PUBLIC HEALTH GRANT UPDATE

Health & Wellbeing Board

29 November 2018

Amanda Healy, Director of Public Health

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Background

- 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%
- Risk to future PH grant beyond 2020 a major concern to the council

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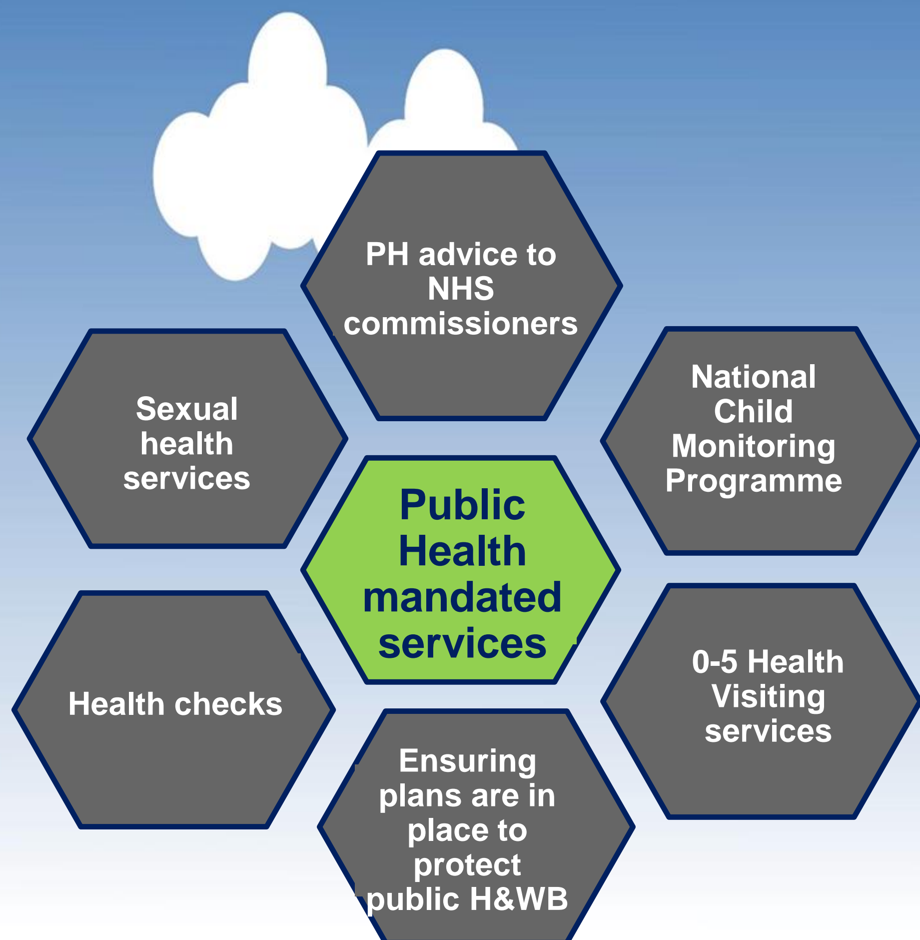
PH responsibilities



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

Proposals beyond 2020 and implications for Durham

- PH grant expected to transfer to 75% Business Rates Retention 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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Key Areas of Focus and Future Lobbying

Authority	2017/18 Allocation	ACRA Allocation	Impact of Applying ACRA Allocation		
			Allocation	Increase/Reduction	
	£m	%	£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%**

Comparison of County Durham, the North East, England (inc best and worst) and Surrey and Hertfordshire LAs

