



**NOTE OF:** Public Health Task Group

**FOR:** Health and Adults Overview and Scrutiny Committee.

**TASK GROUP ON:** 27<sup>th</sup> August 2014.

**RE:** Briefing on delivery of Public Health.

---

**1. Purpose of the Task Group**

For Members of the Health and Adults Overview and Scrutiny Committee to note the mandated services within the Public Health Department and the plans in place for their ongoing effective delivery.

**2. Present**

Cllrs O’Keeffe, Foster, Smith and Humphrys.

**Also Present:** Dr Gifford Kerr-Consultant in Public Health, Dominic Harrison-Director of Public Health, Martin Eden Chief Officer support to the Committee, Ben Aspinall, Scrutiny Manager and Rebekah Mercer Scrutiny Support Officer.

**3. Background**

The Health and Adults Overview and Scrutiny Committee felt it beneficial to have an in-depth briefing on the effective delivery of Public Health to allow Members to understand the priorities of how the service will look going forward and requested a briefing from the Executive Member for Health and Adults on the work of the Public Health Department.

**4. Outcome of the task group meeting**

Dr Kerr, Consultant in Public Health, and Dominic Harrison, Director of Public Health delivered a presentation for Members explaining the statutory provisions Blackburn with Darwen Borough Council are responsible for under the new Public Health and Social Care Act 2012.

Dr Kerr gave a brief overview of Public Health and explained that the premise was to;

- Help people to stay healthy and protect them from threats to their health

- Enable people to make healthier choices, regardless of their circumstances, and seek to improve the health of the poorest fastest.
- Minimise the risk and impact of illness.

Dr Kerr outlined for Members the contributing factors known to influence health and health inequalities, and advised that the Department of Public Health estimated that only around 15-20% of inequalities in health could be directly influenced by health service interventions. He added that this emphasised that the core business of the Council had a greater impact on health than that of the NHS.

Members were informed that the three pillars of Public Health (Health Improvement, Health Care Quality & Value and Health Protection) were about influencing the wider determinants of health e.g. education, housing and employment - improving the places where people live, in its broadest sense.

Dr Kerr briefly explained the 22 lines of Council Public Health responsibility in 2013/14 and outlined the 5 services mandated by the Local Authority's Public Health Functions - 2013 Regulations;

- Sexual Health Services.
- Protecting the health of the local population.
- NHS health check assessment.
- Public Health advice service to CCG.
- Weighing and measuring of children.

Dominic advised the group that some parts of the 0-5 service would also be mandated on transfer of commissioning responsibility to the Local Authority in October 2015-though this was yet to be agreed.

Dominic informed Members that there were issues surrounding the word 'mandated' chosen by the NHS as the majority of the 22 lines of responsibility the Council were obliged to complete; though the 5 'mandated' services were statutory and must be looked at by law. In response to questions from Members, Dominic advised them that there was nothing to say what level of service was to be provided to each area.

Comments were made by Members raising concerns that a situation could arise from cutbacks to Public Health in neighbouring authorities to services which were still being provided by Blackburn with Darwen. It was questioned if this would lead to an influx of people from other boroughs using the Council's already limited resources. Dominic advised that this was a concern, and the department were trying to actively manage this. He explained that if people residing in another borough used a Blackburn with Darwen Public Health Service, then the cost would be re-charged to their own Council wherever possible.

Members raised questions as to whether there was funding available to take preventative measures, such as education of young people against drugs and alcohol abuse, fatty foods etc, to try to stop long term health issues from arising in the first place. Dr Kerr advised that although this was something being looked at, there must be an element in the Public Health service that includes treatment. Dominic added that responsibility may be given for more services than there was funding provided for, which created further difficulties in delivering effective provisions. He explained that there could be 48 new health visitors in the borough, though the department was still in negotiations as to the final figure.

Dr Kerr gave an overview of each mandated service, the purpose for them being mandated, who was to deliver the service and how the service had been developed to date and plans for the service going forward.

Dominic informed Members that many Public Health services had been inherited from the National Health Service; along with their pre-existing contracts. The department was reviewing the investment and performance of these inherited projects with a view to integrate areas with Council services where possible, re-design and re-tender services and raise new investments in areas that were underserved by Public Health.

Members questioned whether departments were working together to assist Public Health with the delivery of its mandated services, Dominic advised that there were plans to work with Culture and Leisure to invest in the Health and Wellbeing of the borough.

Comments were made by Members that some Public Health initiatives have been implemented for some time, such as disease prevention and healthy eating, but improvement seemed to be slow. Dominic advised that the odds are stacked against the department because of large, multi-national companies, selling products that were full of sugar and fats that were directly targeted to children. He explained that there needed to be education out in the communities, but the focus needs to be on the companies that were producing and selling the un-healthy products.

In response to concerns raised by Members about the increase in 'legal highs' being taken by young people, Dominic advised that as there was nothing illegal happening, it was very difficult to police and change attitudes towards such chemicals, but Public Health and the police were looking at a different approach; a sensible orientation of drug and alcohol use.

Members questioned if the battle was being won against obesity and drug and alcohol misuse. It was advised that this was a complex question as there were so many different areas to tackle. Dominic explained that the type of illegal drugs had shifted, and now there were no substitutes for drugs such as cocaine and ecstasy in the way that heroine could be replaced with methadone.

Dr Kerr informed Members that the risk of obesity and diabetes was high in people of South Asian and Afro-Caribbean origin and as Blackburn with Darwen had a high number of residents that fall into this demographic, there is a high level of such diseases within the borough. Dominic advised that some headway had been made with children as they were getting overweight slower in Blackburn with Darwen than in other boroughs but obesity was still an issue. Dominic concluded that things are getting better, but there was still a long way to go.

Dr Kerr informed Members of the plans for the effective delivery of the mandated services going forward:-

- Reviewing investment in, and performance of, contracts inherited from the NHS
- Assessment of unmet need
- Prioritisation against Health and Wellbeing Strategy
- Integration with existing Council services
- Re-specification, re-design and re-tendering
- New investments (since April 2013)

The meeting concluded with an aside from the Scrutiny Manager to inform Members that this was a private meeting at the moment, but should the outcome then be taken forward and made public, declarations of interest would need to be disclosed.

## **5. Next Steps**

That the presentation on the Effective Delivery of the Mandated Public Health Programmes be noted.

**Rebekah Mercer**  
**Scrutiny Elections and School Appeals Support officer.**