



**Haringey** Council

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## Adults and Health Scrutiny Panel

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TUESDAY, 14TH JANUARY, 2014 at 17:30 HRS - CIVIC CENTRE, HIGH ROAD, WOOD GREEN, LONDON N22 8LE.

**MEMBERS:** Councillors Adamou (Chair), Bull, Erskine, Stennett and Winskill,

**CO-OPTEEs:** Helena Kania (HFOP)

### AGENDA

#### 6. PUBLIC HEALTH BUDGET (PAGES 1 - 6)

1 - To consider revenue and capital proposals for Public Health in the following documents:

- a) Revenue savings proposals detailed in Appendix A of the Financial Outturn 2012/13 and Budget for 2014/15 (Cabinet report June 2013)
- b) Draft Cabinet report - Financial Planning 2014/15 to 2016/17

2 - To discuss any conclusions and recommendations which the Panel wishes to make.

Bernie Ryan  
Assistant Director – Corporate Governance and  
Monitoring Officer  
Level 5  
River Park House  
225 High Road  
Wood Green  
London N22 8HQ

Melanie Ponomarenko  
Senior Policy Officer (Scrutiny)  
Level 7  
River Park House  
225 High Road  
Wood Green  
London N22 8HQ

Tel: 0208 489 2933

Email:

[Melanie.Ponomarenko@Haringey.gov.uk](mailto:Melanie.Ponomarenko@Haringey.gov.uk)





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<b>Report for:</b>	Adults and Health Overview and Scrutiny, 14 <sup>th</sup> January 2014	<b>Item Number:</b>	
<b>Title:</b>	Briefing on Public Health Budget		
<b>Report Authorised by:</b>	Jeanelle de Gruchy, Director of Public Health		
<b>Lead Officer:</b>	Tamara Djuretic, Assistant Director of Public Health		
<b>Ward(s) affected: All</b>	<b>Report for Key Decision</b>		

## 1. Public Health Grant allocation

1.1 The Department of Health circular of 10 January 2013 sets out the following allocations for Haringey of the ring fenced public health grant:

- 2013/14 grant is **£17.587m** (baseline £16.254 plus 8.2% increase)
- 2014/15 grant is **£18.189m** (plus 3.4% increase)

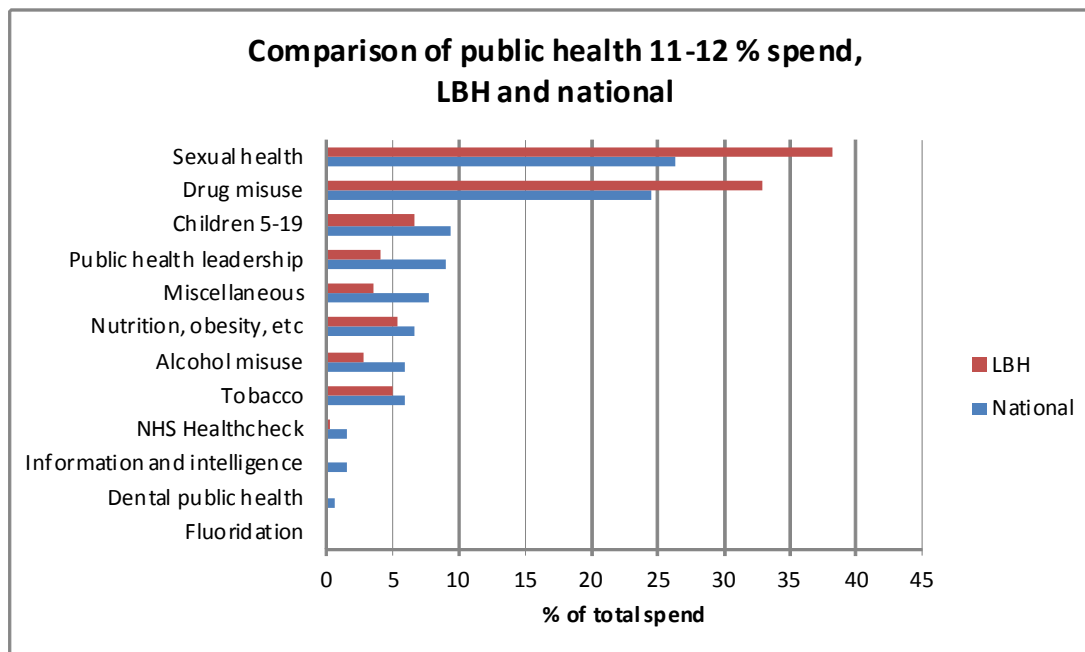
1.2 The Department of Health announcement of a local ring fenced public health grant, including growth, provides stability for the existing programmes and offers opportunities for further investment in meeting the public health needs of our residents. This ring fence was initially put in place for two years but has now been extended for a third year until 2015-16.

1.3 Historical public health spend in Haringey was similar to the national split (Figure 1 below). The slightly increased sexual health and drug misuse budgets reflect Haringey's young population and the higher level of need in our London borough compared to England.



