

PUBLIC HEALTH RESPONSIBILITIES

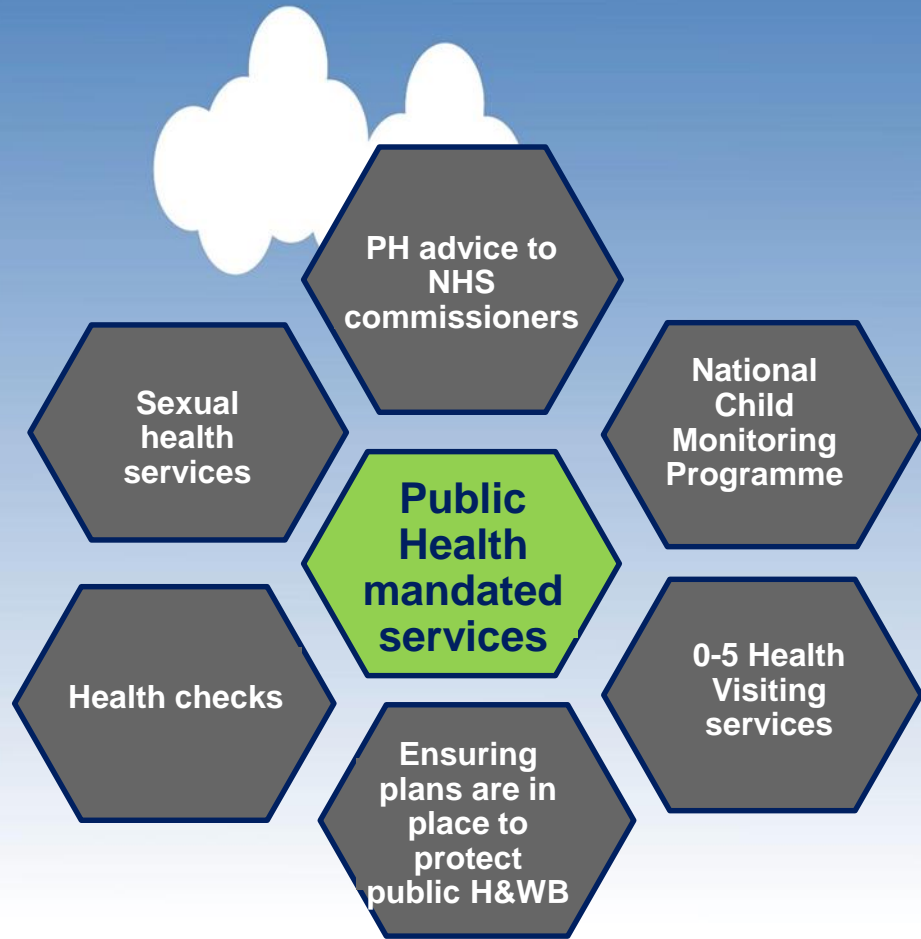
**Adults Wellbeing and Health
Overview and Scrutiny Committee
11 June 2019**

Amanda Healy, Director of Public Health

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Public Health responsibilities from 2013



Other priority interventions:

- Tobacco control and smoking cessation
- Alcohol and drug misuse services
- Services for children 5-19 including school nursing
- Obesity and weight management
- Local nutrition and physical activity programmes
- Public mental health and wellbeing services
- Dental public health services
- Accident prevention
- Local initiatives on workplace health
- Support and challenge on NHS Services (immunisation and screening)
- Seasonal mortality initiatives
- Aspects of community safety
- Public Health aspects of initiatives to tackle social exclusion

