

Proposal Feedback

PROPOSAL: Public Health

APPENDIX 1.2

ORGANISATION: 942

NAME OF ORGANISATION: Public Health England

NAME: Dr A R Marshall, Centre Director, North East

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COMMENTS:

This is in response to the current consultation on budget plans for Darlington Borough Council. I am writing on behalf of Public Health England, in our current capacity accounting for the appropriate use of the Public Health Ring Fenced Grant to Parliament. I am keen as the Centre Director for the North East Centre to offer support but also share some concerns regarding the potential impact of some of the proposals on the ability for Darlington Borough Council to meeting its Public Health obligations.

I recognise that councils are facing a further period of financial stringency, which includes a reduction in the size of the public health grant As a consequence, I fully accept that councils will need to closely inspect current and future spend and identify savings that can be made to remain within budget.

The Grant is given for the purposes of contributing to the council's activities ensuring good public health outcomes for residents. We therefore expect any proposed savings to be informed by the JSNA, the local Health & Wellbeing Board's priorities; an assessment of current performance; and the efficiency with which services and functions are currently delivered. It remains essential that the Grant is only spent on activities whose main or primary purpose is to improve the public health of local populations. The Director of Public Health will need to be in a position to sign a statement of assurance at the end of each financial year.

Given these expectations, I would like to register two specific concerns about the proposals for the prescribed public health services i.e. those that Councils are mandated to ensure provision for. There appear to be specific implications for sexual health and for the "core offer" to Clinical Commissioning Groups/NHS Advice.

The proposals for sexual health categorise sexual health services as part of the "Core Offer" of the Council. The proposals make very clear the responsibilities of the authority under the Act and, even for the remodelled service, retain open access to GUM services. However, to achieve the required efficiencies it is proposed that the service will be remodelled to be more targeted to those at greatest risk of early unintended pregnancy and poorer sexual health. It is specifically proposed that both the local trust contract and the out of area costs for GUM are reduced by 5%. It is unclear how this 5% reduction will be achieved for GUM whilst retaining the open access requirement for GUM and we would welcome clarification on this specific issue.

The proposals for the delivery of the "Core offer" to Clinical commissioning groups/NHS advice outline significant reductions to the available capacity and expertise to deliver this important function both directly within the team and that purchased from a shared public health service in Teesside. The proposals state that "The Director of Public Health will access highly specialised Public Health advice including Public Health Medicine, pharmaceutical, infection control and specialised epidemiology through procurement arrangements". We would urge that the budget allowed for such procurement is sufficient and would welcome the opportunity to discuss in more detail the arrangements for this advice to be assured of future provision.

POSTCODE:
NE1 4WH

AGE:

PROTECTED CHARACTERISTICS:

PROPOSAL CATEGORY COMMENTS:

CRITERIA COMMENTS: