

By: Graham Gibbens, Cabinet Member for Adult Social Care and Public Health
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To: Adult Social Care and Public Health Policy Overview and Scrutiny Committee - 10 November 2011

Subject: **Update of Public Health Expenditure**

Classification: Unrestricted

Summary: This report provides members of the Adult Social Care and Public Health Overview and Scrutiny Committee a flavour of how the NHS health improvement budget is being commissioned currently across Kent.

Introduction

Part of the NHS reforms is the move of Public Health to the local upper tier Local Authority, and the move to the Local Authority of a ring fenced budget for health improvement.

In July 2011, the full Kent County Council approved the Memorandum of Understanding between the County and NHS Eastern and Coastal Kent and West Kent Primary Care Trusts for a change in leadership for Public Health and Health Improvement to the County. The MOU also highlighted the health improvement budget of some £17m, which, subject to national confirmation, is likely to move to KCC in April 2013.

This paper describes in more detail the current expenditure of the £17m including:

- The rationale for the expenditure.
- Current targets.
- Evidence base for the service and
- Current performance.

There is invariably a national Department of Health requirement, through NHS Operating Plans to deliver these services, with many underpinned by the National Institute for Health and Clinical Excellence (NICE) published public health and clinical evidence.

Comments

1. Performance Management

Performance management was carried out through the NHS performance

management system and reported to respective NHS boards and more latterly the Cluster Board. We are now working with KCC performance management system to ensure performance is also included.

2. Differences in Eastern and Coastal Kent and West Kent Health Improvement Commissioning

Now that the two Public Health Directorates of Eastern and Coastal Kent and West Kent are beginning to operate as one, we are reviewing all our health improvement service level agreements for consistency with aim to have one consistent contract per service across Kent where possible.

3. Future Commissioning

Further thought is now being given to how we use the health improvement budgets in the future, how they can be aligned with existing expenditure and how they could be used on a locality basis to deliver local health improvement services.

Recommendation:-

4. Members are asked to note the health improvement expenditure.

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Background Information: *Nil*

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