County Durham Joint Strategic Needs Assessment

<https://www.durhaminsight.info/>

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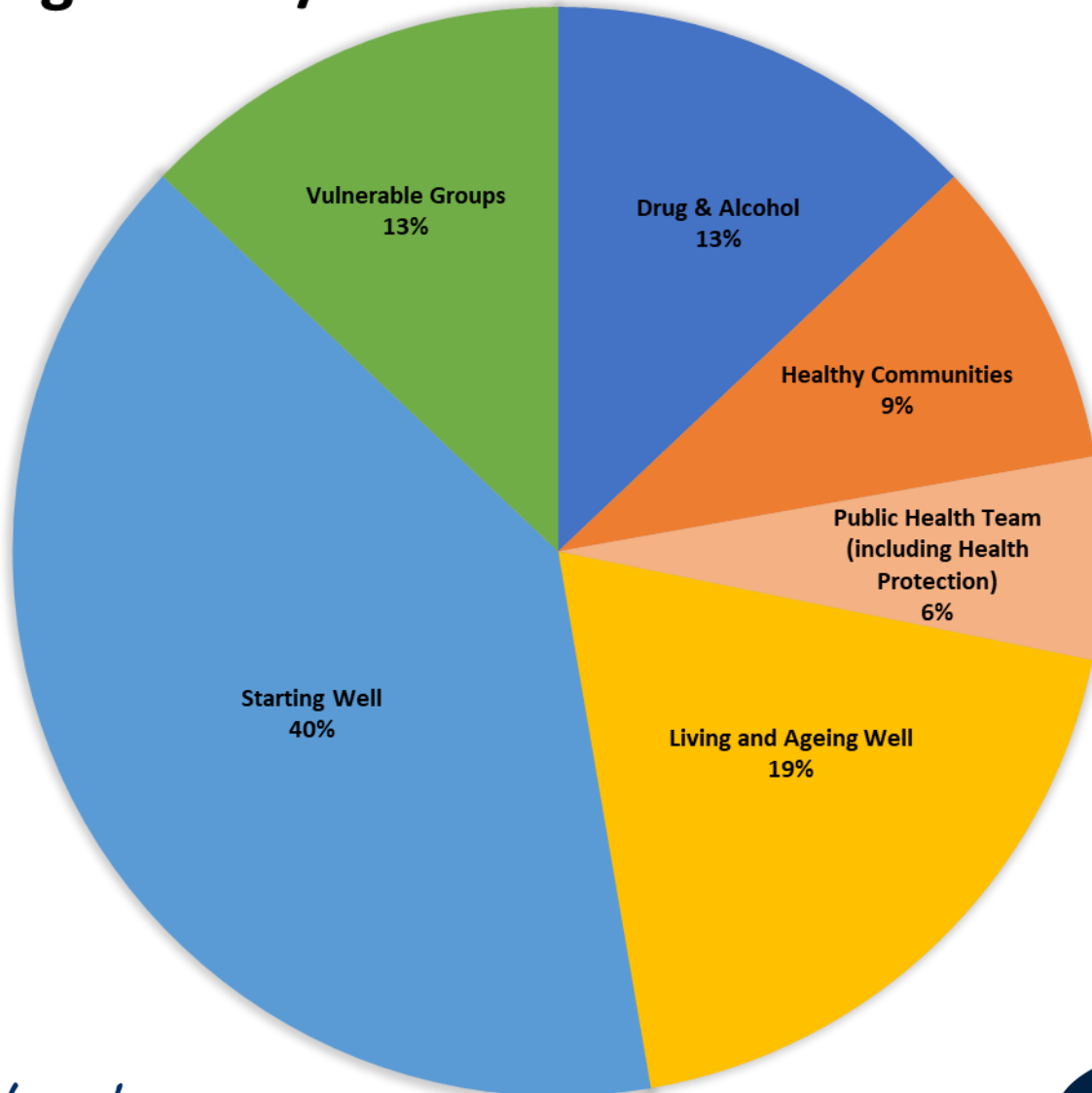
Background to public health funding

- Public Health (PH) ring-fenced grant from 2013 after transfer from NHS - £44.5 million
- Grant was based on the amount previously spent by Primary Care Trusts on public health
- Mix of externally commissioned services and DCC services on health prevention and improvement
- From 2016 – 2020 PH grant has been reduced by £6.97m or 12.8%
- 2019/20 grant - £47.5 million
- Risk to future PH grant beyond 2020 a major concern to the council and partners

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Sum of Budget 2019/2020



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Our priorities – The Taylor Family



Every Child to have the best start in life



Every child to
have the best
start in life

- Healthy schools with emphasis on mental health
- Support for women smoking during pregnancy
- Introduce breastfeeding friendly venues
- Support children with special educational needs and disabilities

