

	<b><u>Agenda Item: 17</u></b>
<b>Report to:</b>	<b>Birmingham Health &amp; Wellbeing Board</b>
<b>Date:</b>	<b>28<sup>th</sup> March 2023</b>
<b>TITLE:</b>	<b>DIRECTOR OF PUBLIC HEALTH ANNUAL REPORT 2022/23</b>
<b>Organisation</b>	<b>Birmingham City Council</b>
<b>Presenting Officer</b>	<b>Dr Justin Varney, Director of Public Health</b>

<b>Report Type:</b>	<b>Information</b>
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### 1. Purpose:

- 1.1. The purpose of the report is to inform the Health and Wellbeing Board about the Director of Public Health (DPH) Annual Report 2022/23.

### 2. Implications (tick all that apply):

Creating a Bolder, Healthier, City (2022-2030) – Strategic Priorities	Closing the Gap (Inequalities)	Y
	Theme 1: Healthy and Affordable Food	
	Theme 2: Mental Wellness and Balance	Y
	Theme 3: Active at Every Age and Ability	
	Theme 4: Contributing to a Green and Sustainable Future	
	Theme 5: Protect and Detect	Y
	Getting the Best Start in Life	
	Living, Working and Learning Well	
	Ageing and Dying Well	Y
Joint Strategic Needs Assessment		Y

### 3. Recommendation

- 3.1. To note the findings of the Director of Public Health Annual Report 2022/23.
- 3.2. To agree to support the recommendations of the report.

#### **4. Report Body**

##### **Background**

- 4.1. The Director of Public Health (DPH) has a statutory duty to write an independent, evidence-based annual report detailing the health and wellbeing of our local population. The DPH report is an opportunity to provide advice and recommendations on population health to both professionals and the public. The report includes a selected, specific issue that the DPH wishes to discuss within the report.
- 4.2. The content and structure of the report are decided locally based on current evidence-based health priorities. Previous year's reports in Birmingham have focused on various topics, including adults with multiple complex needs (2019/20) and the impact of the coronavirus (COVID-19) pandemic (2020/21), and the built environment's relationship with health (2021/22)
- 4.3. The Director of Public Health Annual Report 2022/23 has explored the role that digital technology plays in the health and wellbeing of Birmingham's citizens.
- 4.4. The COVID-19 pandemic brought forth a rapid acceleration in the use of digital technology in clinical and non-clinical settings. The full effects of this transition are not yet apparent. However, there remains a section of the population who are digitally excluded. These individuals usually fall into groups that are in greater need of health and social care. They risk a disproportionate impact on their health and wellbeing as a result of their exclusion and the increasing digitalisation of services and society.
- 4.5. The report has looked at four particular aspects of this topic:
  - Digitalisation, Health and Social Care
  - Social Media and Health
  - Data and Digitalisation
  - Digital Exclusion
- 4.6. The report has used primary and secondary research to develop its findings and propose a set of recommendations for the health and social care system in Birmingham.
- 4.7. The recommendations from the report will be used alongside related strategies and the Joint Strategic Needs Assessment (JSNA) to inform local policymaking and influence decisions made around digital technology and health.

## 5. Compliance Issues

### 5.1. HWBB Forum Responsibility and Board Update

N/A

### 5.2. Management Responsibility

Rebecca Howell-Jones, Assistant Director (Knowledge, Evidence and Governance)

Aidan Hall, Service Lead (Governance)

## 6. Risk Analysis

Identified Risk	Likelihood	Impact	Actions to Manage Risk
Partners do not support the report's recommendations.	Low	Medium	Ensure the report is disseminated widely and that recommendations are embedded in future action plans and strategies.

## Appendices

**Appendix 1** – Director of Public Health Annual Report 2022/23 (The role of digital technology in the health of Birmingham's citizens)

**Appendix 2** – DPH Annual Report 2022/23 Methodology

**Appendix 3** – DPH Annual Report 2022/23 Lessons Learned

**Appendix 4** – Focus Group Summary

**Appendix 5** – Focus Group Questions

**Appendix 6** – Ethnographic Case Studies

The following people have been involved in the preparation of this board paper:

Governance Team, Public Health

Assistant Director (KEG), Public Health