

Meeting:	Health and social care overview and scrutiny committee
Meeting date:	28 September 2016
Title of report:	Public health update
Report by:	Director of public health

Classification

Open

Key decision

This is not an executive decision

Wards affected

Countywide

Purpose

To provide an overview of performance of public health services and programmes in order to provide assurance.

Recommendation

THAT:

- (a) the committee consider the performance of public health programmes and service; and**
- (b) review actions being taken to address under performance; and**
- (c) also make any further recommendations to deliver improved performance; and**
- (d) agree on the public health programmes/services for further review by the committee in 2016-17**

Alternative options

1. There are no relevant alternative options; it is the role of the committee to review the performance of the council (and health partners) and to make recommendations for improvement where appropriate.

Reasons for recommendations

2. To enable the health and social care overview and scrutiny committee to fulfil its function.

Key considerations

3. As of 1 December 2015, Addaction has been providing substance misuse and alcohol services. Along with other drug and alcohol service providers across England

Addaction was required to move to a recovery model of care. As the incoming new service provider they have had the challenge of implementing the new model whilst maintaining continuity of care for existing clients. Herefordshire Council has been working with Addaction to ensure adequate service provision across the county.

4. As of 1 of December 2015, Herefordshire Health Partnership has been providing the sexual health services. The new provider did face some challenges in implementing the contract, but these have been resolved amicably.
5. There are two types of stop smoking contracts, behavioural support and pharmacotherapy. The main providers are Taurus, GP practices and community pharmacies. In 2015-16, 261 people set a quit date and 132 were confirmed quit at 4 weeks from quit date (50% success which equates with the national average). For 2016/17 quarter 1 the figures are 52 setting a quit date and 15 reported quit at 4 weeks (29% success). Public health has been considering to increase the number of organisations (including GP practices and pharmacies) approved to provide stop smoking behavioural support.
6. NHS health check uptake had been 49% against the interim national target of 66% in 2015-16. These year to-date data show that uptake continues to be low (36%). Taurus and GP practices have been providing this service, whereas other providers have not been able to provide the service due to lack of access to patient data. Public health has been working with Taurus to use other providers making this more accessible in terms of timings and location.
7. The public health programmes and services for further review by the committee include:
 - Healthy child programme 0-19
 - Children and young people mental health
 - Healthy lifestyle trainer service (HLTS) for behaviour change
 - Active HERE
 - Healthier you (diabetes prevention programme)
 - Public health savings 2016-17 to 2019-2020

Community impact

8. The topics selected for the scrutiny work programme should have regard to what matters to residents of Herefordshire.

Equality duty

9. The focus of public health programmes is to reduce health inequalities and to commission services that are accessible to hard to reach communities. All of the services that are commissioned by the public health grant demonstrate the council's commitment to its equality duty.

Section 149 of the Equality Act 2010 imposes a duty on the council to have due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic (disability being one such characteristic) and persons who do not share it.

Public health programmes/services aim to identify and support those who suffer from or are at a high risk of developing physical and mental health problems. Continued

improvement and development of these programme/services will support the council in discharging it's duty under the act and will help deliver the 3 aims of the duty:

- eliminate discrimination, harassment, victimisation and any other conduct ... prohibited by or under this Act;
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.”

Financial Implications

10. Public health is funded through a ring fenced grant by Department of Health (DH). In 2014-15 this grant was cut by 6.2%. A further 2.2% cut in 2016-17, 2.5% in 2017-18, 2.2% in 2018-19 and 2.2% in 2019-20 have been announced by the DH. The total Herefordshire grant for 2016-17 is £9.7m and it is required to make around £1.0m savings in the next four years (2016-17 to 2019-20). These savings will be planned and developed as part of the overall AWB savings plan, through the council's corporate MTFS process.

Legal Implications

11. The Health and Social Care Act 2012 provides that local authorities have a statutory duty to improve the health of their population. The director of public health is required to produce an annual report on the health of the local population and the convening of a public session to discuss the performance of the public health service in Herefordshire will contribute to this.

Risk management

12. There is a reputational risk to the council if it fails to discharge its public health responsibilities as set out in the Health and Social Care Act 2012.

Consultees

13. The public health team consults regularly on the public health programmes and services (covered in this report) with management board, council, cabinet and leader, NHS commissioning bodies, category one responders, voluntary organisations and provides such as Taurus, Wye Valley NHS Trust, Worcester Community Healthcare Trust and Addaction.

Appendices

Appendix a – Public health update report

Appendix b – Addaction Herefordshire presentation

Background Papers

None identified.