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0-5 mandated contracts

Contact	Q1 2017/ 18	Q2 2017/ 18	Q3 2017/ 18	Q4 2017/ 18	YTD 2017/ 18	Q1 2018/ 19	Q2 2018/ 19	YTD 2018/ 19	Target	Trend
Antenatal	93.8%	90.9%	94.9%	97.5%	95.5%	96.4%	96.5%	96.5%	95%	↑
New Birth	95.2%	96.2%	97.9%	96.8%	96.6%	96.8%	96.3%	96.5%	95%	↓
6-8 week	93.5%	95.3%	97.6%	96.5%	95.8%	97.8%	96.0%	96.9%	95%	↑
6-12 month	94.9%	97.9%	98.0%	97.9%	97.2%	95.6%	97.3%	96.6%	95%	↓
2-2.5 year	94.5%	96.7%	98.6%	97.9%	96.8%	97.9%	96.6%	97.3%	95%	↑

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Excellent drug and alcohol provision

Excellent
drug and
alcohol
provision

- Support people with our new drug and alcohol service
- Work with families to help them with drug and alcohol issues
- Promote awareness of sensible levels of alcohol in take

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Key priorities for the new contract

- **Integration** – to become more “outward” focused, working in partnership with others to achieve a common goal
- **Improved pathways** - This includes a number of key pathways for criminal justice, primary care, mental health and the social care provision for children, young people and families.
- **Family focus** – placing families at the heart of the service regardless of their entry point into the system.
- **Outreach support** – moving away from the expectation that clients always come into the service. Staff need to go be more mobile in taking services out to clients in there own communities.
- **Reinvigoration of the prevention agenda** – across a range of partners for drugs and alcohol

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Numbers in treatment (April 2018 – September 2018) taken from NDTMS

Indicator	Definition	Baseline (2017/18)	2018/19 Target	Apr	May	Jun	Qtr 1	Jul	Aug	Sep	Qtr 2	Direction of travel from baseline	National
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Numbers in treatment (direction of travel compared to corresponding period of the previous year)													
22	Opiates	Numbers in treatment during the year to date:	1497	1474				1279				1353	↑
23	Non-opiates		406	350				210				263	↑
24	Alcohol		1101	1096				559				709	↓
25	Alcohol and Non-Opiates		367	354				188				247	↓
26	Pregnant women		17	Tracker				4				7	↓

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Positive behaviour change



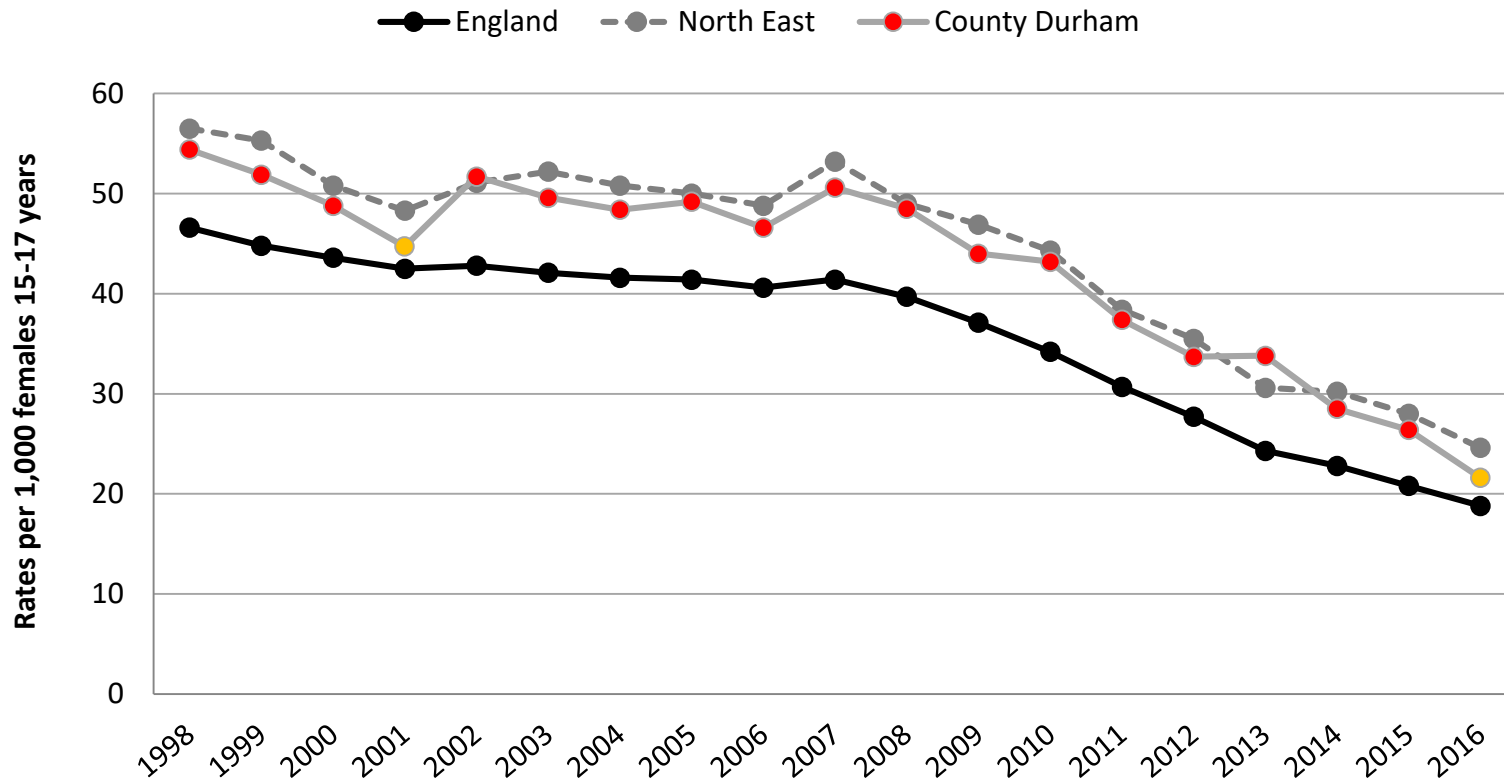
Positive
behaviour
change –
smoking,
activity and
food

