



Health and Wellbeing Board

Date: WEDNESDAY, 23 JANUARY 2013
Time: 1.45 pm
Venue: COMMITTEE ROOM, WEST WING, GUILDHALL

5. **PUBLIC HEALTH GRANT ALLOCATIONS AND COMMISSIONING INTENTIONS**
Report of the Director of Community and Children's Services.
6. **CITY AND HACKNEY HEALTH PROTECTION COMMITTEE AND THE NEW HEALTH EMERGENCY PLANNING AND RESPONSE ARRANGEMENTS**
Joint report of the Town Clerk and the Director of Community and Children's Services.

Item received too late for circulation in conjunction with the Agenda.

John Barradell
Town Clerk and Chief Executive

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Agenda Item 5

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| Committee | Date(s): |
| Health and Wellbeing Board | 23 Jan 2012 |
| Subject: Public Health Grant Allocations and Commissioning Intentions | Public |
| Report of: Director of Community and Children's Services | For Information |
| Summary <p>This report advises members about the transfer of public health functions and related funding from primary care trusts to local authorities, effective from April 2013. It sets out the levels of transferred funding the City of London Corporation (CoLC) is expected to receive in 2013/14 and 2014/15 and the current position on the commissioning arrangement for the transferred public health contracts which CoLC will be responsible for.</p> | |
| Recommendation(s) <p>Members are asked to:</p> <ul style="list-style-type: none">• Note the report and the City of London Public Health Allocation for 2013/14 and 2014/15• Note the requirement to delegate authority to the Town Clerk and Chairman and Deputy Chairman of the Community and Children's Services at paragraph 15. | |

Main Report

Background

1. From April 2013 public health functions and related funding will transfer from primary care trusts (PCTs) to upper and single tier authorities. Local authorities will have a duty to take appropriate steps to improve the health of their population, funded through a ring-fenced grant, and will take the lead for improving the health of their local population and reducing health inequalities.
2. Funding is ring-fenced and can only be used for public health functions, although it may be applied to revenue or capital spend (with the exception of items requiring borrowing) or pooled. Spending must be reported quarterly against 18 categories of contractual spend.
3. Baseline estimates of how PCT funding might be spent under the new commissioning arrangements were published in February 2012 to help local authorities and clinical commissioning groups plan for the transfer of functions. The City of London has a number of shared public health contractual commitments with the London Borough of Hackney. Officers have

been working with Hackney and NHS North East London and the City PCT cluster (NELC) to establish the predicted spend for 2012/13 and estimates for 2013/14 across all contracts transferring to the City of London. The transfer is being overseen by the City and Hackney Public Health Transition Board

Current Position

Funding allocation

4. The ring-fenced funding allocations for local authorities were announced on 10 January 2013 by the Department of Health.
5. The level of public health grant for next year and estimates for the following year for the City of London are as follows; figures for Hackney and the whole of London are shown for comparison:

| | City of London | LB Hackney | London |
|-----------|----------------|-------------|--------------|
| • 2013/14 | £1,651,400 | £29,005,400 | £553,000,000 |
| • 2014/15 | £ 1,697,600 | £29,817,500 | £578,000,000 |

6. The level of grant allocated to the City of London for the next two years is higher than originally expected and exceeds the funding currently required for the public health contracts transferring to the City in 2013/14. The value of all contracts currently delivered by NHS NELC which are transferring to CoLC and Hackney is approximately £24m.

Commissioning framework for contracts

7. Officers have been working closely with the City and Hackney Public Health Transition Board to assess the volume of functions and services currently delivered and to develop a commissioning framework to ensure an effective transfer of responsibility from NHS NELC to CoLC and LB Hackney in April 2013.
8. Services will continue to be provided under contract by a range of providers including GP practices, pharmacies, hospitals, City and Hackney Substance Misuse Partnerships, and by a wide range of community and voluntary services. Services provided currently include:
 - Alcohol and drug misuse
 - Immunisation
 - HIV and sexual health
 - Smoking cessation
 - Dental health
 - Health checks and health improvement
 - Nutrition, obesity and physical activity
 - Prevention, detection and infection control
 - Mental health

Contracts for these services have now been valued and categorised according to local need and specific commissioning requirements. Contracts will be commissioned through four commissioning 'strands' as set out in the following paragraphs.

Hackney-only contracts

9. These contracts are for services currently being delivered for specific communities or geographical areas in which CoLC has no identified responsibility, need or interest. Services in this strand include, for example, screening services for the Jewish community and smoking cessation for the Turkish community. LB Hackney will have sole responsibility for funding and managing these services.

Hackney 'Lead' contracts

10. Contracts for these services will be commissioned and managed by LB Hackney on behalf CoLC. The majority of CoLC public health contracts will be commissioned and delivered under this arrangement. The arrangement will allow CoLC residents to use these services and will require a service level agreement (SLA) setting out CoLC requirements and expectations to allow officers to monitor and evaluate services provided to City residents. The latest estimate of the total value of these contracts is £637,281. CoLC will transfer 5.3% of the contract cost to Hackney for which will include 3% administration and management fee. Services in this strand include many of the larger programme contracts delivered by providers such as GPs, the Homerton Farndale Trust and the community and voluntary sector. They include, for example, programmes for smoking cessation and obesity, and services for sexual health and mental health.

