

# Directors update: Joint Public Health Board

09 November 2022



# National reforms and policy

- Last November we reviewed a number of national policy changes including establishing Integrated Care Systems, Levelling up, and the new Office for Health Improvement and Disparities

*Since then ...*

- ICS went live 1 July – locally we are leading development of the strategy
- Levelling up – unclear future due to change (s) in PM – awaiting Nov 17 budget statement to see impact on public services of budget gap
- OHID – expected policy on health disparities not now expected. Local work on health inequalities continues via ICS
- Big focus in ICS on secondary prevention rather than primary prevention – health and social care levy repealed ‘but funding will stay at same level’
- National drug strategy *From Harm to Hope* December 2021 – new partnerships to oversee delivery against new funding



# Our organisation: update

- Last November the team was coming out of COVID work into a changing system. We needed to develop a new business plan, and understand where to focus our efforts.
- We committed to agreeing the business plan, and developing processes for allocating capacity:

May	Business plan agreed with JPHB
July	Programmes agreed and capacity identified
October	Re-prioritising based on current pressures
November	Monitoring approach – shared with Board today

- Recent major changes – COVID work continues to decline, ICS changes taking up more of team's time. ICS strategy, drugs and alcohol, healthy child programme, mental health and inequalities all in the top 5 currently



# Health improvement

- Re-establishing a strong NHS Health Check programme – options paper to be considered today
- Drug and alcohol services – decision required by Cabinet on retendering the service provider in the Dorset Council area
- Live Well Dorset – continuing the work supporting outpatient assessment centres – additional funding secured for South Walks House to expand operations
- Smoking cessation – significant progress with stop smoking services in our local acute hospitals
  - University hospitals Dorset – screened 27,000 people admitted, with 8.3% overall actively smoking. Of these, 1,675 have accepted treatment to quit smoking – 68%



# Health protection

- COVID infections falling again but notifications of influenza starting
- National modelling suggests second winter peak in January
- No variants of concern currently – most current infections are omicron BA.4 and BA.5
- Vaccination with autumn booster picking up pace – 47% of eligible groups have received their autumn booster as of beginning of November
- Work ongoing to understand the gaps in building a strong system approach to health protection – not just public health responsibility



# Healthcare public health

- ICS strategy is the largest current piece of programme work
- Due to be finalised December 2022
- Will inform the ICB Forward Plan
- Support for population health management and inequalities, as well as general public health support to be set out in a memorandum of understanding
- Agree how much capacity we are putting into the NHS, and also ensure this is on areas linked with the ICP strategy
  - Falls prevention, cardiovascular disease prevention, children's emotional health and wellbeing, JSNA programme of work



# Local progress with ICS changes

National reform objective	Local progress
All 42 systems in England will become ICS entities from April 2022	ICS formally went live 1 July – new ICB took over from clinical commissioning group
Integrated Care Partnership – drives strategy – Councils as equal partners	ICP held its first meeting in September 2022 – DPH leading development of strategy, due 19/12
Integrated care board – with new chief executive – NHS plans	ICB in place with entirely new executive team – strong support for work to be guided by strategy
Collaboration across population within ICS footprint – 2 ‘places’ within this in Dorset system based around Dorset and BCP Councils	Places formally established but next steps unclear; Health and Wellbeing Boards have both agreed to have strategic oversight in each place
Population health management used to drive improvements in outcomes, tackle inequalities	Public health supporting healthcare MoU to continue to support these agendas

