

Public Health Departmental Plan 2014-2015

Section One: Introduction

Nationally, the Health & Social Care Act 2012 marked a change in Public Health leadership from the NHS to Local Government.

At a local level, the Health & Social Care Act gives local authorities the responsibility for improving the health of their local populations. By maintaining a broad view of what services can impact positively on the public's health, Local Authorities have the opportunity to lead the integration of traditional public health activities with other activity to maximise benefits. This includes continued close work with the NHS and social care along with developing new ways of working with housing, environmental health, leisure and transport, influencing the wider determinants of health.

The Act described the core functions of Public Health and included five mandated functions along with the statutory responsibility for Local Authorities to produce a Joint Strategic Needs Assessment, Pharmaceutical Needs Assessment and Health & Wellbeing Strategy, led through local Health & Wellbeing Boards.

The following services are defined as mandatory and underpin the overarching duty for health improvement:

- NHS Health Check assessments
- Open access to sexual health services
- The national child measurement programme
- Health protection incidents, outbreaks and emergencies
- Public Health Advice to NHS Clinical Commissioning Groups (CCGs)

The local authority statutory health protection role includes providing information and advice to relevant parties within their area in order to promote the preparation of, or participation in, health protection arrangements against threats to the health of the local population, including infectious disease, environmental hazards and extreme weather events.

The Health Inequalities challenge

By working to improve health, Public Health is also committed to helping those who are most disadvantaged, reducing the gap between the most and least disadvantaged, and reducing gradients across the whole population.

The Marmot review 'Fair Society; healthy lives' was published in 2010. It identified important health inequalities within England, making recommendations to build a framework for action to address two main policy goals:

- Enabling society that maximises individual and community potential
- Ensuring social justice, health and sustainability are at the heart of policies.

Although the review was published four years ago little has changed to reduce health inequalities, and therefore public health's contribution, through its expertise and influence, has been never more essential.

What Public Health Aims to Achieve

Public Health strives to improve health by maintaining a broad overview on what can be done to improve the health of whole communities. By taking a system wide approach, Public Health offers expertise, working with partners to help improve the quality of commissioning to improve health. Health policy can be developed that uses the strengths of collaboration to achieve a common goals, addressing local need and reducing health inequalities.

Public Health aims to improve the public's health through the following actions:

Health Improvement: Helping people to live healthy lives, to make healthy choices and reducing health inequalities.

Health Protection: Ensuring the population's health is protected from major incidents and other threats, such as infectious diseases and environmental hazards.

Healthcare public health and preventing premature mortality: Through effective service commissioning, reduce the numbers of people living with preventable ill health and of people dying prematurely, while reducing the inequalities gap between communities.

The Marmot review highlighted that people living in the poorest areas die on average seven years earlier than people living in richer areas, and have higher rates of mental illness; disability; harm from alcohol, drugs and smoking. Public Health aims to work to address the causes of this health inequality through identifying policy changes that will have the most impact for those in greatest need.

Section Two: Corporate Strategy & Public Health

Public Health contributes to the Strategic Objectives of the Council through the following priorities and actions:

Nottinghamshire County Council's Strategic Plan for 2014-18 sets the vision for Nottinghamshire to be a better place to live, work and visit. It sets out the Council's values; treating people fairly, value for money and working together; and describes its five core priorities:

- Supporting safe and thriving communities

- Protecting the environment
- Supporting economic growth and employment
- Providing care and promoting health
- Investing in our future

Public Health arguably contributes to all areas, but specific outcomes for Public Health are included for health protection and health improvement.

Supporting safe and thriving communities

Outcome	How will we measure progress	Role of the Council
The health and safety of local people are protected by organisations working together	A multi-agency plan is agreed to lead a response across partners to health emergencies from infectious diseases, environmental, and chemical hazards	Through the Director of Public Health, we will provide leadership across partner organisations to protect the health and safety of local people

Providing care and promoting health

Outcome	How will we measure progress	Role of the Council
The health inequalities gap is narrowed, improving both health and well-being	Effective health and well-being interventions are targeted to where they are most needed	We will work in partnership to maximise the use of resources to target the areas of greatest need, highest demand and tackle inequality

The Strategic Plan is supported by a corporate delivery plan that demonstrates how these outcomes will be met. This was formally approved by the Policy Committee on 2 April 2014.

