



# **Proposals for Commissioning Public Health Programmes 2013-15**

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# Role of the Director of Public Health

- ▶ **Leadership role** within the local authority for the DPH and their team, to exercise these new functions:
  - DPH should be the lead officer for health and championing health across the whole of the authority's business
  - we expect there to be direct accountability between the Director of Public Health and the local authority Chief Executive for the exercise of the local authority's public health responsibilities
  - the DPH should have direct access to elected members
- ▶ Produce an **Annual Report on the health of the population**
- ▶ Be a statutory member of the **Health and Wellbeing Board** – and engaging across the health and wellbeing system.

# **Derbyshire Health & Wellbeing Board**

- ▶ Assess the needs of the population through the Joint Strategic Needs Assessment (JSNA)
- ▶ Agree and produce a Joint Health and Wellbeing Strategy to address needs, which commissioners will need to have regard to in developing commissioning plans for health care, social care and public health.
- ▶ Promote joint commissioning
- ▶ Promote integrated provision, joining up social care, public health and NHS services with wider local authority services.
- ▶ Engage in the development of CCG commissioning plans.
- ▶ Provide advice to the NHS Commissioning Board in authorising and assuring CCG's
- ▶ Continue the policy focus on patient choice, quality and growing the role of the independent/voluntary sectors etc.

# Local authority commissioning responsibilities

- Tobacco control & smoking cessation
- Alcohol and drug misuse
- Services for children 5-19
- National Child Measurement Programme\*
- Obesity and weight management
- Local nutrition services
- Increasing physical activity

- NHS Health Checks\*
- Public mental health services
- Dental public health
- Injury prevention
- Birth defect prevention
- Behavioural and lifestyle campaigns to prevent LTCs
- Local initiatives on workplace health

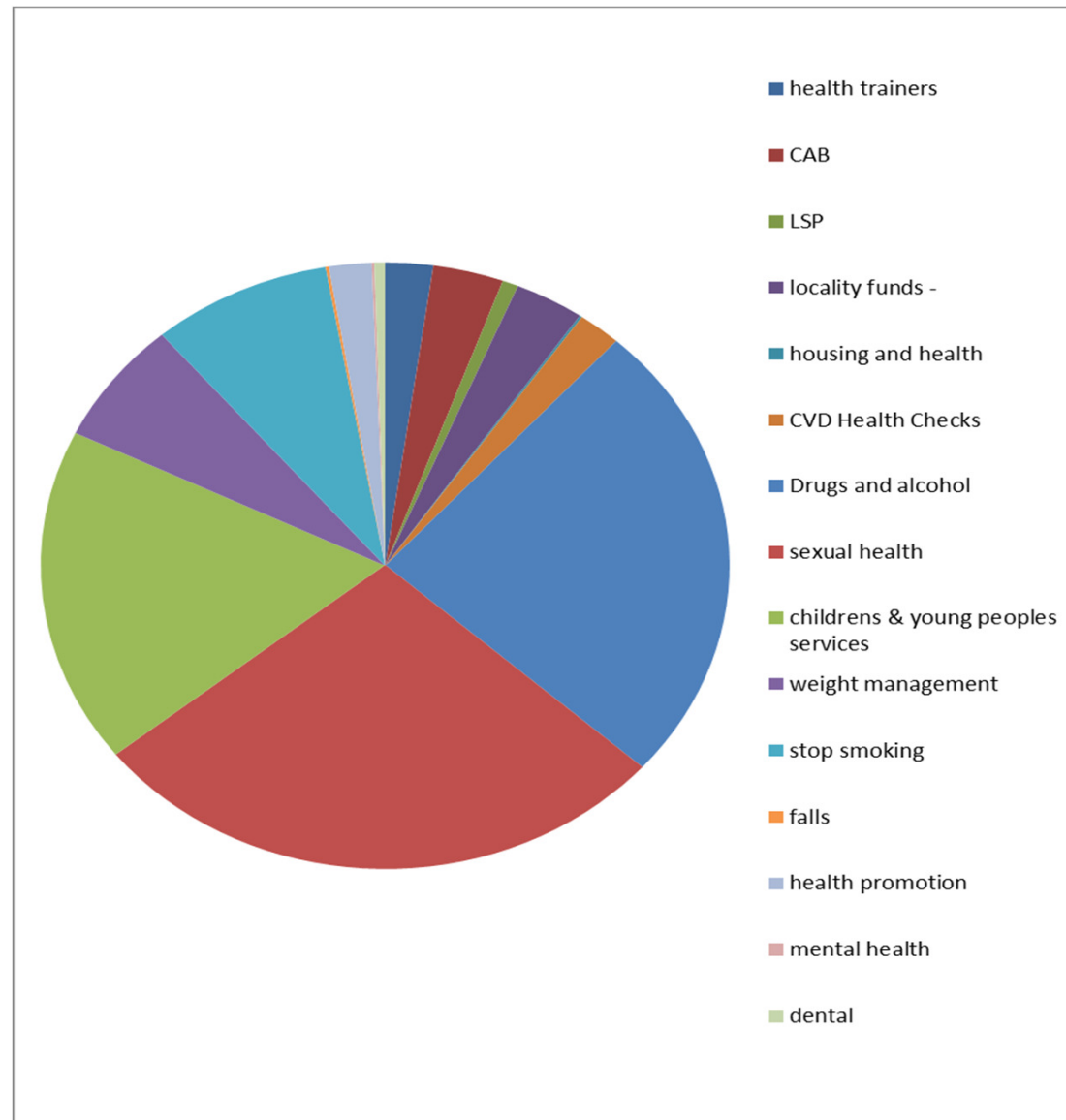
- Support and challenge of NHS services (vaccination and screening)
- Public health advice to the NHS\*
- Sexual health services\*
- Seasonal mortality initiatives
- Local role in health protection incidents\*
- Community safety
- Social exclusion

