

Health, Housing and Adult Social Care Policy and Scrutiny Committee

Implementation of Recommendations from Public Health Grant Spending Scrutiny Review

Recommendation	Implementation as of December 2017
<p>i. Request the Director of Public Health undertake a detailed Health Impact Assessment of the anticipated impact on residents with a further report to Scrutiny to help inform the budget setting process for 2018/19 onwards.</p> <p>Reason: So that the Council can make informed decisions about how best to spend the public health grant to deliver improved public health outcomes for residents when the ringfence is removed in 2018/19.</p>	<p>A Health Impact Assessment of the impact to residents of the Vale of York CCG Prevention Strategy and changes to stop smoking support for residents has been completed and presented to Scrutiny. This has resulted in a review of the Council's provision for stop smoking support and changes to the policy to include the provision of Varenicline medication to eligible residents. The Executive Member for Adult Social Care and Health has requested a more detailed report on the YorWellbeing Service support to residents to be presented next year.</p> <p>Work has begun on a health needs assessment of sexual health and contraception across the city to inform the retendering of services in 2018/19.</p>
<p>ii. Ask the Executive to support the recommendation that the Director of Public Health develop a Public Health Strategy for the City that utilises a "Health in All Policies" approach.</p> <p>Reason: In recognition of the fact that the Council can only deliver its statutory responsibilities for public health by making</p>	<p>The work on developing a Public Health Strategy has been delayed due to the sickness absence of the Director of Public Health over the summer. This is now in progress and it is anticipated a draft strategy will be ready for consultation early next year.</p> <p>The Joint Health and Wellbeing Strategy for York does provide a useful framework for a city wide approach to health and wellbeing and implementation of the strategy is underway with</p>

<p>the task of improving the public's health everyone's business, at the core of the practice of the wider Council workforce whilst also working pro-actively with city partners such as education and voluntary sectors and empowering citizens as partners in improving health and wellbeing at the level of the individual, family and community.</p>	<p>oversight from the Health and Wellbeing Board. The Public Health Strategy will seek to complement and underpin the priorities outlined in the Health and Wellbeing Strategy which was developed through consultation with citizens and key partner agencies.</p> <p>In addition the One Planet York Decision Tool adopted by the Council is an integrated impact assessment which includes consideration of some health impacts, including health inequalities, which supports a Health in all Policies approach.</p>
<p>iii. The CYC Public Health Team are asked to strengthen their management of contracts and oversight of delivery of public health services against clearly defined performance and financial targets.</p> <p>Reason: So that the Council can be assured of value for money in the delivery of public health services and that the statutory responsibilities for public health are met.</p>	<p>An internal audit of the contract monitoring arrangements for public health commissioned services was undertaken in 2014/15 which gave an opinion of <u>Limited Assurance</u>. The interim Director of Public Health, on taking up appointment, requested a further audit to establish what progress had been made in addressing the gaps in assurance. This 2015/16 audit showed that risks had been identified, assessed and there were actions identified to mitigate those risks, including improvements in the quality of financial management and contract monitoring and workforce capacity but further action was needed.</p> <p>The permanent Director of Public Health was appointed in May 2016 and arranged for a follow-up internal audit to be undertaken by Veritau to review progress made and identify any further areas of weakness. The outcome of this 2016/17 audit was that an acceptable control environment is in</p>

operation with an overall opinion of Reasonable Assurance. The report acknowledged that good progress has been made but identified a number of areas for action to further strengthen processes including:

- Contract management arrangements are in place but these are not based on the Council's requirements, including formal assessment of risks.
- Minutes of meetings with suppliers do not clearly identify what the outcomes are and any actions arising from the meeting
- No formal and detailed reviews are undertaken during the life of the contract.
- Information to support the payment of invoices for cross-charging of GUM (Genito-urinary medicine) activity is not retained

The Public Health Senior Management Team has put an action plan in place to strengthen internal controls to address the issues raised and this is being implemented. The recent re-procurement of drug and alcohol services, for example, has a contract developed based on a recognised process within a wider CYC procurement, finance, legal and commissioning team approach.

Risks are included on the public health risk register which has oversight from Health, Housing and Adult Social Care DMT.

The work is ongoing and Scrutiny members will be kept

	<p>informed of outcomes through the quarterly finance and performance reporting arrangements already in place.</p>
<p>iv. That the Director Public Health is asked to show the impact of contract management on residents' lives. It would be useful for a simple summary to show the breakdown of where funding is allocated this year which could be a template for future years, along with specific outcome indicators.</p> <p>Reason: To ensure that members are assured about the level of contract management, that contracts are delivered against specific outcome indicators and that remedial actions are available if they are not.</p>	<p>All contracts for public health commissioned services include Key Performance Indicators and, as described in section iii above, processes are in place to capture activity, identify risks and put in place mitigating action as required.</p> <p>Service agreements are being developed for in-house public health services e.g. Yorwellbeing Service and Healthy Child Service with agreed KPIs so that value for money can be assured.</p> <p>Some public health outcomes are long term and it can take some years before benefits are shown. Population level outcomes are monitored through the Public Health Outcomes Framework and we regularly benchmark our performance against regional and national average and cluster local authorities. Public Health England has produced a scorecard of key indicators to facilitate this process.</p> <p>A simple table showing a breakdown of all the contracts listed on the public health contracts register is attached. This has been developed in conjunction with finance and procurement and is monitored on a quarterly basis.</p>