Outcome – The health and safety of local people are protected by organisations working together

- Agree multiagency plans for effective management of communicable disease outbreaks and incidents arising from environmental and chemical hazards (May 2014)
- Agree updates to multiagency Pandemic Flu plan (Sept 2014)
- Implement arrangements for protecting people against healthcare associated infections in community settings (March 2015)

Outcome – The health inequalities gap is narrowed improving both health and wellbeing

- Implement the Nottinghamshire Health & Wellbeing Strategy agreed by the Health & Wellbeing Board

- Maximise the use of resources to deliver health improvements and identify opportunities to make value for money improvements, whilst still delivering public health outcomes.
 - Tobacco control – Use a targeted approach to reach people from priority and hard to reach groups (e.g. routine and manual workers, pregnant women and young people) enabling them to receive stop smoking support.
 - Alcohol misuse – Establish new services across Nottinghamshire to support recovery from substance misuse.
 - Obesity & Healthy Weight – Establish equitable obesity prevention and weight management services in each district across the county
- Agree five evidence based interventions that target areas of greatest need and are known to address health inequalities, as recommended by the Health & Wellbeing Board

Redefining Your Council is the Council's new approach to ensuring that the services that the people of Nottinghamshire value can be delivered in a sustainable way. It will provide a framework for transformation and will ensure the Council can deliver the Strategic Plan priorities.

Public Health is a core function for the Council, but as for all services, Public Health will review delivery and performance to make sure that commissioning outcomes deliver maximum health gain and value for money is optimised..

Our Strategy for Health & Wellbeing in Nottinghamshire sets out the Health & Wellbeing Boards vision for improving health and wellbeing for the people of Nottinghamshire. The strategy identifies four main ambitions:

- For everyone to have **a good start in life**
- For people to **live well**, making healthier choices and living healthier lives
- That people **cope well** and that we help and support people to improve their own health and wellbeing, to be independent and reduce their need for traditional health and social care services where we can.
- To get everyone to **work together**

The four ambitions drive work around a wide range of priorities, which include drugs and alcohol, obesity, sexual health, emotional and mental health. Public Health are responsible for commissioning many of the services related to the priorities areas, therefore the delivery of the strategy is embedded in the priorities for Public Health.

In addition, the Public Health knowledge and skillset are important in influencing the commissioning of a wide range of other services to improve health and wellbeing as highlighted within the corporate strategies and departmental priorities.

Section Three: Public Health Functions

Public Health works on a number of levels to deliver improvements in health.

- Public Health has responsibility for directly commissioning a range of services to improve health.
- Public Health offers direct advice and support to NHS and Local Authority commissioners.
- Public Health uses its influence to work in partnership with others to establish health improving policies and programmes as part of a system wide approach.

Table One describes all the core functions of Public Health

Table One: Public Health functions

Directly Commissioned Public Health Functions

Public Health Service Commissioning

Comprehensive sexual health services	Comprehensive Sexual Health Services for the advice and provision of contraception, identification, treatment and prevention of spread of sexually transmitted infections including HIV, and termination of pregnancy.
The National Child Measurement Programme	A national programme that measures the weight and height of children in reception class (aged 4 to 5 years) and year 6 (aged 10 to 11 years) to assess overweight children and obese levels within primary schools.
NHS Health Check assessments	A national risk assessment and prevention programme that identifies people at risk of developing heart disease, stroke, diabetes, kidney disease or certain types of dementia, and helps them take action to avoid, reduce or manage their risk of developing these conditions
Substance Misuse Services	Reducing the harm caused by drug and alcohol misuse through preventative lifestyle advice and through the commissioning of services that support the needs of the individual, their families and carers to enhance their recovery potential
Public Health services for children and young people aged 5-19 years	<p>Including (1) the School Nursing Service, which provides a universal service to all school-age children and young people, delivering the Healthy Child Programme, providing prevention and early intervention services, and addressing key public health issues including obesity, emotional health and wellbeing, sexual health, drug, alcohol and tobacco misuse. In addition, school nurses support children with illness and disability to access education and recreation.</p> <p>And (2) The Healthy Schools and Early Years Programme, which supports schools and children's centres to become "Healthy Schools" or "Healthy Early Years" respectively, by providing opportunities within these settings to enhance emotional and physical health. Through encouraging children and young people</p>

