

**MINUTES OF THE ADULTS AND HEALTH SCRUTINY PANEL
TUESDAY, 14 JANUARY 2014**

Councillors Adamou (Chair), Bull & Winskill

Cooptee Helena Kania (HFOP)

Apologies Councillor Erskine and Stennett

LC1. APOLOGIES FOR ABSENCE

Apologies received from Cllr Erskine and Cllr Stennett

LC2. URGENT ITEMS

None received

LC3. DEPUTATIONS

None received.

LC4. DECLARATIONS OF INTEREST

None received.

LC5. MINUTES

LC6. PUBLIC HEALTH BUDGET

Dr Tamara Djuretic (AD Public Health) presenting the briefing paper to the Panel. The following points were noted:

- The public health grant for 2013/14 and 2014/15 is ring-fenced. This ring-fencing has recently been extended to include the 2015/16 public health grant.
- Public Health allocation of expenditure in Haringey is about in line with that across the national average. Exceptions are the Sexual Health allocation and the Drug and Alcohol allocation – where Haringey spends more than average. This is due to the population profile and needs in Haringey.
- The April 2013 Cabinet Paper detailed investment of the additional parts of the public health grant (£2.7million) across the three Health and Wellbeing Strategy Outcomes as well as Tottenham regeneration and commissioning priority gaps.
- With regards to the specific lines of the Public Health budget proposal – the following points were noted:

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1. Investment in health intelligence was identified as a need in the Joint Strategic Needs Assessment.
 2. £100k was originally set aside for the Family Nurse Partnership, after further consideration it was felt that £24k of this was not needed and therefore it was identified as a saving.
 3. School curriculum development – this was a one of sum needed to set up the website, including lesson plans to provide health lessons within the curriculum. Now that the site is set up the additional sum is no longer needed.
 4. Increase in grant – this is the difference between the 2013/14 and 2014/15 amount (uplift) and as this has not yet been invested there is no service change from the saving.
 5. Prevention in obesity – the £24k saving is out of a £422k budget. It should also be noted that there has been an overall £100k investment in the area.
 6. Substance mis-use re-tender – service remains the same, just better value for money from the contract.
 7. Social Isolation project - £90k was originally set aside. It was felt that this was not all needed due to a project on social isolation being commissioned by Adult Services.
- The next step in the budget process will be identifying areas which can be cross-charged for example in terms of management. Possible areas include drugs & alcohol and healthy living.
 - Discussion will take place as Public Health want to ensure public health outcomes, for example through Service Level Agreements.

Discussion points noted:

- The Panel raised concerns about the non investment of funds in social isolation giving the needs in the borough and was informed that there was a wider investment in social isolation, for example approximately £225k in the Tottenham Hub and that services were working in a more integrated way.
- The Health Intelligence saving is not a reduction, the sum was to be in addition to what there is currently.
- The Panel were informed that the increase of £2.7m in the grant for 2014/15 grant was announced in January 2013 and that allocations of that funding

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needed to be made by April 2013 as part of the budget setting process. Given the relatively short amount of time to allocate this was done (as per the April 2013 Cabinet report) and work is now being done to finesse the allocations, which is why there is changes.

- It was noted that the extent, value and nature of sexual health contracts had taken time to become clear for example the exact figures committed in previous contracts.
- It was important to note that the vast bulk of public health expenditure was already committed in contracts which the Primary Care Trust had held and that Public Health had inherited these (£13.8m).
- It was noted that Mental health was not a statutory line in public health budgets and the Panel asked that the Cabinet Member push for a greater prominence and emphasis on public Mental Health.
- The Panel queried why mental health expenditure was so low in proportion to the overall budget (1.13%). The Panel was informed that historically Public Health had not held budgets for public mental health.
- It was noted that:
 - The budget for public mental health just a few years ago was £27k, whereas now it is £203k.
 - The evidence base in public mental health is relatively new.
 - You can't go from very little investment to a lot of investment without building up a clear picture of where the money is needed and is going.
 - Haringey is now ahead of the game in the investment it makes in public mental health.
 - 7 new interventions had recently been commissioned, this included a lot of work in schools and interventions focused on young Turkish men.
 - A good base for public mental health is being created in Haringey.
 - In response to a question on commissioning pharmacies to carry out health checks the Panel was informed that the most cost effective way to deliver health checks at present is via GP surgeries.
 - The Panel raised concerns about the perception of savings being made in relation to obesity and noted that healthy eating is just part of the wider picture. In response the Panel was informed that obesity is a priority and it is a huge challenge and issue. The following points were noted:

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- Obesity is a very complex issue.
 - It is not about pointing fingers of blame at people.
 - It is a societal issue.
 - The focus is on healthy living and healthy lifestyles and trying to make Haringey fit into this.
 - It is a political issue – for example trying to encourage Members to address issues such as the availability of alcohol, planning issues, as well as issues across the council such as encouraging walking and cycling.
 - It is not an area that you can throw money at. There needs to be a considered approach.
 - Active for Life as a scheme has been increased.
 - Some money has also been put into weight management targeting men, but the evidence base isn't there yet for this.
 - People's perception of what a 'normal weight' child should look like are not always correct.
 - There is a healthy schools initiative in Haringey, with 20 schools signed up.
- In response to a query about the staff costs outlined in the April 2013 Cabinet report, the Panel was informed that the increase from £1.4m to £2.2m was due to both new posts, for example sexual health commissioners, it was also over heads and approximately £500k was previously Council staff who come under Public Health now that Councils have a public health remit for example the Director of Public Health was previously a joint Council/PCT post, it is now just a Council post.

AGREED

- That a recent briefing done on social isolation would be shared with the Panel.
- The Director of Public Health would share a presentation she is doing about opportunities in public mental health at a GLA London Councils event.

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- That it be recommended that the Cabinet Member lobby to ensure that public mental health becomes part of the national public health budgetary framework.
- The Panel are encouraged that the public mental health budget allocation has increased substantially, however note that this only represents just over 1.3%. The Panel also noted that Mental Health is one of the Health and Wellbeing Strategies stated outcomes. The Panel therefore recommends further increases in investment over the coming years.

LC7. NEW ITEMS OF URGENT BUSINESS

None received

Cllr Gina Adamou

Chair