Annual Director of Public Health Report -Berkshire: A Good Place To Work

Report being considered by:	Health and Wellbeing Board on 30 January 2020
Report Author:	Tessa Lindfield
Item for:	Information

1. Purpose of the Report

Statutory annual director of public health report with focus on workplace health and wellbeing. In Berkshire we have a very high employment rate, and therefore a great opportunity to improve health through the workplace. It will benefit the individual, employer and wider society.

2. Recommendations

Multiple recommendations (see report).

3. How the Health and Wellbeing Board can help

Endorse actions, support the report's reception and learn itself about the topic.

Will the recommendation require the matter to be referred to the Executive for final determination?	Yes:	No: x
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4. Introduction/Background

4.1 Evidence shows that 'good work' improves health and wellbeing in overall terms of quality of life. 'Good work' also protects against social exclusion, by providing us with a stable income, social interaction and a core role with identity and purpose. On the other hand, evidence shows us that unemployment is bad for your health – being associated with an increased risk of: limiting long-term illness, heart disease, suicide, poor mental health and health harming behaviour.

5. Supporting Information

5.1 See report

6. Conclusions

- 6.1 Employees are the greatest assets to the growth of a company, and contribute to the vibrant economy of Berkshire. For businesses, cultivating healthy and happy employees helps to build a sustainable workforce and to promote workplace productivity.
- 6.2 Workplace health promotion is dependent upon a collaborative effort from senior management team, line managers and employees themselves. This includes regular review of work policies, implementation of health and wellbeing strategies,

empowering line managers to recognise and support the need of employees, and encouraging employees to participate in wellbeing initiatives.

6.3 As we are heading towards the changing landscape of an ageing workforce, a stronger conscience of our impact on environment, and advancing diversity and inclusion, we would encourage businesses to be creative and proactive in promoting and improving workplace health and wellbeing.

7. Consultation and Engagement

- 7.1 *Dr Jo Jefferies* Consultant in Public Health, Shared Public Health Services for Berkshire
- 7.2 Cynthia Folarin Consultant in Public Health, Bracknell Forest
- 7.3 David Munday Consultant in Public Health, Reading
- 7.4 *Ruksana Sardar-Akram* Consultant in Public Health, Royal Borough of Windsor & Maidenhead and Wokingham
- 7.5 Dr Liz Brutus Consultant in Public Health, Slough
- 7.6 *Matthew Pearce* Consultant in Public Health, West Berkshire
- 7.7 *Becky Campbell* Intelligence manager, Shared Public Health Services for Berkshire
- 7.8 Nana Wadee Information analyst, Shared Public Health Services for Berkshire
- 7.9 *Ria Ingleby* Engagement manager, Headspace for Work
- 7.10 Annie Yau-Karim Public Health Programme Officer, Bracknell Forest
- 7.11 *Rachel Johnson* Senior Programme Officer, West Berkshire
- 7.12 Anneken Priesack Economic development manager, Bracknell Forest Council
- 7.13 Sussane Brackley Economic development manager, Reading Borough Council
- 7.14 Gabrielle Mancini Economic development manager, West Berkshire Council
- 7.15 Joanna Birrell- Thames Valley Local Enterprise Partnership
- 7.16 Caroline Perkins- Thames Valley Local Enterprise Partnership
- 7.17 *Lucy Bowman* Partnership Manager, Bracknell and Slough Department for Work and Pensions
- 7.18 *Stuart White* Thames Water, Head of Media Relations
- 7.19 Dwayne Gillane Royal Berkshire Hospital, Occupational Health Nurse Manager
- 7.20 Glen Goudie Sports and Leisure Manager, Wokingham Borough Council

- 7.21 *Carol-Anne Bidwell* Public Health Programme Manager, Wokingham Borough Council
- 7.22 Neil Impiazzi Partnership Development Director, SEGRO plc
- 7.23 David English Health and Safety Advisor, Panasonic UK
- 7.24 Hilary Hall Deputy director, Royal Borough of Windsor and Maidenhead
- 7.25 *Clare Humphreys* Consultant in Communicable Disease Control, Public Health England
- 7.26 Rachel Jarrett-Kerr Practice sister, Crondall New Surgery

8. Appendices

Appendix A – Annual Director of Public Health Report – Berkshire: A Good Place to Work

Background Papers: See annual report.

Health and Wellbeing Priorities 2018/19 Supported:

x Promote positive mental health and wellbeing for adults.

Health and Wellbeing Strategic Aims Supported:

The proposals will help achieve the following Health and Wellbeing Strategy aim(s):

- x Support mental health and wellbeing throughout life
- x Reduce premature mortality by helping people lead healthier lives
- x Build a thriving and sustainable environment in which communities can flourish
- x Help older people maintain a healthy, independent life for as long as possible

Officer details:

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Appendix A

Data Protection Impact Assessment – Stage One

The General Data Protection Regulations require a Data Protection Impact Assessment (DPIA) for certain projects that have a significant impact on the rights of data subjects.

Should you require additional guidance in completing this assessment, please refer to the Information Management Officer via <u>dp@westberks.gov.uk</u>

Directorate:	Berkshire Shared Public Health – people's directorate
Service:	Berkshire Shared Public Health
Team:	Berkshire Shared Public Health
Lead Officer:	Tessa Lindfield
Title of Project/System:	Annual Director of Public Health Report
Date of Assessment:	24/09/2019

Do you need to do a Data Protection Impact Assessment (DPIA)?

	Yes	No
Will you be processing SENSITIVE or "special category" personal data?		∏x
Note – sensitive personal data is described as "data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, or trade union membership, and the processing of genetic data, biometric data for the purpose of uniquely identifying a natural person, data concerning health or data concerning a natural person's sex life or sexual orientation"		
Will you be processing data on a large scale?		□x
Note – Large scale might apply to the number of individuals affected OR the volume of data you are processing OR both		
Will your project or system have a "social media" dimension?		□x
Note – will it have an interactive element which allows users to communicate directly with one another?		
Will any decisions be automated?		x
Note – does your system or process involve circumstances where an individual's input is "scored" or assessed without intervention/review/checking by a human being? Will there be any "profiling" of data subjects?		
Will your project/system involve CCTV or monitoring of an area accessible to the public?		□x
Will you be using the data you collect to match or cross-reference against another existing set of data?		□x
Will you be using any novel, or technologically advanced systems or processes?		□x
Note – this could include biometrics, "internet of things" connectivity or anything that is currently not widely utilised		

If you answer "Yes" to any of the above, you will probably need to complete <u>Data</u> <u>Protection Impact Assessment - Stage Two</u>. If you are unsure, please consult with the Information Management Officer before proceeding.