

From: Andrew Scott-Clark, Director of Public Health

To: Graham Gibbens, Cabinet Member for Adult Social Care and Public Health

Decision No: 15/00062

Subject: The Public Health Strategic Delivery Plan and Commissioning Strategy

Classification: Unrestricted

Past Pathway of Paper: Adult Social Care and Health Cabinet Committee 1 May 2015 and 10 July 2015

Future Pathway of Paper: Cabinet Member decision

Electoral Division: All

Summary:

Since KCC undertook responsibility for Public Health in April 2013, continuous review has been undertaken of the approach to public health and the contracts that transferred.

Public Health has recently been developing a new strategy for Kent and an aligned commissioning plan. This is to ensure that the future approach to public health will be based around the needs of the person, encourage personal responsibility and, wherever appropriate, be delivered within integrated services. Most importantly, activity must reduce health inequalities.

The experience of other areas in the country has been examined, and market engagement events have been held to understand the latest developments in the market.

It is clear that a new approach is needed, and Public Health will engage and explore the opportunities with all partners.

To deliver the planned transformation effectively and smoothly, current contracts will need to end at the same time, to bring about the opportunity to commission a new model. It is therefore proposed that the Cabinet Member for Adult Social care and Public Health take a decision to extend the current contracts for the Smoking Cessation, Health Checks, Health Trainers and Healthy Weight services to run until 30th September 2016.

Recommendations:

The Cabinet Member is asked to agree to extend the current contracts for the Smoking Cessation, Health Checks, Health Trainers and Healthy Weight services to run until 30 September 2016.

1. Introduction

- 1.1 The Adult Social Care and Health Cabinet Committee has been shaping the development of the emerging public health strategic plan and commissioning strategy, and this will be the third time that the topic has been discussed by the committee.
- 1.2 In the previous discussion, the drivers for change for the work were outlined, and the committee was asked to comment on the emerging Kent Public Health Outcomes Framework.
- 1.3 Since that discussion, a large amount of analysis work has been undertaken to inform potential models of transformation. This work will be summarised in an attached presentation to Members; 'Public Health Transformation'. In addition, a new financial settlement for the Kent public health grant is being worked through and any transformation programme will need to deliver against the final budget settlement.
- 1.4 Following discussions with Members at the July 2015 meetings of both the Adult Social Care and Health Cabinet Committee and the Children's Social Care and Health Cabinet Committee, it will be necessary to engage with partners and stakeholders on the emerging findings and potential new models of intervention.
- 1.5 The research shows that any new model should integrate healthy lifestyle interventions rather than sustaining an approach which has lots of different services for different lifestyle issues. The current approach is shown to be inefficient, and potentially increases health inequalities. For this purpose, the proposal to extend the current contracts grouped them together under the 'Living Well/Ageing Well' heading.

In order to develop this new model of intervention it is therefore necessary to harmonise our current contracts, which, at present have different end dates. It is also important that there is time to engage with the wider health and wellbeing system, and engage it to develop new approaches. It is therefore proposed to extend the contracts detailed in paragraph 2.1 to 30th September 2016 and begin a new model from October 2016.

- 1.6 The committee will also be asked to consider the process for Drug & Alcohol commissioning under a separate report at this meeting. This includes a proposed approach which would enable commissioners to amend the scope of the Drug and Alcohol contracts. This would allow interventions to be added or removed, and services grouped in order to bring in a wider range of providers, if necessary.

This flexibility will be crucial to ensure that the wider changes in health improvement services discussed here can effectively address drug and alcohol misuse, especially those relating to people drinking at increasing or higher risk levels.

- 1.7 The slides attached as Appendix A detail the process to date, and findings from the analysis work, and will form the basis of a presentation to the committee at the meeting.

2. Financial Implications

- 2.1 The Living Well/Ageing Well contracts that are proposed to be extended currently have annual values as follows:

- Health Checks (currently expires January 2016) - £1,940,912
- Healthy Weight (currently expires January 2016) - £2,010,724
- Smoking Cessation (currently expires March 2016) - £1,873,207
- Health Trainers (currently expires January 2016) - £1,434,222
- Drug and alcohol (discussed in a separate report) - £12,800,000

3. Timeline

- 3.1 The work to transform public health services has been divided into three phases as follows

3.2 Phase 1: March 2015 – September 2015

- Member briefings and Cabinet Committee
- Outcomes agreed
- Analysis and Review
- Market engagement
- Stakeholder consultation
- Health and well being board consultation
- Contract alignment and management

3.3 Phase 2: October 2015 – April 2016

- New models of provision and specifications agreed.
- Key decisions taken.
- Resource levels agreed.
- Invitations to tender issued.

- Procurement processes starts.
- KCC Making Every Contact Count

3.4 Phase 3: April 2016 – September 2016:

- Transition to new service models
- Staff reconfiguration
- Change management and communication
- New model formal start date October 2016

3.5 To deliver within this timescale requires the new model to start by October 2016.

Progress will be reported back to this committee in the autumn, where there will be an opportunity to input into how the service specification(s) are shaped prior to any tendering process starting.

4. Conclusion

4.1 Development of a new approach is needed to meet the challenges faced in public health, the changing needs of the population and the financial envelope of the public health grant.

The next step of this process is to engage with partners on the emerging findings and build a new model with them. In order to deliver this programme smoothly and successfully, there is a need to synchronise the start and end dates of relevant Living Well/Ageing well contracts, set out in paragraph 2.1, above.

5. Recommendation(s)

Recommendations:

The Cabinet Member is asked to agree to extend the current contracts for the Smoking Cessation, Health Checks, Health Trainers and Healthy Weight services to run until 30 September 2016.

6. Background Documents

Update on Developing the Public Health Strategic Delivery Plan and Commissioning Strategy, presented to Adult Social Care and Health Cabinet Committee on 1st May 2015

7. Contact details

Report Author

Karen Sharp
Head of Public Health Commissioning
03000 416668
Karen.sharp@kent.gov.uk

Relevant Director

Andrew Scott-Clark, Director of Public Health
03000 416659
Andrew.scott-clark@kent.gov.uk