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Figure 1



## 2. Public Health expenditure for 2013/14

2.1 The committed spend and investment plans for the public health ring-fenced grant for this year support delivery of Haringey's Health and Wellbeing Strategy (HWB), the Public Health Outcomes Framework (PHOF) and contribute to the Haringey's Corporate Plan (2013-15): One borough, One future in delivering the public health agenda, particularly focusing on prevention and early intervention. Full briefing on Public Health grant commitments and planned investments for 2013/14 and 2014/15 were agreed at the Cabinet meeting and details have been placed on the website since <http://minutes.harinet.haringey.gov.uk/ieListDocuments.aspx?CId=118&MId=6017&Ver=4>

2.2 New investment totalling £2.7m in 2013/14 has boosted work to improve outcomes for the health and wellbeing of Haringey residents, in particular:

- The 3 outcome areas of the Health and Wellbeing Strategy: Giving every child the best start in life; reducing the life expectancy gap and improving mental health and wellbeing.
- Socio-economic regeneration of Tottenham
- Supporting the Council's commissioning function
  - Priority gaps from the Joint Strategic Needs Assessment (JSNA) such as prevention of infectious diseases, especially TB, hepatitis B and C, sexual health prevention and promotion including prevention of sexually transmitted infections and teenage pregnancy

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More details on investment plans can be found in the Cabinet report of April 2013.

2.3 Although the public health budget is aligned closely to the HWB Strategy and other Council's corporate priorities, expenditure categories for reporting our spend are set nationally set by the Department of Health and follow a broad set of categories (as outlined in Figure 1). All expenditure for 2013/14 is subject to normal financial controls including in year monitoring. Appendix 1 shows a breakdown of current expenditure, by category.

3.1 The Department of Health guidance about the ring-fence grant conditions can be found at the following links:

DH LA circular 10 January 2013 Gateway reference: 18552  
<https://www.google.co.uk/search?hl=en&q=DH+LA+circular+10+January+2013+Gateway+reference%3A+18552&meta>

DH LA circular update: 13 December 2013  
<https://www.gov.uk/government/publications/ring-fenced-public-health-grants-to-local-authorities-2013-14-and-2014-15>

3.2 DH LA circular 10 January 2013 Gateway reference: 18552 (Part Para 3) stated that "local authorities will be given a ring-fenced public health grant, which the government intends to target for health inequalities, to improve outcomes for the health and wellbeing of their local populations. If payments are made out of the fund towards expenditure on other functions of a local authority or the functions of an NHS body, other public body, or a private sector or civil society organisation, the authority must be of opinion that those functions have a significant effect on public health or have a significant effect on, or connection with, the exercise of the functions described in paragraph 3." No expenditure will be charged to the grant that does not meet the conditions.

**3. Proposed savings for 2014/15**

3.3 The Council has put forward plans to make savings in the council base budget by funding existing council services – drug and alcohol misuse and healthy living activities - that meet public health objectives from Public Health Grant. Discussions are taking place to determine the best way of doing this, including through efficiencies and reduction in previously proposed investment (see Appendix II).

3.4 In addition, the Council will charge overheads to the public health directorate in line with normal accounting practices.



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### Appendix I – Detailed breakdown of 2013/14 expenditure

<b>Budget Expenditure Breakdown</b>		<b>2013/14</b>
PH01 Director – salaries budget		2,036,100
PH03 Sexual Health		5,887,500
PH04 Children Public Health Programmes		1,341,700
PH05 Life Expectancy Improvement		1,542,700
PH06 Substance Misuse		5,859,600
PH07 Health Protection		220,300
PH08 Public Mental Health		203,600
PH09 Miscellaneous Public Health Service		876,700
Accident prevention	40,000	
Community safety, violence prevention	100,000	
Dental public health	77,000	
Other public health services	659,700	
<b>Total PH grant</b>		<b>17,968,200</b>
PH10 Emergency Planning*		300,100
<b>Total for PH budget</b>		<b>18,268,300</b>

\*LBH base budget, not part of ring-fenced grant



**Appendix II – Proposed recurrent savings for 2014/15**

Item	Service	Detailed Efficiency & Saving proposal	Savings for 2014/15	Impact on Performance	No. of Staff Affected	No. of Posts Deleted (FTE)	Remaining budget
1	Public Health	Health Intelligence	50	No immediate impact on front line services but in the long term ability to plan and commission effectively could be reduced.	0	0	280
2	Public Health	Family Nurse Partnership	24	This contract provides support to first time parents under 19. The reduction in funding will be managed to ensure impact on front line services is minimal but there is a small risk to performance.	0	0	76 (PH contribution)
3	Public Health	School Curriculum Development (one off development support)	30	This will reduce support to schools to educate Children about healthy living.	0	0	50
4	Public Health	Offer the increase in PH grant as a saving rather than commission new services.	25	There will be no changes to existing services but new opportunities for investing to save will be foregone.	0	0	
5	Public Health	Prevention in Obesity in adults	24	Obesity is a risk factor for ill health and there is high prevalence in Haringey. Reducing services to combat it may have impact on health and social care use.	0	0	422 for physical activity and obesity
6	Public Health	Savings achieved via substance misuse retender	20	No impact on services as savings will be achieved through competitive tendering	0	0	app. 4m
7	Public Health	Social isolation project	30	Social isolation is a risk factor for ill health. Reducing services to combat it may have an impact on health and social care use, especially in relation to mental health	0	0	60 (PH contribution)
9	Public Health	Evaluation of Prevention Services	40	No immediate impact on front line services but over time will reduce the evidence base for effective commissioning and policy.	0	0	120
	<b>Total Public Health</b>		<b>243</b>		<b>0</b>	<b>0</b>	



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