	to lead healthy lives, making healthy choices, this will lead to better health and wellbeing, improved educational attainment, increased social inclusion and reduced health inequalities.
Dental public health services	Public Health life-course Interventions to promote good oral health and prevent oral disease, through advice and education during pregnancy and to parents of young children, dental advice in schools, special schools and Residential Homes, funding of water fluoridation by water companies.
Obesity & Healthy Weight	Interventions to tackle obesity such as community lifestyle and weight management services, locally led nutrition services and exercise services to Increase levels of physical activity in the local population.
Tobacco control and smoking cessation services	Programmes to tackling the harm caused by smoking that includes strategies that reduce the demand for, and supply of tobacco in communities through enforcing the minimum price of tobacco, ensuring that non price measures such as advertising restrictions, smoke-free laws and health warnings are in place locally, providing information and advocacy, providing effective stop smoking programmes, restricting access to minors and controlling the illicit trade
<u>Other Core Public Health Functions</u>	
<u>Health Protection Functions</u>	
The local authority role in dealing with health protection incidents, outbreaks and emergencies	This involves a statutory leadership role for health protection, executed through the DPH. The role extends to health emergency preparedness, resilience and response and the assurance of health protection functions for which responsibility for commissioning or coordinating lies with other organisations in the system, such as arrangements for the preventative aspects of health protection e.g. national screening immunisation programmes commissioned by NHS England.
Community Infection Prevention and Control	Provision of specialist advice and education to health and social care organisations to prevent and reduce the risks of harm to the population from acquiring healthcare associated infections.
Environmental risks	Local initiatives that reduce Public Health impacts of environmental risks
<u>Health Improvement Functions</u>	
Behavioural and lifestyle campaigns	Health promotion campaigns or initiatives to prevent cancer and long-term conditions.
Community safety & violence protection	Public health aspects of promotion of community safety and prevention of violence against the person (Domestic and sexual.)
Public mental health services	Strategic leadership to improve mental health and wellbeing of the population to prevent mental illness and ensure appropriate access to, and delivery of, mental health and social care services for individuals with a mental health illness and reduce the rate of suicide.
Seasonal mortality	Local initiatives to reduce excess deaths as a result of seasonal mortality.

Social exclusion	Public Health aspects of local initiatives to tackle social exclusion
Public Health Advice Functions	
Public Health Advice to the Clinical Commissioning Groups (CCGs) via a Memorandum of Understanding (MoU)	Provision of population health advice, information and expertise to CCGs to support them in commissioning evidence-based, cost-effective health services that improve population health and reduce inequalities
Avoidable injury prevention	Strategic leadership to help prevent avoidable injuries in children and young people, including the co-ordination and development of clear communication channels between agencies and targeting of population groups.
Population level interventions to reduce and prevent birth defects	Surveillance systems to monitor the incidence of birth defects and share learning; advise commissioners of maternity services as appropriate.
Local initiatives on workplace health	Initiatives to promote the importance of health and wellbeing at work, such as workplace wellbeing programmes and employers accreditation schemes.
Prisoners Health	Strategic leadership to help deliver and sustain good health among the prison population.