	Indicators	Period	County Durham		North East	England			Surrey		Hertfordshire	
			Count	Value	Value	Value	Worst/ Lowest	Best/ Highest	Number	Value	Count	Value
Marmot indicators	Healthy life expectancy at birth (Female)	2014 - 16	-	59	60.6	63.9	54.6	71.1	-	68.1	-	66.1
	Healthy life expectancy at birth (Male)	2014 - 16	-	59.1	59.7	63.3	54.3	69.9	-	68.9	-	66.1
	Life expectancy at birth (Female)	2014 - 16	-	81.3	81.5	83.1	79.4	86.8	-	84.6	-	84.2
	Life expectancy at birth (Male)	2014 - 16	-	78	77.8	79.5	74.2	83.7	-	81.4	-	81
	Inequality in life expectancy at birth (Female)	2014 - 16	-	7.1	-	-	-	-	-	4.4	-	5.4
	Inequality in life expectancy at birth (Male)	2014 - 16	-	7.7	-	-	-	-	-	5.7	-	7.2
	People reporting low life satisfaction	2016/17	-	4.2%	5.1%	4.5%	-	-	-	3.7%	-	3.2%
	School readiness: Good level of development at age 5	2016/17	4,046	71.9%	70.7%	70.7%	60.9%	78.9%	10,835	77.3%	10,749	72.2%
	School readiness: Good level of development at age 5 with free school meal status	2016/17	693	56.7%	57.7%	56.0%	43.9%	70.7%	587	54.6%	665	52.8%
	GCSE achieved 5A*-C including English & Maths	2015/16	2,996	58.3%	56.5%	57.8%	44.8%	74.6%	6,546	65.6%	7,531	63.6%
	GCSE achieved 5A*-C including English & Maths with free school meal status	2014/15	248	29.5%	30.5%	33.3%	20.5%	60.0%	233	31.4%	332	35.3%
	19-24 year olds not in education, employment or training	2016	-	-	19.0%	13.4%	-	-	-	-	-	-
	Unemployment	2016	14,800	5.9%*	6.6%	4.8%	9.0%	2.3%	21,300	3.4%	23,700	3.8%
	Long term claimants of Jobseeker's Allowance	2016	1,642	5.0*	6.8*	3.7*	13.8	0.7	640	0.9*	1,485	2.0*
	Individuals not reaching the Minimum Income Standard	2012/13 - 14/15	-	-	34.4%	30.10%	-	-	-	-	-	-
	Work-related illness	2013/14 - 15/16	-	-	3980	3990	-	-	-	-	-	-
	Fuel poverty	2015	30,242	13.3%	13.3%	11.0%	18.2%	6.7%	36,579	7.7%	32,084	6.8%
	Utilisation of outdoor space for exercise/health reasons	Mar 2015 - Feb 2016	-	14.1%	17.3%	17.9%	5.1%	36.9%	-	20.5%	-	18.3%
Health Outcomes	Mortality rate from causes considered preventable	2014 - 16	3,450	217.1	228.3	182.8	330	129.7	4,718	142.5	4,526	147.7
	Under 75 mortality rate from all cardiovascular diseases	2014 - 16	1,155	79.2	85.1	73.5	141.3	45.6	1,637	55.5	1,671	61.3
	Under 75 mortality rate from cancer	2014 - 16	2,349	159.6	161.3	136.8	195.3	100	3,533	119.5	3,361	122.7
	Under 75 mortality rate from liver disease	2014 - 16	326	22.6	25.2	18.3	44.7	9.8	441	14.5	389	13.6
	Under 75 mortality rate from respiratory disease	2014 - 16	615	42	43.1	33.8	70.2	18.1	723	25	750	28.3
	Health related quality of life for older people	2016/17	-	0.69	0.709	0.735	0.634	0.793	-	0.78	-	0.75

Colour	Key
Green	Statistically significantly better than England
Yellow	Not statistically significantly different to England
Red	Statistically significantly worse than England

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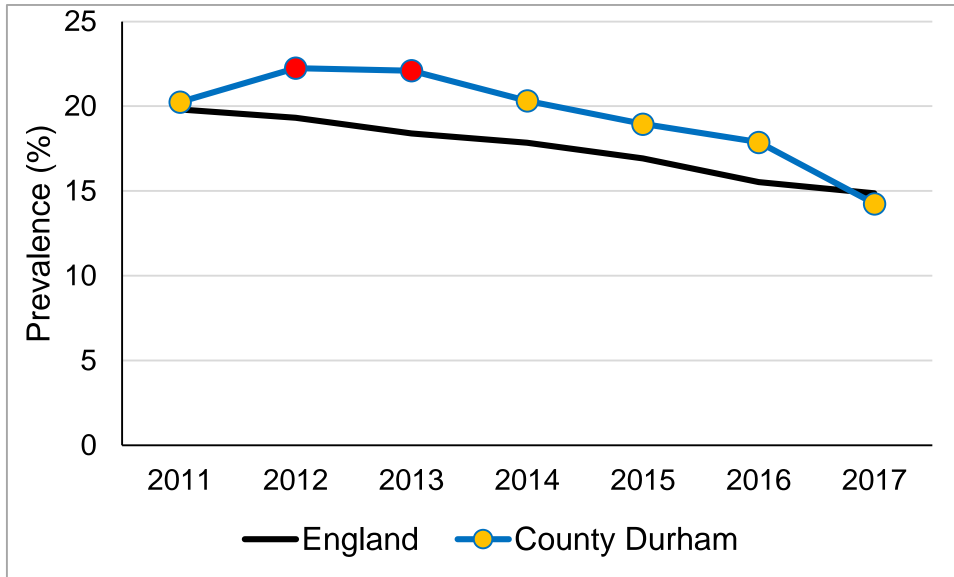
Successes

Smoking prevalence, County Durham and England, 2012-2016



Statistically significantly worse than England

Not statistically significantly different to England

This is a reduction of nearly **22,000** smokers…

… more than the capacity for an international cricket match at the Emirates Riverside Stadium.

