

By: Graham Gibbens, Cabinet Member for Adult Social Care & Public Health
Meradin Peachey, Director of Public Health

To: Social Care and Public Health Cabinet Committee – 11 January 2013

Subject: **Public Health 23 Programmes**

Classification: Unrestricted

Summary: This report provides an overview of the 23 programmes and services which are transitioning to the responsibility of Kent County Council from April 2013. This report also sets out commissioning intentions for 2013/14 subject to NHS budget allocation

For Decision: The Cabinet Committee are asked to consider this report, note the contents and either endorse or make further recommendations for the transition and commissioning of the 23 Public Health programmes and services to Kent County Council.

Introduction

1. (1) This report builds upon previous reports to the now decommissioned Adults Social Care and Public Health Policy Overview and Scrutiny Committee and to the Social Care and Public Health Cabinet Committee regarding the national changes to the public health system and the movement from the National Health Services to Upper Tier Local Authorities. The report summarises each of the 23 programmes and services coming to the County Council and highlights future commissioning intentions. Key changes have previously been agreed through this committee.

Health and Social Care Bill - 27 March 2012

2. (1) The enactment of the Health and Social Care Bill gives KCC, as an upper tier Authority, a new duty “to take appropriate steps to improve the health of the people.”

(2) As well as the Act introducing a generic duty, it also requires KCC to undertake a number of specific steps including:

- Establishing a Health and Wellbeing Board
- The development of an enhanced Joint Strategic Needs Assessment (JSNA) under the auspices of the Health and Wellbeing Board
- Commissioning Kent HealthWatch
- Assuming statutory responsibility for some of the key elements of the new national Public Health System

- Appointing (by statute) a Director of Public Health
- (3) The Act introduces a new national Public Health system consisting of four elements:
- National Commissioning Board
 - Public Health England
 - Clinical Commissioning Groups
 - Upper Tier Local Authorities

(4) In effect, this means that KCC becomes an integral part of this new national system providing locality-led leadership and oversight of Public Health (PH) in the County, together with responsibilities in delivering some key PH services from the 1 April 2013. To support these new responsibilities the Authority will receive a ring-fenced budget and the transfer of most of the existing NHS staff currently working in PH in Kent. At the time of writing this report the notification of NHS budgets including PH allocation to LAs was still awaited.

23 Public Health Programmes and Services

3. (1) The transfer includes the shaping and delivery of 23 Public Health programme/services of which, going forward, the following will be mandated from next year:

- Appropriate access to sexual health services (including testing and treatment for sexually transmitted infections, contraception outside of the GP contract and sexual health promotion and disease prevention).
- Steps to be taken to protect the health of the population, in particular giving the local authority a duty to ensure there are plans in place to protect the health of the population.
- Ensuring NHS commissioners receive the Public Health advice they need.
- NHS Health Check assessments.
- The National Child Measurement Programme.

(2) Outside of these mandated services, other services will be discretionary (although the Secretary of State holds reserve powers over the direction of other services) with the Health and Well Being Strategy and the JSNA guiding delivery against these other areas. However, performance will also be judged against the national Public Health Outcomes Framework which will influence the allocation of future resources through the proposed Public Health premium system.

(3) The Act also makes it clear that the Authority has a responsibility for taking appropriate steps to protect the health of the population and to ensure the safety of Public Health services.

4. (1) The accompanying report sets out for each of the 23 programmes and services:

- What the programme or service is
- Who is it for
- The Contracted provider(s)
- The evidence base for the service
- Targets and Outcomes
- Issues, Gaps and Opportunities
- What is the cost and what we get for the money

(2) Please note that a good number of programmes do not have budgets attached to them, but rather are delivered through the advice Public Health Consultants and their teams provide to the “system”

(3) At the time of writing, Public Health continue to work with the Local Area Team of the National Commissioning Board and with Clinical Commissioning Groups to identify and confirm how Public Health will work with these bodies in the future. Thus the outline of these programmes is subject to on-going change as the detail is clarified.

Commissioning Intentions 2013/2014

5. (1) Our intention is to roll the majority of existing contracts with our providers giving us collective time to prioritise and systematically review each and every contract following the novation to Kent County Council.

(2) However, the Social Care and Public Health Cabinet Committee have previously agreed the following changes which are currently being implemented:

- Health Checks to be commissioned county wide via the Kent Community NHS Healthcare Trust
- The procurement of more efficient diagnostic costs in the Chlamydia screening service
- The commissioning and procurement of a new genitourinary medicine service for the north Kent area, following Dartford and Gravesham NHS Trust serving notice.

Finance and Budgets

6. (1) After April 2013, PH and the 23 programmes and services will be funded through a new Public Health budget, essentially a ring-fenced grant to upper tier and unitary authorities. Announcements of the actual budget are expected to be made by the NHS before Christmas 2012 and a verbal update on the position will be made to the Social Care and Public Health Cabinet Committee.

(2) Detailed analysis work through Finance Departments of PCTs and the County show that the current total expenditure on the 23 PH programmes and services is in the order of £43.6m.

Conclusion

7. (1) This report informs the Committee of the detail behind the 23 Public Health programmes and services being transferred to the County Council from April 2013. It seeks endorsement by the Committee in the Cabinet Member for the approach of a prioritised systematic review of Public Health contracts for 2013/14 and beyond over and above previous commissioning decisions which the Cabinet Committee has previously taken.

Recommendations

8. (1) To note the detail of the 23 Public Health programmes and services which become the responsibility of the County Council from April 2013
- (2) To endorse the Cabinet Member's approach to roll existing contracts with a prioritised and systematic review through 2013/14 and beyond, with the exception of the programmes previously agreed by this Cabinet Committee.

Background Documents

None

Contact details

Andrew Scott-Clark
Director of Public Health Improvement
andrew.scott-clark@eastcoastkent.nhs.uk