

17 March 2016

Agenda Item: 6

REPORT OF THE DIRECTOR OF PUBLIC HEALTH

USE OF PUBLIC HEALTH GRANT 2016/17

Purpose of the Report

1. This report informs the Public Health Committee of:
 - a. the Public Health grant for 2016/17
 - b. the financial plan for use of this grant in 2016/17, with budgets for each policy area
 - c. the realignment of identified resources in 2016/17
 - d. use of Public Health reserves to support the above activities in 2016/17

Background

2. The County Council is responsible for ensuring the delivery of a range of Public Health services using Public Health grant, a ring-fenced grant provided for the specific purpose of improving the health and wellbeing of local populations (including restoring or protecting their health where appropriate) and reducing health inequalities. The ring fence is due to remain in place until 2018.

Information and Advice

3. In 2015/16 the Public Health grant for Nottinghamshire County Council was originally £36.1m but due to a national cut of £200m to the Public Health grant, announced in July 2015, was reduced by 6.2% (£2.6m) in-year. The reduction was accommodated from a combination of underspends on some public health contracts, expenditure control, non-recruitment to vacancies, and some use of reserves. Another adjustment was made in October as Nottinghamshire County Council took over the commissioning responsibilities for health visiting and family nursing, receiving an in-year additional grant of £5.8m (£11.8m full year effect, due to a small adjustment relating to Bassetlaw).
4. In planning for the 2016/17 budget, the Council made the following assumptions:
 - a. the in-year reduction of 6.2% would be made recurrent in 2016/17
 - b. the full year health visiting and family nursing allocation would be made recurrent
 - c. there would be a rebasing adjustment to remove that element of the Public Health grant which had previously been paid over to the CCG

These assumptions led the Council to plan for a budget which was £44.008m.

5. The Public Health grant allocations for 2016/17 were announced on 11 February 2016. The Public Health grant for Nottinghamshire was **£43.26m**, £0.748m less than anticipated.

The shortfall can be accommodated in 2016/17 using the Public Health reserves, but from 2017/18 onwards, additional savings will need to be identified.

- The grant announcement also included the Public Health grant allocations for 2017/18, showing a further 2.5% reduction, to £42,194,000. It is anticipated that there will be further reductions, based on the total notional allocations also published. Projections are set out in Table One below.

Table One: Public Health grant allocations forecasts

Year	Public Health Grant allocation	Reduction on previous year
2016/17	£43,260,000	£748,000
2017/18	£42,194,000	£1,066,000
2018/19	£41,096,965*	£1,097,044
2019/20	£40,028,435*	£1,068,521
	Cumulative reduction	£ 3,980,198

Note: * denotes notional allocations. These may not be ring fenced.

- A partner-based, officer working group will now be set up to consider budget reduction options. It is anticipated that options identified by this group will form part of the Council's overall budget setting process for 2017/18.

Public Health Finance Plan 2016/17

- Table Two below sets out the agreed budgets for each policy area during 2016/17. These budgets were developed in line with the Council's assumptions set out above, and include the reductions which were agreed by the Council as part of its budget setting process to accommodate the anticipated £3m reduction in Public Health grant.
- The Finance Plan now includes a movement of reserves in order to offset the additional £0.748m reduction in Public Health grant in 2016/17.

Table Two: Summary Finance Plan 2016/17

Commissioned Services	Budget 2016/17 £
Children's 0-5	10,824,080
Children's school aged	3,269,466
Dental PH	183,366
Domestic Violence and Abuse	1,007,438
Healthy ageing	194,935
Health at work	7,000
NHS health checks	859,150
Infection control	81,500
Mental health	
Obesity and weight management	1,430,776
Seasonal death reduction initiatives	15,000

Sexual health	6,160,020
Tobacco control	2,342,055
Social exclusion	17,884
Substance misuse inc CYP substance misuse	9,425,748
Realignment to other services	5,266,000
Sub-total – commissioned services	41,084,418
PH Corporate	Budget 2016/17 £
Health and Wellbeing Board	20,000
Staffing costs	2,387,580
Overheads and other costs	516,635
Sub-total - PH corporate	2,942,215
TOTAL	44,008,633
Public Health grant allocation	43,260,000
(Movement of reserves)	(748,633)

10. Full Council approved the revenue budget for Public Health as part of approving the Council budget in February 2016. The Public Health Committee is asked to note the Public Health finance plan for 2016/17.