Section Four: Public Health Priorities for 2014-15

Public Health will continue work on all areas of responsibility to deliver health improvements and tackle health inequalities across the County. Key actions are identified in this Business Plan to meet the following priorities:

Improve efficiency and quality in commissioned services

With the current financial pressure on public services, it is more important than ever that public money is used to achieve the maximum benefit possible. Public Health is a systems leader in commissioning for outcomes, and will continue to assess its responsible functions, reviewing and re-commissioning services to improve cost-effectiveness, quality and performance. Priority projects for 2014-15 include:

Obesity & Weight Management

Following review of local need and access to services, Public Health identified significant gaps in services. A re-procurement plan was agreed to commission new services to address local health needs and promote a healthy weight programme.

- Develop a strategic departmental plan to secure resources for areas of greatest priority within Public Health.
- Maximise the use of resources to deliver health improvements and identify opportunities to make value for money improvements, whilst still delivering public health outcomes for substance misuse, obesity and tobacco control.

- Commission new services to deliver an effective community infection prevention and control service for Nottinghamshire.
- Review the effectiveness of the current Health Checks programme and consider new approaches to achieve more equitable coverage of local residents and better targeting at hard to reach groups.
- Assess current sexual health services, public health services for children and young people aged 5-19 years and dental public health services to determine impact, cost-effectiveness and opportunities for future efficiency.
- Assess the current provision of information to people with health and social care needs to ensure that it meets the needs of all sections of the community.

Explore new opportunities to improve health

Changes to the health and social care system have brought health and social care colleagues closer together. Public Health is in prime position to maximise the opportunities for joint work and wider influence to collectively improve health across sectors.

- Lead work through the Health & Wellbeing Board to deliver significant improvements in health through delivery of the Health & Wellbeing Strategy.
- Work through the Health & Wellbeing Board to target areas of greatest need, in order to address health inequalities.
- Jointly commission services for domestic violence that are evidenced based, joined up and managed to deliver significant improvements in outcomes.
- Work with Trading Standards to implement a new approach to tackling illicit tobacco that contributes to Public Health Outcomes.
- Work alongside Adult Social Care, Health & Public Protection to commission services to build community independence and reduce the impact of loneliness.
- Work with partners to agree strategies for tackling fuel poverty and seasonal mortality.
- Establish an evidence resource around health improvement benefits from all Public Health expenditure.

Tobacco Control

As part of the realignment of the Public Health Grant, £91,000 has been allocated to support Trading Standards to undertake targeted work on illegal and illicit tobacco. This funds two full time officers with associated costs to complete prosecutions.

The service started in April 2014, and has already carried out two operations in the county which have resulted in the seizure of tobacco products with a **street value of £46,162.**

Building on success

Over the years, Public Health has delivered significant improvements in health. It is important this success is acknowledged and built on, when attention on efficiency and value for money is paramount. Important actions for 2014-15 include:

Breast Feeding Peer Support

In response to low breast feeding levels in Nottinghamshire, Public Health has worked with CCGs to identify funding and to lead the commissioning of new breast feeding peer support programmes in the following CCG areas – Mansfield & Ashfield, Newark & Sherwood, Nottingham North & East and Nottingham West CCGs. Evidence indicates that peer support programmes are effective in increasing maintenance of breast feeding, which is important for health and wellbeing of both mother and baby. Early results in 2014 are positive.

- Work with Clinical Commissioning Groups and wider NHS colleagues to strengthen links with Public Health, building on previous achievements to influence NHS commissioning and promote preventive health services.

- Build on the early successes in the Integrated Commissioning Hub for children's services, to lead the joint approach to commissioning services for this age group.

- Maintain the skills and experience of our Public Health workforce to continue to lead the commissioning for outcomes and greater partnership working to achieve shared goals.

- Use the insight gained from the

Wellbeing at Work programme to develop Nottinghamshire County Council as an exemplary model for staff wellbeing and lead a countywide Workplace Health Scheme to improve health outcomes for employees.

Embedding Public Health leadership

The changes over the past year provide an opportunity for Public Health to extend its influence and build a sustainable approach, working with a wider range of partners and organisations and communities. Key actions for 2014-15 include:

- Use Public Health expertise to ensure multi-agency plans and services are in place to protect the health of the population from environmental, communicable and chemical threats.
- Lead the development the Joint Strategic Needs Assessment and Pharmaceutical Needs Assessment, to engage partners in identifying and building services to address the needs of local people.
- Publish the Director of Public Health annual report to highlight areas of public health that require particular focus and attention.

