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Meeting	Health and Well-Being Board
Date	31 January 2013
<b>Subject</b>	<b>Public Health Commissioning Intentions 2013-14</b>
Report of	Director of Public Health Barnet and Harrow
Summary of item and decision being sought	The paper contains the commissioning intentions for Public Health in Barnet for 2013-14. The intentions will support the delivery of statutory requirements and the provision of discretionary services within the Local Government Public Health remit. The intentions align with the priorities within the Barnet Health and Well Being strategy and represent the Council's Public Health contribution to delivery of the strategy. The Board is asked to note its content.

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Officer Contributors	David Fabbro, NHS Harrow
Reason for Report	To advise the Health and Well Being Board of the Council's Public Health Commissioning intentions for 2013-14.

Partnership flexibility being exercised None

Wards Affected All

Contact for further information:

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## **1. RECOMMENDATION**

- 1.1 The Board note the Public Health Commissioning intentions for 2013-14.

## **2. RELEVANT PREVIOUS DISCUSSIONS AND WHERE HELD**

- 2.1 Previous decisions concerning the public health transition include the approval of a shared public health function by Cabinet Resources Committee on 20 June 2012 and by the Barnet Health and Wellbeing Board on 22 March 2012, which also approved the appointment of a joint Director for Public Health for the London Boroughs of Barnet and Harrow.

## **3. LINK AND IMPLICATIONS FOR STRATEGIC PARTNERSHIP-WIDE GOALS (SUSTAINABLE COMMUNITY STRATEGY; HEALTH AND WELL-BEING STRATEGY; COMMISSIONING STRATEGIES)**

The proposed commissioning intentions align with and support delivery of the Health and Wellbeing Strategy and the probable requirements of implementation of the review of the physical activity goals (the 'One Barnet Sport and Physical Activity Review').

## **4. NEEDS ASSESSMENT AND EQUALITIES IMPLICATIONS**

- 4.1 The commissioning intentions reflect the health and well-being needs of the population and have been informed by the Joint Strategic Needs Assessment (JSNA) and will help deliver the Health and Well Being Strategy.

## **5. RISK MANAGEMENT**

- 5.1 Final values for various contracts, noted in the paper, are still subject to agreement. Work is in hand to contain spend of those contracts providing open access services.

## **6. LEGAL POWERS AND IMPLICATIONS**

- 6.1 The Health and Social Care Act 2012 confers powers, and imposes a number of duties on local authorities with regard to public health functions.

## **7. USE OF RESOURCES IMPLICATIONS- FINANCE, STAFFING, IT ETC**

- 7.1 The Public Health commissioning intentions will be entirely financed by the ring fence Public Health allocation to Barnet Council from central government as announced on 10 January 2013.
- 7.2 The Department of Health (DH) allocated £13,799,000 to Barnet Council on 10 January 2013. This was higher than anticipated. This figure includes the previous separate allocation for DIP Drug and Alcohol funding but not the element from the Mayor's office for Policing and Crime (MOPAC) which will be paid separately to the Council. This budget will allow mandatory requirements to be met, core services to continue and the introduction of new services. Budget figures for individual contracts and services are anticipated amounts rather than finalised amounts. The budget proposal is detailed in Appendix 2. Given the late announcement of the allocation work is still in progress to determine the full and final allocation of the grant.

## **8. COMMUNICATION AND ENGAGEMENT WITH USERS AND STAKEHOLDERS**

- 8.1 The commissioning intentions in the paper are derived from the Joint Strategic Needs Assessment and consultation with various stakeholders during the production of the Barnet Health and Well Being Strategy

## **9. ENGAGEMENT AND INVOLVEMENT WITH PROVIDERS**

- 9.1 Via 8.1 above.

## **10. DETAILS**

- 10.1 A number of Public Health responsibilities are transferring to Local Authorities on 1<sup>st</sup> April 2013, some of which will be mandatory duties. Barnet Council has agreed that the transfer of responsibilities will be on an 'as is' basis to minimise all risks inherent in the transfer and to ensure continuity of service for 2013-14. The budget proposals in this paper derive from this principle while accommodating additional Public Health requirements and new areas of investment.
- 10.2 The paper attached at Appendix 'A' sets out proposals for the Public Health budget allocation for 2013-14 and the detail of current contracts and services that will fall within the remit of the Local Authority. This information is provided to support decision making for Public Health commissioning intentions for 2013–14.

## **11 BACKGROUND PAPERS**

- 11.1 None.

Legal – HP  
CFO – JH/MGC