Public Health Grant Realignment 2016/17

11. Since 2014, as part of integrating the Public Health function within the authority, the Council has used Public Health grant to support Council services which contribute to the delivery of Public Health outcomes. This process is known as realignment. £5m from the Public Health grant was realigned in 2014/15 and £9m – including £4m from reserves – in 2015/16. Realignment included both movement of funds from Public Health to other Departments and movement of activities from elsewhere in the Council to Public Health (e.g. combating substance misuse and domestic violence). This latter category of realignment is included in the above Finance Plan under Commissioned Services. This is the reason why the amount shown in the Finance Plan for Realignment to other services is different to the total sum of the activities being supported through Realignment shown in Annex 1.

12. Reduction in the resources for realignment in 2016/17 was one of the budget reduction proposals approved by full Council in February 2016. £1.65m was removed from the realignment budget, but in line with results of budget consultation, it was agreed to use £850K from Public Health reserves in 2016/17 to taper the impact of the reductions. The full list of realignment projects for 2016/17, including use of reserves, is set out in Annex 1.

13. From 2016/17, the realigned activities will be monitored in the same way as other Public Health activities and the results incorporated into the Quarterly Performance and Quality Reports to Public Health Committee. This will ensure that the Council continues to fulfil its responsibility to ensure that Public Health grant is used for the purposes for which it was provided, and that the Council, and local residents, continue to receive maximum benefit from the allocated grant.

Use of Public Health Reserves

14. Public Health has a general reserve of carried forward unused Public Health grant from previous years, along with a transition reserve, which contained funds to support additional costs associated with the transfer of Public Health into the County Council.
15. As set out in the information provided above, it is proposed to utilise an additional £1.6m of Public Health reserves in 2016/17 to support the budget (see paragraphs 5 and 12 above). Reserves will also be used to meet staffing costs previously approved by Public Health Committee, offset additional costs for some services affected by re-procurement delays and provide cover for identified cost risks. The reserves are planned to be fully utilised by end March 2018.
16. Public Health also has some Section 256 reserves, which are funds provided for specific purposes. These are for particular activities related to substance misuse and children's public health and will be allocated accordingly.

Other Options Considered

17. This report has been brought for information. No other options are required.

Reason for Recommendation

18. The PH Committee is responsible for ensuring that the PH Grant is used most effectively to improve the public's health, and for the purposes intended as directed by Public Health England.

Statutory and Policy Implications

19. This report has been compiled after consideration of implications in respect of crime and disorder, finance, human resources, human rights, the NHS Constitution (Public Health only), the public sector equality duty, safeguarding of children and vulnerable adults, service users, sustainability and the environment and ways of working and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

20. The financial implications are set out in the report.

RECOMMENDATION

The Public Health Committee is asked to:

- 1) Note the Public Health grant allocation for 2016/17
- 2) Note the 2016/17 PH finance plan
- 3) Note the use of resources for realignment in 2016/17
- 4) Note the use of reserves to support the Finance Plan and realignment of resources in 2016/17

- 5) Receive a further report on budget reductions proposals from 2017/18 onwards in due course

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Constitutional Comments (CEH 29/02/2016)

21. The report is for noting purposes only

Financial Comments (KS 29/02/2016)

22. The financial implications are contained within paragraph 20 of the report. The information specific to the 16/17 budget is contained within paragraphs 8-10 of the report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Department of Health, Local authority circular - public health grant and conditions LAC(DH)(2016), 11 February 2016, <https://www.gov.uk/government/publications/public-health-grants-to-local-authorities-2016-to-2017>

Department of Health, Local authority allocations and allocations per head 2016 to 2017, 11 February 2016, <https://www.gov.uk/government/publications/public-health-grants-to-local-authorities-2016-to-2017>

Report to Full Council, 25 February 2016, Annual Budget 2016/17

Electoral Divisions and Members Affected

- All

Appendix A: Public health grant realignment 2016/17

Title	Service aims and activities	Public Health Outcomes	Realignment 2015/16 £	Proposed realignment 2016/17 £	Department transferred to / Notes
Domestic Violence	Centralisation and coordination of domestic violence services across the Council.	Reduce domestic abuse	£1,034,000	£1,034,000	Transferred into Public Health from PPCS
Illicit Tobacco	Regulating the legal and tackling the illicit tobacco trade to reduce smoking prevalence, through dedicated Trading Standards support.	Reduce smoking prevalence.	£91,000	£91,000	ASCHPP (Trading Standards)
Substance misuse services, including young people's substance misuse	Residential rehabilitation and supporting people accommodation, early intervention and diversion programmes, including services for young offenders (under 18).	Reduce alcohol-related admissions to hospital; reduce re-offending levels - percentage of offenders who re-offend, average number of re-offences per offender	£468,000	£48,000	Transferred into Public Health from ASCHPP and CFCS. Most activities have now been subsumed within substance misuse contract. £48,000 from PH reserves in 2016/17
Handy Person's Adaptation Scheme	Service to provide adaptations to help older people remain in their own homes, such as hand rails, insulation/heating and key safes.	Reduce falls and injuries among older people; improve perceptions of safety in own home	£95,000	£87,850	ASCHPP
Older People's early intervention and prevention service	Community involvement schemes to support people to retain independence, including community outreach work with individuals.	Improve health-related quality of life for older people ; improve social connectedness and self-reported wellbeing	£164,000	£152,130	ASCHPP
Building Community Resources to Support People	Small scale pilot activities to combat loneliness among older people, such as volunteering schemes, peer support and help with accessing services.	Improve social connectedness; self-reported wellbeing.	£200,000	£50,000	Transferred into Public Health from ASCHPP