- Sexual health services (mandated)
- Introduce Active 30
- Support healthy weight
- Reduce exposure to second hand smoke
- NHS Health Checks

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Sexual health

Under 18 conceptions over time, annual rates (1998 – 2016)



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Sexual health services

- Community based services and Outreach provision
- Integration of Contraception services and GUM including out of area
- Management of Community Pharmacy Emergency Oral Hormonal Contraception (EHOC)
- Transfer of contracting arrangements for GP Long Acting Removable Contraception (LARC)
- 24 hour online testing
- Carry out consultation with key stakeholders

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NHS Healthchecks

- 40-74 years old – no existing diagnosed health conditions
- 13 elements assessed:
 - Smoking
 - Alcohol
 - BMI (Height/Weight)
 - Activity levels
 - Blood pressure
 - Cholesterol
- Signs and symptoms of dementia for over 65s

2018-19

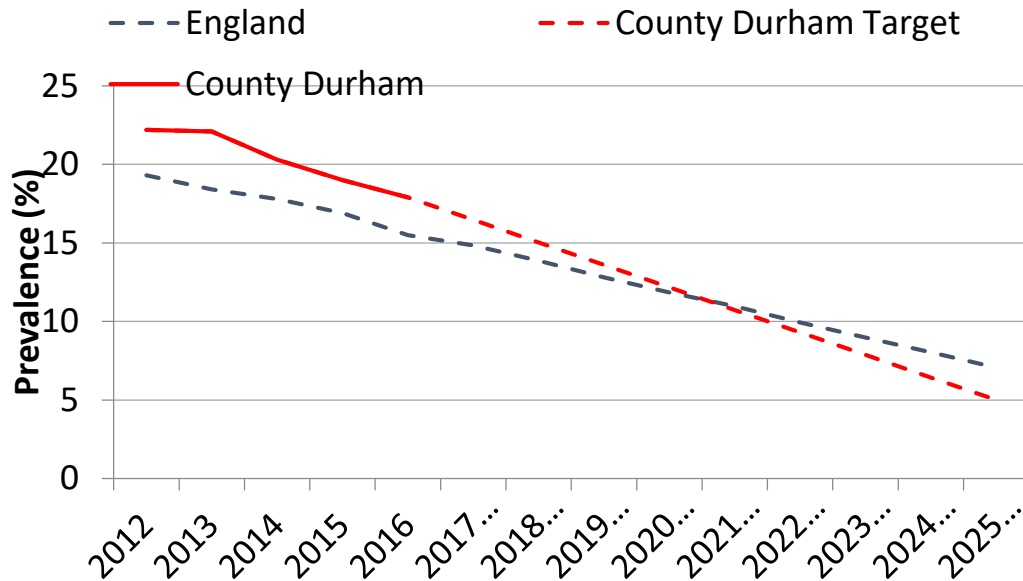
- 39,039 Healthchecks offered
- 9,642 Healthchecks carried out
- 1,541 offered a referral to behaviour change programmes