- Develop an Adolescent Public Health strategy to support investment in their futures and improving health and wellbeing outcomes for this group.
- Work within Council to embed Public Health principles into the commissioning and delivery of services, improving health improvement outcomes.
- Build new links with Local Authority to provide Public Health advice to spatial planning.
- Develop a programme to extend Public Health skills to the wider workforce.

Public Health Principles

Through the work of the JSNA, and completion of individual health needs assessments, Public Health has raised the profile of local need through the Health & Wellbeing Board. Specific examples include review of the Child & Adolescent Mental Health Services (CAHMS), Children & Young People's emotional and mental health, homelessness, domestic violence and dementia.

Procurement Plan

Review of all Public Health functions will continue in year. As a result of this work, a procurement plan is being developed to detail which services are to be re-commissioned.

Appendix One includes information for 2014-15. Procurement Intentions for 2015 onwards will be considered as part of Nottinghamshire County Council Budget consultation during the Autumn 2014.

Workforce and Training

The Public Health workforce have specialist training and experience to undertake intelligent commissioning of Public Health services, which improve health and wellbeing and reduce health inequalities across local communities. Workforce development is essential in maintaining these competencies, and assists staff to maintain professional registration for many members of the department.

The Public Health department also holds a training responsibility, in conjunction with the Public Health departments across Nottinghamshire, Derbyshire and Leicestershire Northamptonshire and Lincolnshire. This role includes the training and supervision of Public Health speciality registrars and Foundation Year Two doctors. These members of staff are not employed by the Councils but undertake a placement within the Public Health department.

A workforce development plan is under development to document the key education and training needs of the department and how these will be addressed.

Section Five: Resources

Department Structure

The Director of Public Health works across Nottinghamshire County and Nottingham City Councils to lead local health improvement. Collaborative working across Councils and partners is encouraged where possible to improve consistency, efficiency and quality in services.

Each Public Health policy is led through a nominated Public Health Consultant and supported by a small specialist team.

The Department business function, including contracting, Information, performance and administration, are lead through the Associate Director of Public Health. **Figure One** provides an overview of the Department structure.

