

Budget Proposals 2022/23

Service Area	Revenue Budget £
Population Health	14,072,491
Grand Total	14,072,491

Purpose of the Directorate:

Our purpose is to improve and protect the health and wellbeing of people living and working in Tameside. We work closely with partner organisations to understand and address the wider issues that influence people's health locally:

- Provide public health leadership, information, advice and understanding to enable decisions that are based on people's need and what is effective.
- Commissioning and monitoring key Public Health statutory and non statutory services and functions.
- Using public health intelligence to survey and assess the population's health and wellbeing.
- Deliver programmes of Health promotion, Health protection, healthcare public health, determinants of health, health communication.

Vision and key priorities:

- Improve population health and wellbeing and reduce inequalities.
- Lead, develop and implement the Borough response to COVID-19 via the Outbreak Management Plan, Test, Trace and Isolate and vaccination programme.
- Support for Tameside Starting Well priorities and development of CYP Plan, developing co-located children's neighbourhood teams, integrated 0-19 services with a particular focus on infant mortality, breastfeeding, child health speech, language and communication needs and school readiness.
- Development of integrated specification for 0-19 Healthy Child Programme.
- Delivery of a new Health Improvement offer with in house team– increasing our focus on tobacco control and asset based community development.
- Tackling Substance Misuse issues across the population including via the specialist treatment service – developments this year include Tameside Drug Related Death Panel, FASD Diagnostic Pathway, Reflect and Reconnect Programme for Criminal Justice and drug harm reduction to be sustained, Substance Misuse Community and Neighbourhood Model implementation.
- Improving sexual health outcomes across the system including a new open access integrated sexual health service Locala.
- Taking a strategic lead role in tackling Domestic Abuse across Tameside.
- Delivery of Sustainable Food Strategy and partnership action plan.
- Delivery of Age Friendly Communities Strategy and action plan, including Ageing in Place programme.
- Take action to address health inequalities and wider determinants of health by reducing the impact of environmental factors on health such as air quality and the built environment.
- Provide specialist support to the wider health and social care system and GM ICS to embed a preventative approach.
- Continue to work with directorates across the Council and ICS in the design of joint commissioning processes, including across Greater Manchester.

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Services Delivered (D = delivered; C = commissioned)

- Public Health support and advice to wider system (D)
- Health Protection (D): oversight/assurance & local co-ordination of COVID response, responding to outbreaks, establishment of testing strategy, local contact tracing, communications(80% of team capacity has focused on this work area)
- Coordination and leadership of the annual flu vaccine campaign (D)
- Health Improvement programmes (D& C): physical activity, smoking cessation/ weight management, oral health
- Integrated specialist substance misuse treatment service (C)
- Integrated Sexual Health service (C)
- Contribution to Domestic Abuse support services and strategic leadership (D & C)
- General Practice Locally Commissioned Services (C): smoking cessation; weight management; LARC; chlamydia screening; health checks
- Starting Well Programme - Healthy Child Programme – Infant feeding, Health Visiting, FNP and School Nursing (C), Early Years/Early Help, Neighbourhood Model, Early Attachment and CYP Emotional Health and Wellbeing
- Public Mental Health Programme (D & C) and Ageing Well Programme (D&C)

Achievements and Successes 2021/22:

- Delivery and leadership of COVID-19 response – Containing Covid, SPOC, outbreak management, testing programme and contact tracing, vaccination programme (80% of team capacity has focused on this work area)
- Successfully maintained client and commissioning lead for Leisure Services and capital programme (Active Tameside) handing over to Growth Directorate – ensure the resilience of these services going forward.
- Delivery and commissioning of all statutory functions for public health
- Completion of CYP needs assessment, and recommissioning of breastfeeding peer support, home visiting/Peer SupportImproved up take of Healthy Start Scheme, launch of new CYP Emotional and Mental Wellbeing Community Offer
- Recommissioning of new sexual health service provider Locala
- New governance process with new DA Steering Group and Operational Group – developed, agreed and delivered commissioning plans throughout 21/22 and 22/23 to meet our statutory obligations under the DA Bill; conducted in depth finance and needs assessment work; launched a new Domestic Abuse Strategy for Tameside.
- Secured additional (grant) funding for public health programmes including Substance Misuse, weight management for adults and children and Domestic Abuse
- Alcohol Exposed Pregnancy Programme – sustained and embedded Prevention Delivery Model working with CGL, Woman and Families Centre and STARS Team, Hidden Harm needs assess completed, redesign of CYP Branching Out, Concerned Others and PIPS services
- Scaled up tobacco programme with successes in reduced prevalence and smoking in pregnancy
- Ageing Well events in PCNs, Nutrition and Hydration programme delivered, Ageing in Place and Age Friendly Champions
- Securing of £309K additional funding for football in Hattersley and appointment of Project Manager, £50k funding for school cycling, new cycling and walking schemes (£80k) and Pavement Games

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How is the service performing?

