



# Public Health Business Strategy

2014/15 – 2017/18

Draft subject to agreement by Council in February 2014

# Introduction

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This is a new four-year business strategy for 2014/15 to 2017/18. It builds on the previous strategy agreed in 2011 which included savings of £119m for the council which have been achieved by reconfiguring services to establish a smarter, leaner and more cost effective operating environment, whilst at the same time reshaping services to fit the changed local and national policy environment.

However the hard work does not stop here as cuts in government grant and restrictions on council tax increases put further pressure on the council's budget. In addition there are new service pressures that have been identified which need to be managed. The latest financial outlook means that our Medium Term Financial Plan (MTFP) 2014/15 – 2017/18 that sits alongside this strategy proposes a further £64m savings in addition to the £31m already planned.

This new strategy reflects the updated position and incorporates the pressures and savings in the existing MTFP together with the new budget proposals that will be agreed by Council in February 2014. The detail of these pressures and savings is set in the resources to deliver our priorities section.

This business strategy both drives and is driven by our strategic approach as set out in the Council's Corporate Plan and determines our performance management framework.

## Public Health Directorate Overview

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The Health and Social Care Act 2012 returned a public health role to local government. The reformed public health system gives us an unprecedented opportunity to take a far more strategic role. We can now promote public health through the full range of council business and become an influential source of trusted advice for the population, the local NHS and everyone whose activity might affect, or be affected by, the health of the people in Oxfordshire.

Public health practice made huge strides during the 20th century, transforming the living standards of millions and saving countless lives in the process. Yet real threats still linger and new ones emerge. Dealing with the avoidable mortality caused by, say, smoking or obesity as conclusively as cholera and typhoid were dealt with requires different ways of thinking and acting.

We will have succeeded when we can see that the people of Oxfordshire are living longer, healthier lives and we have narrowed the persistent inequalities in health between rich and poor.

# Delivering the Council's corporate priorities

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Our approach is to work through the Health and Wellbeing Board to deliver the priorities identified in the joint health and well-being strategy.

- **Building a thriving economy** – we work to keep people healthy so that they can be economically active, thus contributing towards the financial success of Oxfordshire.
- **Supporting healthy Thriving people and communities** – we support people in making healthy lifestyle choices, keeping people safe from diseases and other threats and identifying people who are more vulnerable to disease and ill health, healthy people are able to contribute to and work for their local community, thus allowing communities to thrive. We coordinate work across the Council with the voluntary sector and promote programmes to tackle inequalities in communities. We also work closely to support the NHS and to join up NHS and Council business. Our work on community safety with the police and our drug rehabilitation programmes also contribute here. We help to keep people safe through our 24/7 on call service for emergencies and disasters affecting the community. We support people to make commitments to active travel, using the environment for both community and personal health gain. We help to keep the environment safe by helping to prevent environmental hazards and infectious diseases.
- **Supporting the vulnerable** – we ensure that the services we commission support those people who are the most vulnerable by building specific requirements into our contracts. Some services we commission are targeted at vulnerable groups, such as rehabilitation services and needle exchange for drug users, support to ensure that rehomed families are rapidly allocated a new health visitor and additional community breast feeding support in areas where breastfeeding is low. We also deliver extensive public health campaigns to help vulnerable groups understand the importance of taking up opportunities to protect their health such as the NHS health check, immunisations and screening programmes.

**How we work to deliver these priorities** We are rolling out a programme of 'agile working' in order to support the new ways of working necessary to deliver these priorities. Agile working means: giving staff the right equipment and working environment to suit their role and service; working in a more flexible way that makes best use of staff time, buildings, and resources; and taking advantage of changes in technology and working styles to become more efficient. This will ultimately protect delivery of front line services as far as possible. The public health team works across two locations where hot-desking systems are used in order to optimise office space. Staff also make use of laptops and blackberries with secure network connections to enable them to work from a variety of locations including other council or NHS sites and from home when appropriate.

## Services and Priorities

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From April 2013 Oxfordshire County Council took over a raft of vital public health activity, ranging from cancer prevention and tackling obesity to drug misuse and sexual health services.

Our responsibilities cover:

- Sexual Health Services
- NHS Health Check programme
- Local Authority role in health protection
- Public health advice
- National Child Measurement Programme
- Obesity
- Physical Activity
- Drug Misuse
- Alcohol Misuse
- Stop smoking services and tobacco control
- Public health services for children 5-19 (including School Health Nursing)
- Wider work including
  - Wider Determinants
  - Mental well being

- Oral health
- Nutrition Initiatives
- Accidental injury prevention
- Behavioural and lifestyle campaigns
- Health at Work
- local initiatives to reduce excess deaths as a result of seasonal mortality
- public health aspects of promotion of community safety
- public health aspects of local initiatives to tackle social exclusion
- local initiatives that reduce public health impacts of environmental risks.

Our priorities are informed by the Joint Health and Well-Being strategy for Oxfordshire and include promoting the uptake of cancer screening programmes and immunisation programmes; promoting the uptake of NHS Health Checks; promoting breastfeeding; increasing the number of people supported to quit smoking and halting the increase in childhood obesity.

## How our services are changing

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Public Health is a small directorate that secures its services through commissioning. The current contracts through which services are commissioned are predominantly parts of bigger NHS contracts across a variety of providers and secured over different timescales. Through 2013/14 and 2014/15 contracts will be renegotiated and timescales aligned which will ensure opportunities for efficiencies and market testing are optimised for the future. The new contracts reflect latest practice and population requirements; are more clearly defined, so that we can more easily monitor what is being delivered for our money; and increase requirements for quality monitoring and safeguarding.

Public health is currently funded through a ring fenced grant of £25.264M from central government. We aim to make a significant reduction in our budget in line with other directorates of £1.25M savings in each of 2016/17 and 2017/18 (£2.5m in total). The

savings are loaded towards the latter years as we are anticipating that the County Council will be expected to protect the ring-fence until after 2015/16 in line with central government policy. The intention is to make savings through commissioning more efficient services rather than through seeking service reductions. This is possible as contracts used to commission services are being renewed and, once established, can be further reviewed in 2016/17 and 2017/18 when further efficiencies can be sought.

It is possible that as soon as April 2015 we may take on responsibility for commissioning Health Visiting services, so through 2014/15 we will be working closely with the NHS England Thames Valley team to ensure that transition of this service runs smoothly.

## Managing our performance

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The successful delivery of the Council's Corporate Plan and business strategy will be monitored on a quarterly basis by the Performance Scrutiny Committee and Cabinet. Progress will be published on the Council's website.

A series of performance indicators will be used to assess our performance in delivering the priorities set out in this strategy. Performance Indicators are currently being developed by directorates and will be considered by the Performance Scrutiny Committee.

Once agreed directorate performance indicators will form an appendix to this strategy.

# Resources to deliver our priorities

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## Details of Proposed Budget Changes - Public Health

Reference	Type of Budget Change	Detail	2014/15 £'000	2015/16 £'000	2016/17 £'000	2017/18 £'000	Total £'000
		2013/14 Grant - £25.264m					
15PH1	NS	More efficient contract negotiations			-1,250	-1,250	-2,500
		<b>Total Public Health</b>	<b>0</b>	<b>0</b>	<b>-1,250</b>	<b>-1,250</b>	<b>-2,500</b>

O - Previously Agreed One-Off Investment  
P - Previously Agreed Pressure  
S - Previously Agreed Saving  
NS - New Saving Proposal  
NP - New Pressure Identified