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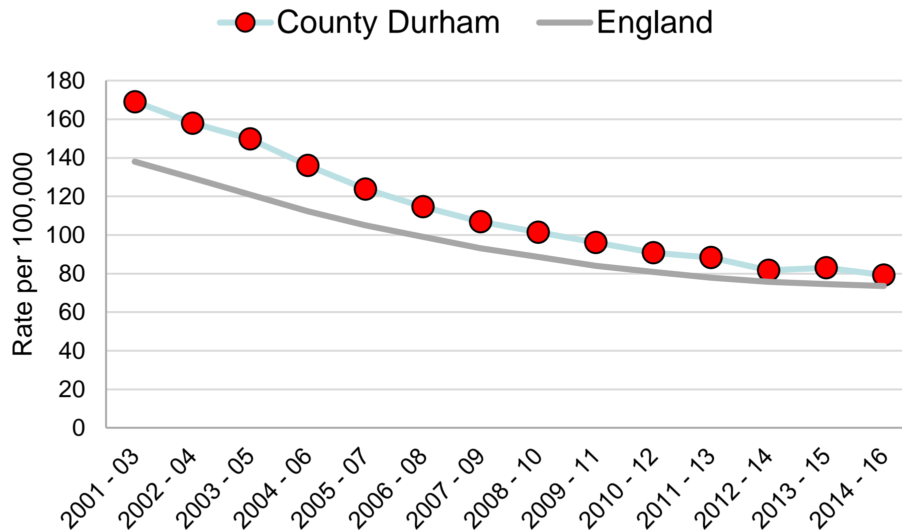
Durham County Council

Successes

Premature cardiovascular mortality rates per 100,000, County Durham and England, 2001-03 to 2014-16



Premature cardiovascular mortality in County Durham remains statistically significantly higher than England…

…but the size of the gap has closed from 31/100,000 (2001-03) to 6/100,000 (2014-16).

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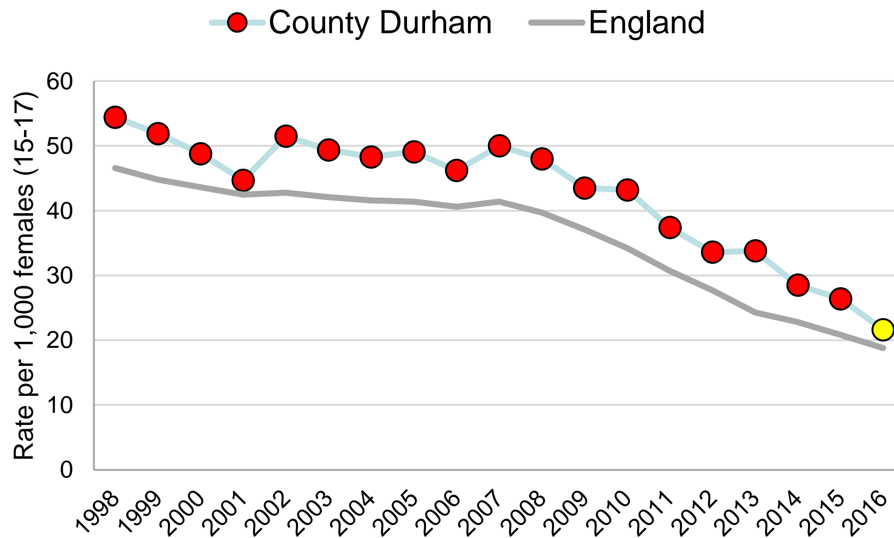
Successes

Teenage conception rate, County Durham and England, 1998-2016.



Teenage conceptions rates have reduced significantly in County Durham over time…

…and for the first time since the 1998 baseline were not statistically significantly higher than the national rate.

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Risks

- Lack of clarity re Fair Funding review and formula for grant redistribution
- Implications for timing on decisions on key contracts and services
- Significant risk to health improvement, health protection and healthcare within and across County Durham
- Significant risk to DCC overall funding position
- Risks to other organisations – NHS, Police, Community and Voluntary sector

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Next steps

- Continue to work with Public Health England
- Write to Government and others
- Clarify Local Authority position across North East
- Explore ‘alliances’ with other Local Authorities affected by grant reduction
- Seek active of support of partners – Health & Wellbeing Board, Office of Police Crime and Victims’ Commissioner, Health Strategy Group, NHS colleagues

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