Information Prescriptions	Information service focused on health conditions, providing accredited local health and social care information for patients, carers and professionals to enable people to manage their conditions better. The information is available electronically or on paper.	Improve health-related quality of life for older people.	£28,000	£25,816	ASCHPP
Stroke	Service to stroke survivors and their carers provided by the Stroke Association giving information advice and support.	Prevent readmissions to hospital after stroke.	£13,000	£11,986	ASCHPP
Mental Health Co-production	Social workers and support workers provide a personalised approach to meet the individual recovery outcomes for all spectrums of mental health problems.	Improve social connectedness; self-reported wellbeing; reduce risk of suicide; prevent hospital admissions; increase employment rate for people with long term health problems.	£206,000	£206,000	ASCHPP £67,716 from PH reserves in 2016/17
Supporting People	Support workers working from hostels and supported housing for adults who are/have recently been homeless and in crisis, many of whom have mental health &/or substance misuse issues.	Reduce substance misuse, address fuel poverty, prevent homelessness, reduce winter deaths, reduce risk of suicide and prevent hospital admissions.	£1,000,000	£1,000,000	ASCHPP £78,000 from PH reserves in 2016/17

Moving Forward service	The service provides personal support covering housing, social inclusion, crisis and employment, targeted at people with mental health problems, with the aim of helping them continue to live independently.	Reduce social isolation and risk of suicide; increase employment for people with long term health problems.	-	£800,000	ASCHPP £270,866 from PH reserves in 2016/17
Supported Accommodation for Young People & homelessness	Support workers help vulnerable young people to develop life skills to help them access services, education and employment. Vulnerable factors include homelessness, learning disability, offenders, young parents, substance users, & those with poor mental/ emotional health. Service provided within supported accommodation to reach people at highest need.	Prevent homelessness; reduce number of 16-18 year olds not in education employment or training.	£460,000	£424,120	CFCS
Children's Centres	Children's centre provision focuses on improving a range of outcomes for parents/carers and children. The work is delivered in a range of locations across Nottinghamshire	Improve birth weight of term babies; reduce smoking prevalence at time of delivery; increase breastfeeding initiation and prevalence; improve population vaccination coverage; reduce under 18 conceptions; improve school readiness; reduce excess weight in 4-5 year olds, reduce tooth decay in children age 5; reduce hospital admissions caused by unintentional and deliberate injuries in children age 0-4.	£3,490,000	£2,490,000	CFCS 2015/16 included £1m of non-recurrent Public Health grant. £194,220 from PH reserves in 2016/17

Family Nurse Partnership	Evidence-based programme to improve outcomes for pregnant teenagers, teenage parents and their children, through an intensive home-based visiting programme for first time vulnerable teenage mothers.	Improve infant mortality, improve birth weight of term babies, reduce smoking prevalence at time of delivery, increase breastfeeding initiation and prevalence; reduce under 18 conceptions; improve school readiness.	£100,000	£92,220	Transferred in to Public Health from CFCS.
Youth Offending Team and Youth Justice	Preventative case management and psycho-social interventions provided through Youth Offending Teams to children aged 8-17 with early signs of violent and antisocial behaviour	Reduce pupil absence; reduce first time entrants to the youth justice system; reduce violent crime (including sexual violence), reduce re-offending levels; reduce rate of complaints about noise	£380,000	£380,000	CFCS £190,000 from PH reserves in 2016/17
Young Carers	Support workers provide information and advice to support young carers of a disabled parent. This helps promote educational, psychological social and emotional development. Service is complementary to delivery of Personal Budgets.	Reduce social isolation; improve self-reported wellbeing; reduce number of children in poverty.	£340,000	£182,200	CFCS £92,200 ASCHPP £90,000
Young People's Sexual Health	Dedicated out of hours C-Card scheme delivered in young people's venues and targeted at young people. Sexual health is a statutory PH responsibility.	Reduce under 18 conceptions; improve chlamydia screening detection rate (15-24 year olds)	£80,000	£73,760	CFCS
Total			£9,000,000 (£1,000,000 non recurrent)	£7,148,802 (of which £848,802 from reserves)	