

	Health and Well-Being Board 12 March 2015
Title	Public Health Commissioning Plan Consultation feedback
Report of	Dr Andrew Howe, Director of Public Health
Wards	All
Date added to Forward Plan	September 2014
Status	Public
Enclosures	Appendix 1: Public Health Commissioning Plan Appendix 2: Consultation report Appendix 3: Resident Perception Survey Autumn 2014
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Summary
<p>This report summarises the key findings from the strategic plan consultation from across the council as they relate to public health and implications for the Public Health Commissioning Plan (Appendix 1).</p> <p>Although based on small numbers, responses indicate a very high level of support for the priorities identified in the Public Health Commissioning Plan.</p>

Recommendations
<ol style="list-style-type: none"> 1. That the Health and Well-Being Board notes the consultation feedback on the draft Public Health Commissioning Plan. 2. That the Health and Well-Being Board notes that no changes have been made to the draft Public Health Commissioning Plan 2015 - 2020 as consultation feedback was overwhelmingly supportive of the Plan. 3. That the Health and Well-Being Board approves the final Public Health Commissioning Plan 2015 – 2020.

1. WHY THIS REPORT IS NEEDED

- 1.1 This report summarises the key findings from the strategic plan consultation (Appendix 2) from across the council as they relate to public health and implications for the Public Health Commissioning Plan (Appendix 1).
- 1.2 Only 7 responses to the public health commissioning priorities were received.
- 1.3 Of those who did respond, 6 out of 7 (85%) with all of the priorities identified in the Public Health Commissioning Plan. The remaining respondent disagreed with them all.
- 1.4 Two of the 7 respondents thought that there were missed priorities indicating that alcohol, exercise and healthy eating/obesity require more robust solutions. Each of these areas is identified as a priority in the commissioning plan and significant new investments have been made since the transition of public health to local authority. They all present significant cultural change challenges nationally and are areas where whilst there are developing evidence bases, there are as yet no clear solutions or political consensus on the willingness to intervene. The 2014 Annual Director of Public Health report focused on physical activity and a Fit and Active Barnet Campaign ran throughout the year. This work is now taken forward by the Sport and Physical Activity Partnership. A paper on our approach to obesity is included on the agenda of this board meeting. A substance misuse strategy, including alcohol, is due to be presented to the board in June.
- 1.5 The Resident Perception Survey (Appendix 3) highlights that residents are more concerned than the rest of London about quality of health services; services in the borough are considered to be 'good to excellent' by the majority. Respondents were also concerned that there is not enough being done for elderly and young people.
- 1.6 On 13 November 2014 the Health and Well-Being Board approved the Public Health Commissioning Plan for consultation. Consultation on 'Meeting the challenge: Barnet's strategic plan and budget to 2020' including specific consultation on the priorities, approach and outcomes of the Public Health Commissioning Plan, ran from 17 December 2014 to 11 February 2015. Following the consultation, this paper seeks approval of the final commissioning plan (Appendix 1).

2. REASONS FOR RECOMMENDATIONS

- 2.1 To ensure that the Public Health Commissioning Plan has the support of members in light of consultation with residents.
- 2.2 Health and Well-Being Board is asked to note that the consultation feedback was overwhelmingly supportive, although in low numbers. Therefore the Health and Well-Being Board is asked to approve the final Public Health Commissioning Plan 2015 – 2020.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 None

4. POST DECISION IMPLEMENTATION

4.1 The Public Health team will implement the commissioning plan. Commitments for the 2015/16 financial year will be overseen by relevant LBB Delivery Units as set out in the Commissioning Plan (Appendix 1).

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

5.1.1 The Public Health Commissioning Plan reflects the corporate priorities of partners as set out in the Joint Health and Wellbeing Strategy. Performance monitoring is carried out through management agreements through each Delivery Unit and is conducted on a quarterly basis by Council Commissioners.

5.1.2 Performance of partners in addressing the priorities identified in the Joint Health and Wellbeing Strategy is reviewed annually and was last reported to the Board in November 2014.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

5.2.1 The London Borough of Barnet will receive £14.335 million Public Health grant in 2015/16. The delivery of all the priorities detailed in the Commissioning Plan will be funded by the Public Health grant.

5.3 Legal and Constitutional References

5.3.1 Case law has clarified that consultation needs to meet the following requirement - consultation must be undertaken at a time when proposals are still at a formative stage, the proposer must give sufficient reasons for any proposal to permit of intelligent consideration and response, adequate time must be given for consideration and response and the results of the consultation must be conscientiously taken into account in finalising the decision being consulted upon.

5.3.2 The Council's Constitution (Responsibility for Functions – Appendix A) sets out the Terms of Reference of the Health and Well-Being Board:

(5) To receive assurance from all relevant commissioners and providers on matters relating to the quality and safety of services for users and patients

(6) To directly address health inequalities through its strategies and have a specific responsibility for regeneration and development as they relate to health and care. To champion the commissioning of services and activities across the range of responsibilities of all partners in order to achieve this.

(7) To promote partnership and, as appropriate, integration, across all necessary areas, including the use of joined-up commissioning plans across the NHS, social care and public health.

(9) Specific responsibilities for:

- Overseeing public health
- Developing further health and social care integration

5.4 **Risk Management**

5.4.1 None

5.5 **Equalities and Diversity**

5.5.1 The public sector equality duty under s149 of The Equality Act 2010 requires Public Bodies to have due regard to the need to:

1. eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
2. advance equality of opportunity between people from different groups
3. foster good relations between people from different groups

5.5.2 The broad purpose of this duty is to integrate considerations of equality into day to day business and keep them under review in decision making, the design of policies and the delivery of services

5.5.3 The majority of public health services are unaffected by the commissioning plans. Equality impact assessments will be conducted ahead of any new service procurements/re-procurements.

5.6 **Consultation and Engagement**

5.6.1 This is the focus of this report as outlined above.

6. **BACKGROUND PAPERS**

6.1 Public Health Commissioning Plan, Health and Well-Being Board 13th November 2014, item 8:

<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=177&MId=7783&Ver=4>