

Joint Public Health Board

**Bournemouth, Poole and Dorset councils
working together to improve and protect health**

Date of Meeting	24 September 2018
Officer	Acting Director of Public Health
Subject of Report	Public Health Dorset Business Plan 2018/19 – monitoring delivery
Executive Summary	<p>The Board received the Public Health Dorset Business Plan for 2018/19 at its June meeting. This sets out the main deliverables for the team in the coming year. Members endorsed the approach to the business plan and deliverables, but commented that they would find a monitoring report helpful. This report introduces the monitoring report that we proposed to use, in order to assess progress against the plan.</p> <p>The report also highlights national work underway to provide more publicly available information resources that can be used to compare local authority public health delivery.</p>
Impact Assessment:	<p>Equalities Impact Assessment: A separate equality impact assessment is not carried out for the business plan. However, where activity in the business plan affects service delivery, such as via commissioning and contracting decisions, equalities impact assessments are carried out in line with policy.</p>
	<p>Use of Evidence: The business plan is a summary of the Public Health team's planned activity for 2018/19. A range of evidence is used to inform how we plan to work, including national guidance and standards for delivery of public health services.</p>
	<p>Budget: The Business Plan identifies how we will spend the 2018/19 budget of £28.6m. When used alongside national benchmarking and performance information, it provides a more complete picture of whether local commissioning and provision of public health services is providing value and improving outcomes.</p>

	<p>Risk Assessment: Having considered the risks associated with this Business Plan using the County Council's approved risk management methodology, the level of risk has been identified as:</p> <p>Current Risk: LOW Residual Risk LOW</p> <p>As in all authorities, performance continues to be monitored against a backdrop of reducing funding and continuing austerity.</p> <p>Other Implications: None.</p>
Recommendation	The Board is asked to support the proposed approach to monitoring delivery of the Business Plan for 2018/19.
Reason for Recommendation	Close monitoring of the commissioned programmes is essential requirement to ensure that services and resources are compliant used efficiently and effectively.
Appendices	PHD Business Plan monitoring report, 2018/19.
Background Papers	Various including current Prevention at Scale Plans, commissioning and project plans associated with the delivery of team business,
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1. Background

- 1.1 The Joint Public Health Board exists to provide oversight, assurance and governance around the effectiveness of the delivery of the public health function for the Upper Tier authorities of Dorset, Bournemouth and Poole.
- 1.2 An important part of this role is understanding how the Public Health Grant allocation is used to commission effective public health services, and whether those services are providing value for money, when judged against local priorities for improvement in health and wellbeing and reducing inequalities in health.
- 1.3 Nationally, the direction of travel is for increasing transparency and accountability for the effectiveness of local authority public health delivery. Partly this is in response to questions over how the ring-fenced Public Health Grant has been used in some authorities, not least Northamptonshire, which has had severe financial challenges. There is also interest in increasing understanding of how the Grant is being used, and the effectiveness of local authority public health delivery, as part of preparations for considering removing the ringfence beyond 2020.
- 1.4 Earlier this year Public Health England wrote to all Local Authority chief executives to formally launch a new publicly available tool, Healthier Lives. This has been developed to increase the transparency of local authority public health data. It allows for a number of public health measures to be compared across local authorities within the CIPFA nearest neighbour group, producing a summary ranking. The domains for which data is available are: Childhood Obesity, Air Quality, Drugs and Alcohol treatment, Best start in Life, NHS Health Checks, tobacco control, and sexual and reproductive health. The tool can be accessed at <https://healthierlives.phe.org.uk/>.
- 1.5 Public Health Dorset has produced a business plan for the past three years, with the aim of increasing visibility of commissioning and service provision plans. For this financial year, we have developed the plan further, recognising that the way in which we are delivering additional work under the Prevention at Scale plans would benefit from clearer milestones and deliverables, particularly to increase partner understanding in the Joint Public Health Board and beyond.
- 1.6 At the June Board Members had a chance to look at the business plan in detail. While broadly supportive, Members did comment that it would be helpful to see a clearer delivery plan to enable monitoring of delivery. Appendix 1 sets out our proposed approach to monitoring the delivery of the business plan. Members are invited to comment on the format.

2. Current position

- 2.1 The monitoring plan shows that most deliverables are on track to achieve their milestones in 2018/19. The approach to RAG rating has been to consider progress in delivery, not effectiveness or outcomes. There are three areas currently red rated. This includes the NHS Health Checks programme, because of the degree of drop off in delivery of invitations and checks, and the current continuing risk around not being able to invite people to the programme. See the full Health Checks paper on the Agenda for further discussion of this. Engagement of people with drug and alcohol issues with treatment services is also red rated currently – this is an area where several measures around access to treatment and drug related deaths are judged to be poor when compared with similar authorities. The recent data on drug related deaths for two areas covered by Public Health Dorset is also a concern (Weymouth

and Portland, and Bournemouth). The third area is the Escape Pain project, which has now been revised and will be taken forward working closely with musculo-skeletal services as part of routine care. It has taken considerable time to gain agreement on this approach, working with acute sector colleagues.

3. Next steps

- 3.1 This summary paper and the associated monitoring report is focusing on progress against deliverables, rather than outcomes. However, we are committed to sharing with the Board more information on outcomes for our major commissioned programmes to improve transparency and accountability. The paper on this month's agenda on clinical treatment services is the first of these, and will be followed in future meetings by a focus on health improvement services, and public health nursing.

4. Recommendations

- 4.1 The Board is invited to comment on and endorse the proposed approach to monitoring delivery of the Business Plan for 2018/19.
- 4.2 In addition, Board members are asked to consider whether a future session running through the measures on the Healthier Lives would be helpful.

Sam Crowe
Acting Director of Public Health
24 September