

Business plan monitoring report

Date of Meeting: 25 November 2019

Portfolio Holder: Cllr Laura Miller, Lead Member for Adult Social Care and Health, Dorset Council
Cllr Lesley Dedman, Lead Member for Adult Social Care and Health, BCP Council

Director: Sam Crowe, Director of Public Health

Executive Summary:

This report provides a quarterly summary of progress in delivering the agreed outputs from the Public Health Dorset business plan for 2019/20. The approach to monitoring delivery is to RAG rate progress against project milestones, with a simple narrative update. A separate report on performance with major commissioned services provides more detailed performance information on a twice-yearly basis.

Equalities Impact Assessment:

EQIA assessments form part of commissioning for all public health services and are published in accordance with Dorset Council guidance.

Budget:

Services and projects considered within this paper are provided from the overall Public Health Dorset budget of £27.7M. The new Children and Young Persons Public Health Service contract contains elements that are outcome-based. This is being agreed in detail with the provider and will be reported on more fully in the next 6-monthly performance report.

Risk Assessment:

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: LOW

Residual Risk LOW

Climate implications:

No direct implications. However, some of the public health interventions and projects within the business plan will positively reduce carbon emissions at individual and organisation level if implemented at scale, particularly active travel.

Other Implications:

N/A

Recommendations:

The Joint Public Health Board is asked to consider the information in this report and note the overall progress on our major projects and deliverables for 2019/20. The Board is asked to note the deteriorating position in the substance misuse prescribing service provided by AWP affecting the BCP Council area. Board members are asked to support the following recommendations:

- i) Give delegated authority to the Director of Public Health in consultation with the chair and vice-chair to agree a mitigation plan, and additional resource for the service via a contract extension;
- ii) Include in future business plan monitoring reports a summary of the main public health services commissioned from NHS England under Section 7A of the Health and Social Care Act (mainly screening and immunisation programmes).

Reason for Recommendation:

Close monitoring of the delivery of projects in the business plan is important to enable both Councils and the Integrated Care System achieve Prevention at Scale ambitions in the local health and care system. It also assures the Board that spend through the ring-fenced Public Health Grant is effective and efficient, and complies with the national Grant criteria.

Appendices:

Appendix A: Business plan monitoring report

Background Papers:

None

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Appendix One

1 Introduction

- 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 Dorset and BCP Councils.
- 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, and equitable delivery for our populations.
- 1.3 This monitoring report sets out a summary of progress against the Public Health Dorset business plan for 2019/20. The plan includes commissioned service deliverables, as well as a number of projects being delivered as part of the Dorset ICS Prevention at Scale plans.

2 Current position

- 2.1 The monitoring report (Appendix A) shows that midway through the financial year most projects are on track for delivery this year. However, there are two service areas experiencing ongoing challenges with delivery. The first is the NHS Health Checks programme, which is the subject of a separate deep dive report (see separate agenda item).
- 2.2 The second area is a new risk around the delivery of effective substance misuse prescribing services to clients in the BCP Council area. This is due in part to staffing shortages following a restructure in the provider. However, the service in BCP Council is also engaging many more people in treatment compared with two years ago (from around 600 to around 900 people). This is putting additional strain on the service, particularly the need to ensure regular and ongoing review while in treatment.

- 2.3 A mitigation plan is being developed with the provider to ensure adequate capacity within the service. The service may need additional resources above the contract value in order to provide a safe, effective and sustainable service. This is being worked through and will be formally negotiated as part of a contract variation when finalised. Board members should note that the contract value for this service has reduced significantly during the past three years (circa £0.9M), in line with the nationally imposed reductions to the public health Grant.
- 2.4 There is also a requirement for the Director of Public Health to provide assurance over the delivery and effectiveness of public health services commissioned by NHS England – known as Section 7A services. These include the major cancer screening programmes, and immunisation programmes offered to the local population.
- 2.5 Previously the Joint Public Health Board has not been sighted on this assurance process, as it is carried out via the local Health Protection Network. Following the recommendations of the task and finish group on the future model for public health, it is proposed to begin capturing the main assurance issues in future business plans, for monitoring by this board.
- 2.6 The public health support to these programmes is delivered by Public Health England colleagues who work across the region. Currently they have highlighted the following issues with local screening programmes:
- Dorset Breast Screening Service – 2 serious incidents and 2 screening safety incidents have been identified. A PHE consultant Julie Yates is leading the serious incident management meetings on these. Pathology errors and trust processes appear to be the common factor;
 - Dorset Cervical Screening – concerns with staffing issues at Dorset County Hospital are affecting colposcopy referral times. This may be exacerbated with the planned change to HPV screening, which takes effect on 25th November as it could lead to a further increase in colposcopy referrals. Concerns over how this department are going to meet this demand. Poole lab will cease processing new cytology samples for the cervical screening programme on 25 November.
 - Dorset Bowel Screening – some endoscopy clinics have been cancelled due to staffing issues. However, the service has a recovery plan in place and are working with PHE to ensure a return to usual waiting times.

3 Conclusion and recommendations

- 3.1 This monitoring report shows that Public Health Dorset is making good progress in delivering against its business plan in this financial year.
- 3.2 Board members are asked to note the progress, and to support the following recommendations:

- iii) Note the risks around the substance misuse prescribing service in the BCP Council area, and to support giving delegated authority to the Director of Public Health in consultation with the chair and vice-chair to agree a mitigation plan, and additional resource for the service via a contract extension;
- iv) Include in future business plan monitoring reports a summary of the main public health services commissioned from NHS England under Section 7A of the Health and Social Care Act (mainly screening and immunisation programmes).

Sam Crowe
Director of Public Health
25th November 2019