#### **Public Health**

# Elizabeth Shassere Director of Public Health Health Overview and Scrutiny

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## Key work completed during the year 2013/14

- Established public health as a new local authority function
- Built a new budget to meet new responsibilities using the public health grant
- Completed a review of the public health function including a skills audit and established a fit for purpose, lower cost public health team structure
- Created a Strategic Intelligence Team combining the public health intelligence team and the central research team that serves the whole council and partners
- Novated, stabilised, and reviewed the public health contracts transferred to Herefordshire Council from the PCT



# Successes during 2013/14

- Review and refresh of the joint strategic needs assessment, Understanding Herefordshire, and Child Health Needs Assessment due for completion by end March 2014
- Establishment of key priorities for delivery set out in DPH annual report 2013 using JSNA-based health need
- Stabilisation of delivery of Public Health mandated services
- Important developments in the School Nursing Service
- Establishment of a shared, life-course approach with other commissioning bodies for the integration of child health services to improve child health outcomes



## Challenges during 2013/14

- Optimising the new budget profile to meet new responsibilities using the public health grant
- Working to improve contracts novated to the council with poor documentation and/or previous contract management in place
- Having neither commissioning nor procurement support until late in the financial year to do this work and commission services to meet unmet health need
- This also directly affects the ability to build the budget and improve contracting as above
- Vacancies and lack of essential support have delayed service review and redesign to prepare for transformational commissioning strategy delivery



#### **Key work for 2014/15**

- Key priorities for 2014-2015 are stated in the DPH annual report and include addressing poor health outcomes in our most deprived communities, alcohol misuse, and the needs of carers
- Deliver the transformational commissioning strategy for public health services through service review, redesign and commissioning for outcomes based on the JSNA
- Transform public health services for children aged 0-19 years to improve health outcomes and give children the best start in life



#### Key areas of risk for 2014/15

- Maximising the use of the public health grant for collaboration and investment in programmes across council services that show due regard for the JSNA and address unmet health need.
- Ensuring the role of public health and the conditions for the use of the grant are understood and supported.
- Transforming inherited public health services so that they are sufficient to meet local need and investing in areas of need where there is limited/no investment and/or require review.
- There is a risk that there may be insufficient funding within the public health allocation and/or insufficient resource within the public health team to address these needs and achieve these benefits.
- Staff retention/recruitment. Public health is a skills-based discipline and recruitment of suitably qualified and experienced staff can be difficult.



