

**HEALTH OVERVIEW AND SCRUTINY COMMITTEE – 21 JANUARY 2015****MEDIUM TERM FINANCIAL STRATEGY 2015/16 – 2018/19****MINUTE EXTRACT**

The Committee considered a report of the Director of Public Health and Director of Corporate Resources which provided information on the proposed 2015/16 to 2018/19 Medium Term Financial Strategy (MTFS) as it related to the Public Health Department. A copy of the report marked 'Agenda Item 8' is filed with these minutes.

The Chairman welcomed Mr E F White CC, Cabinet Lead Member for Health, to the meeting for this item.

In introducing the report, the Director of Public Health and Cabinet Lead Member confirmed that the Department would be funded from the ring fenced Department of Health Grant for 2015/16. It was intended to create 'headroom' in the Department's budget to enable the Public Health Department to support other County Council preventative services.

The Cabinet Lead Member emphasised the important role of the Public Health Department in ensuring that prevention and other public health matters were considered when decisions were being taken across Council services. He felt that the Public Health Department had had a positive impact on decisions taken by other departments.

Arising from discussion the following points were raised:-

**Revenue Budget**

- (i) The ring fenced public health grant could be spent on statutory services such as health checks, non-mandatory services such as physical activity and smoking cessation and other areas of health improvement.
- (ii) Clarification was sought regarding the role of the Public Health Department in funding minor ailment schemes, such as the one launched by West Leicestershire Clinical Commissioning Group earlier in the week. The Director confirmed that one of the roles of the Public Health Department was to give advice about health improvement to vulnerable people. Although the Public Health Grant would not be used to fund services such as the minor ailment service, the Director would welcome the opportunity to provide a joined up service with the Clinical Commissioning Group.

- (iii) It was noted that there was significant interest nationally in how the public health grant was spent. It would be important to ensure that the funding was spent on health improvement and that the County Council had a robust case for funding decisions.

### Savings

- (iv) The Public Health Department would continue to identify efficiency savings when recommissioning services. There would be opportunities for service redesign in the areas of substance misuse, smoking cessation and sexual health during the next two years. The Committee was pleased to note that the Department had a history of good financial management, for example £1million of efficiency savings had been made through the recommissioning of contacts including the school nursing contract.
- (v) It was acknowledged that there was potentially some overlap between the roles of the Public Health Department and Public Health England. However, there was a good relationship between the two organisations and the support in terms of evidence bases and regional events was welcomed by the Public Health Department.
- (vi) The Committee was pleased to note the Department's intention to secure efficiencies through partnership working.

### Specific Grants and Contributions

- (vii) An addition to the public health grant was anticipated on 1 October 2014 when the Public Health Department took on responsibility for commissioning health visiting services for 0 – 5 year olds. It was acknowledged that there was some risk to the funding for this service from 2016/17 as the Department of Health was likely to use a needs based solution to fund the service. It was not clear what the implications of this change in the way that funding was allocated would mean for Leicestershire.
- (viii) The Committee was assured that the Department had not yet encountered significant problems through the transfer of commissioning responsibility. It was felt that this was because, during recommissioning, risks such as the stability of the service were addressed through the options appraisal. The majority of services were still delivered by an NHS provider which reduced risks around stability and staffing significantly.
- (ix) It was hoped that the Health Visiting Service could be redesigned to ensure a family centred approach which was aligned with services provided by Children and Family Services. The Committee

welcomed the holistic approach that was being proposed for the redesign of this service.

- (x) It was clarified that the funding for Leicester-Shire and Rutland Sport comprised £660,000 from the public health grant and £964,000 from Sport England.

RESOLVED:

- (a) That the proposed 2015/16 to 2018/19 Medium Term Financial Strategy as it relates to the Public Health Department be noted;
- (b) That the comments made at this meeting be forwarded to the Scrutiny Commission for consideration at its meeting on 28 January 2015.

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