Progress against key public health outcomes is monitored nationally and regionally via the Public Health Outcomes Framework (www.phoutcomes.info). Examples are below:

- Life expectancy at Birth has been improving year on year for the past two decades across Tameside but is still significantly lower than the England average
- Significant reductions in Smoking in Pregnancy at a faster rate than GM or nationally, to 10.2% in 2020/21
- Infant Mortality lower than regional and England average

Individual service level KPIs

- Lead for delivery of local and mobile testing sites, consistent high levels of testing Delivery of local contact tracing and support for high risk settings – high levels of engagement with hard to reach residents
- Support and effective management of over 500 outbreaks across schools, workplaces, care homes
- Training in infection control, covid guidance and risk assessment to all early years settings, schools, care homes and domiciliary care providers in the Borough
- Excellent performance (best in GM) within child immunisations school aged immunisations
- Significant increase in attracting external funding into the Council

Spend Analysis	Revenue Budget £
Expenditure	
Employees	2,073,991
Transport Related Expenditure	4,100
Supplies and Services	11,803,060
Recharge Expenses	899,590
Capital Items & Reserve Movements	(27,090)
Third Party Payments	228,950
Premises Related Expenditure	1,000
Expenditure Total	14,983,601
Income	
Other Income	(112,040)
Recharge Income	(50,000)
Other Grants Reimbursements and Contributions	(38,640)
Customer and Client Receipts	(160)
Government Grant Income	(710,270)
Income Total	(911,110)
Grand Total	14,072,491

How does the service support regional/national priorities or requirements?

- Deliver local authority response to Covid-19 and contain and manage the pandemic (Lead DPH for GM – schools)
- Provide GM Public Health leadership via GM DsPH and subgroups
- Supports the Health Economy in delivery of the NHS Operational plan priorities
- Delivers on subregional priorities and strategies, eg GM Population Health priorities and strategies, GMCA, GM Health and Social Care Partnership
- Leads on the delivery and implementation of national policy
- Lead Authority on the development, delivery, implementation and evaluation of the Alcohol Exposed Pregnancy Programme - Lead Authority across GM for BBV and Hepatitis C

Appendix 10 Director of Population Health Budget Proposals

What are the key challenges and priorities for 2022/23 and beyond?

- Continue to respond to surges, managing the Covid pandemic and response, and deliver 'BAU' public health functions and commissions
- Identifying and responding to the impact and inequalities caused by the pandemic on our communities
- Manage and deliver the public health work programme effectively with reduced senior capacity
- The continued need to identify further efficiencies and savings continues to present challenges within a reduced programme capacity and the need to further prioritise the overall work programme.
- Embed Public and Population Health within GM ICS, integration and the co-location of health and social care servicing relating to children, young people and families.
- Review the Health Protection function to ensure pathways, roles and responsibilities are optimised
- Embed Health Improvement Services (smoking and healthy weight) within current team structure
- Monitoring of new commissions to meet statutory requirements under DA bill
- Deliver and commission programmes to deliver on the ambitions across life course areas of the corporate plan
- Promoting Health in All Policies including supporting the further development of the Healthy Spaces/ Clean Air agenda
- Launch of redesigned sexual health service including a focus on community-based provision

What does the service need to do to deliver the corporate priorities?

- Continue to deliver high-quality Population Health advice and support to the system, to ensure that health and prevention are at the core of plans
- Prioritise action to contain Covid – refocus public health capacity and resources
- maintain a focus on those experiencing the poorest health outcomes through the services we commission and our work with local partners
- Continue to provide universal services for children and adults to support all council priorities.

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How will the service measure success?

Success can be measured through delivery of our key services and functions, and evidenced through the Public Health Outcomes Framework (PHOF) and the key metrics outlined in the corporate plan.

What challenges and risks is the service facing?

- Capacity and resources to manage the Covid pandemic and required public health response
- Outbreak responses and specialism of team in sort supply – high workloads
- Impact of austerity on public services and health status
- Working to reduce the health gap and inequalities
- Making the case for prevention - Well-chosen interventions implemented at scale, help avoid poor health, reduce the growth in demand on public services, and support inclusive economic growth.
- The continued need to identify further efficiencies and savings continues to present challenges within a reduced programme capacity and the need to further prioritise the overall work programme.
- Impact of Covid across the life course
- High demand in services and flexible service delivery need

Statutory or legislative obligations

The local authority statutory duties for public health services are mainly outlined in the Health and Social Care Act 2012 legislation. They include the duty to improve public health through mandated and non-mandated functions.

Savings 2022/23

Scheme	Saving Forecast - Incremental				
	2022/23 £000	2023/24 £000	2024/25 £000	2025/26 £000	2026/27 £000
Review of NHS Commissioned Contracts	500	0	0	0	0
Health Improvement Recommissioning	93	0	0	0	0
Population Health Staffing changes	12	0	0	0	0
Review of all commissioned contracts	40	0	0	0	0
Drug and Alcohol Services (CGL)	0	66	0	0	0
	645	66	0	0	0

Pressures 2022/23

Nature of Pressure	Description of pressure	Pressures Forecast - Incremental				
		2022/23 £000	2023/24 £000	2024/25 £000	2025/26 £000	2026/27 £000
Inflationary Pressures	Pressure for part year savings - Drugs & Alcohol contract	0	34	0	0	0
Inflationary Pressures	ICFT Community Services contract inflation	200	200	200	200	0
Staffing related cost pressure	Cost of salary increases (pay award and pay increments)	50	37	37	38	39
		250	271	237	238	39