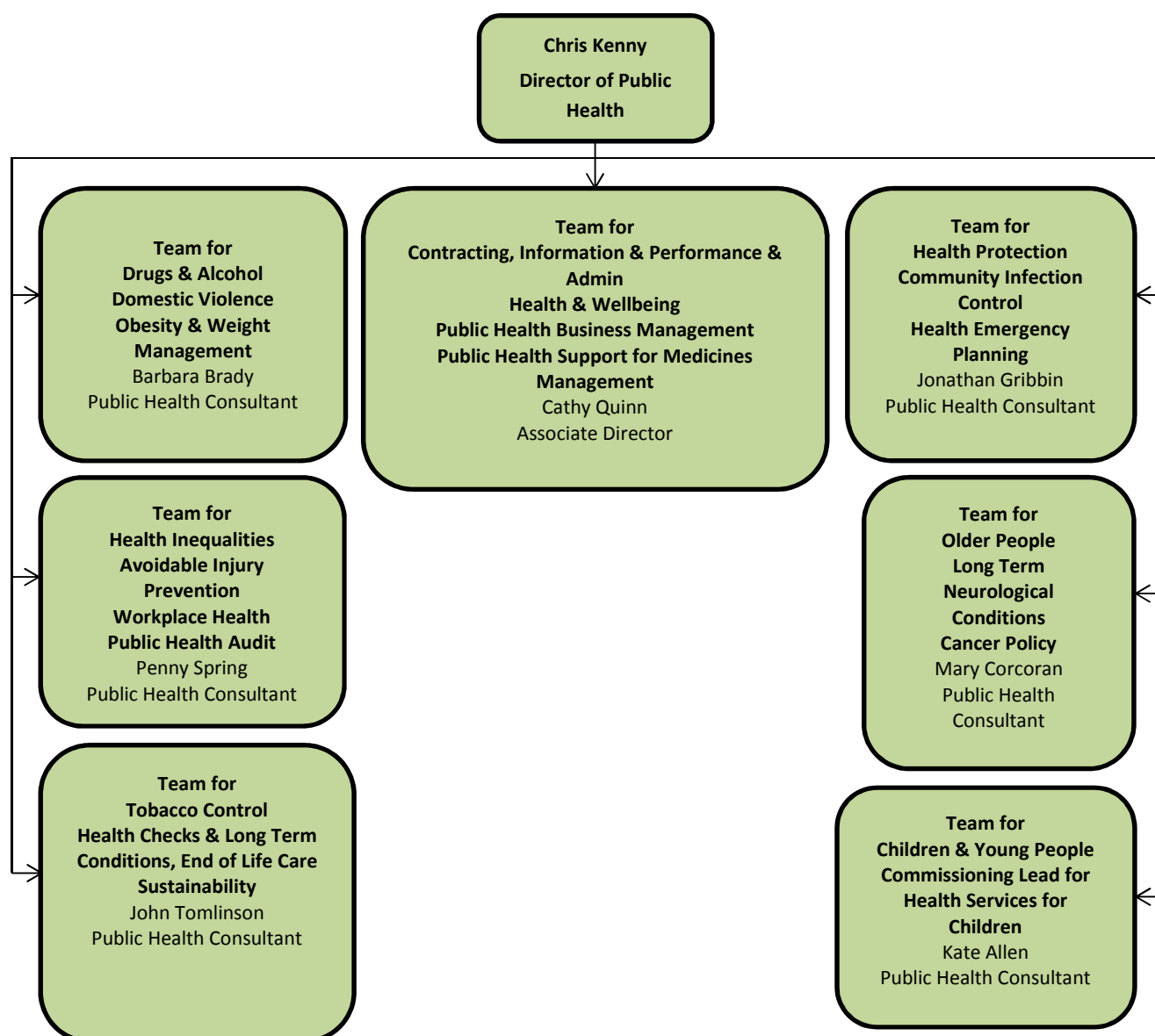


Figure One: Public Health Overview

Public Health Grant

NB: The following financial Information is subject to change pending agreement on final contract values for 2014/15.

Public Health Policy Area	Budget	Notes
<u>Directly Commissioned Services</u>		
Alcohol and drug misuse services	£11,056,840	<i>New contract value for 2014/15</i>
Children and young people Public Health services aged (5-19 years)	£3,035,368	<i>Excludes special school nursing</i>
Community safety and violence prevention	£106,211	<i>Excludes realigned grant</i>
Dental Public Health services	£135,204	
National child measurement programme	£69,830	
NHS Health Check assessments	£859,150	
Obesity & Healthy Weight	£1,157,264	<i>Includes Weight management, Nutrition and Physical Activity New contract value for 2014/15</i>
Sexual health services	£6,888,680	
Tobacco control and smoking cessation services	£2,727,663	
<u>Other Core Services</u>		
Public Health Corporate	£3,887,580	<i>Includes staff and general overhead & running costs</i>
Avoidable injury prevention	0	
Community Infection Prevention and Control	£119,623	
Environmental risks	0	
Health protection incidents, outbreaks and emergencies	0	<i>*Staff costs associated with function included in corporate costs</i>
Public Health Advice to the Clinical Commissioning Groups (CCGs)	0	<i>* Staff costs associated with function included in corporate costs</i>
Public Mental Health services	0	
Population level interventions to reduce and prevent birth defects	0	
Behavioural and lifestyle initiatives <ul style="list-style-type: none"> Stroke Prevention General Prevention 	£218,935	
Seasonal mortality	£15,000	
Social exclusion <ul style="list-style-type: none"> Loneliness Homelessness 	£17,884	
Workplace health	£7,000	
Public Health Contingency	£797,768	
Re-aligned Public Health Grant	£5,000,000	
<u>Total Public Health Grant</u>	<u>£36,100,000</u>	

Section Six: Action Planning and Managing Performance

Action Planning

Each programme area is developing an action plan to review services and identify opportunities to improve health and increase efficiency. These plans are live and will therefore be regularly updated.