\* Indicates mandated services

## Funding

- Public health grant to county council of £34m in 2013/14
- Increase of 2.8% from 2010 baseline in 2013/14 Providing an additional £2m funding
- Future unknown but modelled reduction may be around 15% in 2015/16 Redesign of services **will have to reduce costs**
- Vast majority of funding committed to commissioning services already in place

# Breakdown of commissioned services



# **Principles for public health programmes**

- Continue what works
- Level up locality resources on a “fair shares” basis
- Redesign for better value and improved outcomes to meet needs
- Additional resource to tackle poverty, make healthy choices easier and focus on healthy settings

## Glossopdale

- 14% of the programmes that were previously commissioned by NHS Tameside & Glossop have been inherited by the Council
- The review process has included these services which are currently commissioned by Tameside MBC with the Council in an associate commissioner role
- These services are likely to be provided in future based on a Derbyshire model
- A process of engagement with local people and stakeholders will be needed



## **Areas for additional funding & pressures**

- Levelling up and sharing locality funding to align with public health priorities and tackle health inequalities across the life course
- Health checks- move to a mixed model of GP's and other providers, historical funding gap
- Additional investment in preventative aspects of falls for older people
- Proposal to reduce social isolation through an outreach approach aligned to the befriending service

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## **Measures to tackle wider issues**

- Match funding of CAB in Children's Centres
- Support for people out of work on health grounds to get back into employment
- Heart of Derbyshire proposal to change to a healthier options food environment
- Healthy workplaces programme
- Proposal to improve access to affordable warmth measures for older people
- Action on illicit and illegal tobacco
- Credit union access to loans

## **Proposals to the Council**

- A report is going to Cabinet on 29<sup>th</sup> July making recommendations for the future of the public health programmes
- Once this is agreed there will be a series of reports coming to Cabinet and to this committee giving more detailed plans on each programme area
- The process will include consultation as part of the contracting and redesign process