risk of cardiovascular disease. The Opportunity Bucks programme offers opportunities to address the broader determinants of health in the target wards and to work with communities to identify what would work for them to improve their health and quality of life. Health and wellbeing is one of the themes of the Opportunity Bucks programme and preventing cardiovascular disease will be a key component of that.