



# Joint Public Health Board Prevention at Scale stocktake 16 February 2022

# For Recommendation to Council

Portfolio Holder: Cllr P Wharf, Adult Social Care and Health, Dorset Council

Cllr M Iyengar, Tourism and Active Health, Bournemouth,

Christchurch and Poole (BCP) Council

Local Councillor(s): All

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Report Status: Public

**Recommendation**: The Joint Public Health Board is asked to:

- note progress on our Prevention at Scale portfolio
- agree a continued focus on prevention; and
- consider a refreshed approach in how the shared service take this forward to feed into the Public Health Dorset 2022/23 business plan.

#### Reason for Recommendation:

Prevention at Scale was one of three key portfolios in Our Dorset Sustainability and Transformation Plan. It is now timely to review progress. There is also a recognition that a different approach may be needed as the ICS develops that fits with the national vision and operating model for ICSs.

# 1. Executive Summary

Prevention at Scale aimed at building prevention approaches into everyday contacts in our local health and care system. Work included transformation projects and influencing work under four programmes of Starting Well, Living Well, Ageing Well and Heathy Places.

The Dorset system now has a much broader recognition and ownership of prevention with good progress in many areas, summarised in Appendix 1.

Reviewing each of the four programme areas, the progress we have made locally, national priorities and local intelligence work in each area needs to continue but not in the same way as at present, with some parts moving to other programme areas, and some remaining as separate programmes of work.

This review will feed into our Public Health Dorset business planning for 2022/23.

# 2. Financial Implications

Some work under the Prevention at Scale portfolio is now part of Public Health Dorset's business as usual and covered by the shared service budget. Non-recurrent funds to pump-prime projects came for the most part from underspend in Public Health Dorset, with £1M funding committed from the ring-fenced reserve in November 2016, and £308k from Dorset County Council public heath ring-fenced reserve in June 2018. The shared service public health ring-fenced reserve still has £443k committed for prevention programmes.

There was also £150k Dorset CCG transformation funding and funding from Dorset bids to Sport England and the Transforming Cities Fund.

The NHS has some specific funding to support prevention priorities allocated as part of the NHS Long Term Plan, and the Spending Review 2021 signalled several funding streams with a prevention focus which may come down through the NHS, public health or a combination of the two. Discussion is ongoing about how these are managed through the system.

#### 3. Climate implications

N/A

# 4. Other Implications

N/A

#### 5. Risk Assessment

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

Current Risk: LOW Residual Risk: LOW

#### 6. Equalities Impact Assessment

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

# 7. Appendices

Appendix 1 Prevention at Scale stocktake September 2021.

## 8. Background Papers

Our Dorset Sustainability and Transformation Plan

### 1 Update

- 1.1 Prevention at Scale (PAS) was one of the key portfolios set out in Our Dorset Sustainability and Transformation Plan (STP). It set out an ambitious programme of transformation work aimed at building prevention approaches into everyday contacts in our local health and care system. Work included a broad range of projects as well as influencing work across the system and was considered under four programmes of Starting Well, Living Well, Ageing Well and Heathy Places.
- 1.2 Our Dorset STP addressed the challenge of rising demands and population need for health and care services and recognised that prevention was a key strand to managing this increased demand in a sustainable way, as diet, lack of physical activity, excess weight, alcohol and smoking all contribute to the burden of preventable disease and disability. Although public health services were in place to support people to make lifestyle changes reach into the population was limited. Prevention at Scale therefore set out to build the capacity of all health and care partners to support their staff and how they engage more people to improve their health and wellbeing and reduce their risks of longer-term conditions and need for health or social care.
- 1.3 The Public Health Dorset role in the portfolio was to:
  - develop a strategic narrative that all partners could engage with to understand their role in prevention
  - report into the two health and wellbeing boards and the system leadership team on progress (paused during COVID)
  - identify and scope opportunities to put behaviour change support alongside standard health and care pathways including through digital approaches

- help organisations build scale and reach into their approaches through training and development of the workforce
- work with partners to secure external funding and or support for large scale demonstrators aimed at building physical activity into everyday lives, from children and young people to working age adults and older people.
- 1.4 A key success of PAS has been a much broader recognition and ownership of prevention, although this can still be a challenge in some areas. Appendix 1 provides a stocktake, completed in September 2021, of the different projects and programmes of work across the breadth of the portfolio.
- 1.5 The Starting Well programme has continued to evolve. There are overlaps with the two councils' Children's Plans, and with the NHS Better Births work. Key narratives are now Best Start in Life and the First 1,000 days of life, and future narrative may be better aligned with these. The Public Health Dorset role in the future is proposed as:
  - continuing to be part of strategic discussions, ensuring prevention remains a focus within the developing narratives and transformation work for children and young people as a system
  - further development of the children and young people's public health service that we commission.
- 1.6 The Living Well programme had a focus on the LiveWell Dorset service which was brought inhouse 1 April 2018. The service supports residents across Dorset to make heathy lifestyle changes, providing greater support to those who may otherwise be less likely to engage. Public Health Dorset will continue to look for continued improvements and developments as part of the service plan.
- 1.7 The Living Well programme also had a focus on workforce development and workforce health. Public Health Dorset will continue to provide delivery of training through LiveWell Dorset, and can connect in other training opportunities, such as suicide prevention training or mental health first aid. However, each organisation recognises their own responsibility, and good system links have been made with the establishment of a system Health and Wellbeing group to share good practice and co-ordinate joint work.

- 1.8 Our Ageing Well programme encouraged health and care services to look at opportunities within their pathways where prevention could be built in systematically, including connection to LiveWell Dorset. More recently the NHS Long Term Plan has set out key commitments for the NHS to play their part in prevention, and during the COVID-19 pandemic poorer outcomes from COVID for people with conditions such as diabetes, cardiovascular disease and obesity, have increased the focus in some of these areas. Several funding streams identified by Spending Review 21 will support continued work in this area, although exact detail is not yet clear. Delivery will be through NHS providers. Depending on financial flows, the role for Public Health Dorset may be to build on the population health management work that uses data and intelligence more effectively to target action.
- 1.9 Local authority services also need to think about how they connect their clients to prevention opportunities. Action on Smoking and Health estimate a significant financial impact for local authorities from smoking related issues, with estimates of the impact for 2021 in BCP and Dorset councils at £7.8M and £8.7M, respectively. Public Health Dorset will continue to work with both councils to increase awareness of this issue and how best to expand and build on the work to date.
- 1.10 Our Healthy Places programme focused on access to green space and infrastructure that would enable physical activity. We worked with local authority place directorates and other partners to secure external funding for a number of ongoing programmes, and this programme of work needs to continue.
- 1.11 Prevention clearly remains an overarching objective for Public Health Dorset. Reviewing these programmes and refocusing work as part of our business plan development will help us ensure the public health capacity is not duplicated or overlapping and we can maximise our capacity to support this work.
- 1.12 There will continue to be a need to understand how this review will feed into our Public Health Dorset business planning for 2022/23 including the local governance and assurance routes where these are currently changing, for example within the ICS.