Key supporting functions, such as the contract & performance, information & intelligence, and health & wellbeing board development are also developing service plans to describe key objectives in more detail.

The Director of Public Health and Senior Leadership Team will maintain oversight to monitor achievements, and address any risks and issues.

Public Health Outcomes

The Public Health Outcomes Framework, *Healthy lives, healthy people: Improving outcomes and supporting transparency*, was published by the Government in January 2012. It sets out a vision for public health, desired outcomes and the indicators that will help us demonstrate how well public health is being improved and protected. The framework concentrates on two high-level outcomes to be achieved across the public health system,

- Increased healthy life expectancy through focussing on the health quality of life as well as its length
- Reduced differences in life expectancy and healthy life expectancy between communities (through greater improvement in more disadvantaged communities)

The framework groups indicators into four 'domains' that cover the full spectrum of public health. The outcomes reflect a focus not only on how long people live, but on how well they live at all stages of life. Each domain is supported by a set of public health indicators which have been set out in the Public Health Indicator Set: Technical Specification (Department of Health, January 2012).

The Public Health Outcomes Framework provides an overview of all areas which is comprehensive but not easy to summarise. Information is contained in a regular performance report. Key areas of achievement and areas for further developments are summarised below:

Current Picture for Nottinghamshire

Nottinghamshire shows a mixed picture of health and a high degree of variation across the County.

In summary, Nottinghamshire has a better than average position for childhood obesity, breast and cervical cancer screening, successful completions of drug treatments and lower mortality from communicable diseases.

Within Nottinghamshire, however, there are several public health outcomes where further improvements are required. Healthy life expectancy at birth continues to be lower than the national average, and Chlamydia and Tuberculosis pose ongoing local communicable diseases concerns. Adult obesity and smoking at time of delivery require further lifestyle interventions and sickness absence from work is higher than average. Low breastfeeding rates, loneliness and fuel poverty are also highlighted for local attention.

A detailed analysis of the performance data is undertaken by the Public Health Information Team on a regular basis to ensure any changes are highlighted and any pressures and risks considered by the Senior Leadership Team.

Reporting

The department will monitor high level outcomes through the Public Health Outcomes Framework, reporting through the Health & Wellbeing Board and Public Health Committee, on a regular basis as part of the Public Health performance report.

Regular reports against delivery of the Business Plan will also be presented to the Public Health Committee.

In addition, commissioning support for the Clinical Commissioning Groups is detailed in the Memorandum of Understanding quarterly progress 'checkpoint' reports are produced detailing activity, issues and risks across the Public Health function.

Appendix One: Public Health Procurement Plan

	PH Consultant Lead	Consultation, Market Assessment and Development of Service Specification	Open Tender Period	Award of Tender	Mobilisation period	New Service Start Date
Public Health Services Under Active Re-commissioning in 2014-15						
Community Substance Misuse	Barbara Brady	June 2013-February 2014	Feb 2014 – 7 Apr 2014	June 2014	May to Sept 2014	1 October 2014
Obesity, Prevention and Weight Management Services	Barbara Brady	October 2013-February 2014	Feb 2014 – 7 Apr 2014	June 2014	May to Sept 2014	1 October 2014
Community Infection Prevention and Control	Jonathan Gribbin	TBC	TBC	TBC	January – March 2015	1 April 2015
Domestic Violence Services	Barbara Brady	Consultation Dec 2013 – Mar 14 Development of Service specification TBC	TBC	TBC	TBC	TBC

The outcomes of the Council Budget Consultation will inform the review and re-commissioning of the following Public Health in 2016-17

- Smoking Cessation
- Health Checks
- General Prevention Services
- Dental Public Health
- School Nursing
- Healthy Schools
- Sexual Health Services