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Reduction in smoking levels

Projected smoking prevalence, County Durham and England, 2012-2025



This is a reduction of around **53,000** smokers

Ambition

=

5% by
2025

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Supporting Healthy Weight in County Durham

- SugarSmart Durham
 - beyond the funded campaign September 2018
- Soft Drinks Industry Levy – Healthy Pupil Capital Fund
- Vending across all DCC Estates
 - 90% soft drinks less than 5g added sugar/100ml
 - 80% confectionery and sweets 250 calories and below
- Hot Food Takeaway Policy
- Holiday activities with food

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Active 30

Active 30

- Cohort 1 - 124 schools
- Active 10 / Active 20 / Active 30
- <http://www.activedurham.org.uk/active30durham/>

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Mental Health at Scale



- Support small businesses to take action on mental health
- Become involved in Time to Change to reduce stigma and discrimination due to mental health

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Mental Health at Scale Programme

- Identified Suicide Prevention:
 - Males in midlife
 - Children and young people at risk of self harm
 - Wider community
- Workforce
 - All key organisations involved in working group
- Tackling stigma and discrimination
 - Time to Change – pledge signed October 10 2018 at CDP Event on World Mental Health Day
 - Time to Talk Day – February 7 2019

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Public health grant proposals beyond 2020 and implications for County Durham

- PH grant expected to transfer to 75% Business Rates Retention (BRR) 2020
- No dedicated PH grant
- Use of Independent Advisory Committee for Resource Allocation (ACRA) formula to distribute within BRR
- Financial modelling by SIGOMA suggested that Durham would face a reduction in Public Health Grant of over **£19 million** based on 2015/16 ACRA proposals and 2017/18 allocations (38%)
- Worst affected local authority in England
- Compares to an increase for Surrey of £14m and Hertfordshire of £12.6m
- All NE LA's will see a reduction - £40m in total
- Significant shift of funding from areas of deprivation and health inequality to less deprived

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The Taylor family

Healthy life expectancy

...adds a quality of life dimension to life expectancy

	County Durham		Surrey		Herfordshire	
	Men	Women	Men	Women	Men	Women
Life expectancy	78.0	81.3	81.4	84.6	81.0	84.2
Healthy life expectancy	59.1	59.0	68.9	68.1	66.1	66.1
Years in poor health	18.9	22.3	12.5	16.5	14.9	18.1
Inequality in HLE within LA	13.8	14.5	8.3	8.4	10.9	11.0

- Life expectancy and healthy life expectancy are lower in County Durham, but we have more years spent in poor health and a greater gap in terms of HLE between our least and deprived areas.



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North East position

Authority	2017/18 Allocation	ACRA Allocation	Impact of Applying ACRA Allocation		
			Allocation		Increase/Reduction
			£m	%	£m
Durham	49.983	0.9%	30.881	-19.102	-38.22%
Darlington	8.670	0.2%	7.120	-1.550	-17.88%
Gateshead	16.952	0.4%	14.844	-2.108	-12.44%
Hartlepool	8.995	0.3%	8.823	-0.172	-1.91%
Middlebrough	17.230	0.5%	16.273	-0.957	-5.55%
Newcastle	24.129	0.7%	23.186	-0.943	-3.91%
North Tyneside	12.758	0.4%	12.179	-0.579	-4.54%
Northumberland	16.654	0.5%	15.675	-0.979	-5.88%
Redcar & Cleveland	11.827	0.3%	8.588	-3.239	-27.39%
South Tyneside	14.124	0.3%	10.020	-4.104	-29.06%
Stockton	14.278	0.4%	14.217	-0.061	-0.43%
Sunderland	24.003	0.5%	18.123	-5.880	-24.50%
TOTAL	219.603		179.929	-39.674	-18.07%

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Considerations and actions

- Contingency planning due to future of grant
- Budget prioritisation
- MTFP – PH is included in MTFP assumptions
- Work with Public Health England to keep profile high
- Written to Government and others
- Explored ‘alliances’ with other Local Authorities affected by grant reduction e.g., Blackpool
- Active support of partners – Health & Wellbeing Board, Office of Police Crime and Victims’ Commissioner, Health Strategy Group, NHS colleagues, Overview & Scrutiny

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The Taylor Family