CoLC-only contracts

11. These contracts will be for services specific for City residents only and delivered by CoLC or providers already known to and working in and for CoLC. They include drugs misuse services provided by City Substance misuse Partnership, physical exercise referrals from the Neaman GP practice by Fusion, and the City Fair start programme run by Toynbee Hall in Portsoken Ward providing health/obesity reduction services. The latest estimate of the total value of these contracts is £274,571.

Partnership contracts

12. This strand includes services which require the the development of a partnership arrangement arrangement or a new between CoLC and the provider. It includes services such as smoking cessation, some of which will be delivered under the Hackney 'lead' strand (see paragraph 10), but where the CoLC requires a different approach or arrangement to be developed - for example a specific smoking cessation programme aimed at City workers with Queen Mary's hospital or the provision of a higher number of health checks in partnership with local pharmacies or voluntary organisations in the City. Work is continuing to determine the precise requirements and best delivery arrangements for these services. The latest estimate of the total value of these contracts is £75,973.

Total contract and other costs

13. The total costs to the City of providing the public health services as set out above is currently estimated at £987,825. Other costs associated with the transfer of responsibility for public health such as staffing costs for commissioning officers, CoLC contribution to the director of public health post and clinical support, and contract management fees payable to LB Hackney are estimated at approximately £210,000. These costs can be contained within the overall funding allocation for CoLC for 2013/14 .

Implications

14. The City Comptroller and LB Hackney will need to establish an overarching legal agreement providing for flexible joint commissioning arrangements between CoLC and LB Hackney for the delivery of the Hackney Lead and Partnership contracts. CoLC, LB Hackney and the CCG will also require an agreement for the management of the wider clinical, regional, and pan-London contracts over the longer term
15. Members are asked to note that the Health and Well Being Board will need seek permission from Community and Children's Services in accordance with standing order 41b, to delegate authority to the Town Clerk and Chairman and Deputy Chairman to enter into contractual and other legal agreements as are necessary to give effect to the transfer of public health contracts by that date to implement these contractual arrangements from 1 April 2013.

. Appendices

None

Background Papers:

Report to Health and Well Being Board: Public Health Contracts Transition Update
7 November 2013

Neal Hounsell

Interim Director of Community and Children's Services
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Agenda Item 6

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|--|------------------------|
| Committee(s): | Date(s): |
| Shadow Health and Wellbeing Board | 23 January 2013 |
| Subject: City and Hackney Health Protection Forum and the new health emergency planning and response arrangements | Public |
| Report of: Town Clerk and Director of Community and Children Services | For Information |
| Summary <p>The purpose of this report is to update the Health and Wellbeing board on the current changes to the health emergency planning and response arrangements as they relate to the City of London. This report includes details of the City and Hackney Health Protection Forum, which is an evolution of the well-established City and Hackney Multi Agency Pandemic Flu Planning Group.</p> | |
| Recommendation(s) <p>Members are asked to:</p> <ul style="list-style-type: none">• Note the contents of this report and support the formation of the City and Hackney Health Protection Forum.• Note the evolving role of Health and Wellbeing Boards with regards to emergency planning and emergency response as the system evolves over time. | |

Main Report

Background

1. Health emergency planning is the mechanism by which relevant bodies (such as local authorities, NHS providers, etc.) plan how to deal with emergencies affecting the health of the population, for example flu pandemics, outbreaks of illnesses or heatwaves.
2. To coincide with the changes in relation to public health that will come in force in April 2013, new arrangements for health emergency planning and response are being put in place. New bodies such as the Clinical Commissioning Groups (CCGs) and the NHS Commissioning Board (NHSCB) will have a duty to cooperate with local authorities in respect to health emergency planning and response. In order to put this into practice, the Department of Health has suggested that local authorities create a local forum to facilitate this.
3. At present, the City of London (jointly with the London Borough of Hackney) operates a multi-agency forum called the City and Hackney Multi Agency Pandemic Flu Planning Group. This group was originally created to plan and support the response to an Influenza pandemic and demonstrated its

effectiveness during the response to the 2009 flu pandemic. This group has since expanded its remit to cover the full scope of health emergency planning. It is anticipated that this group will continue its good work and transition to a new "City and Hackney Health Protection Forum".

Current Position

4. The new arrangements for health emergency planning and response will begin to take shape soon. In preparation for this, the Public Health Team in the NHS North East London and the City cluster, guided by the current Director of Public Health (Dr Lesley Mountford) will begin to design and develop the concept of a Health Protection Forum, in conjunction with the local Contingency Planning Teams for the City of London and the London Borough of Hackney.
5. The aim of the Health Protection Forum will be to plan and coordinate the activities of the City of London Corporation and the London Borough of Hackney, and local NHS partners, in respect of any direct or indirect threat to the health of the population of the Square Mile or the Borough of Hackney.
6. NHS North East London and the City Local Public Health Team will convene a workshop on 22 January 2013 to inform all partner organisations of the changes during the Public Health transition and beyond and to ensure they all understand their roles and responsibilities during a health emergency. At this workshop, the organisers will seek to help stakeholders to identify their roles and responsibilities within the new arrangements for Health Protection and discuss the terms of reference and purpose of the Health Protection Forum.
7. This will be achieved using a scenario-based table-top exercise, exploring the contributions and links between local authority service areas and key health partners in delivering Health Protection.
8. Following this workshop, a group will analyse the outcomes to confirm the final membership, structure and terms of reference for the Health Protection Forum.
9. We expect to be in a position to convene the first Health Protection Forum Meeting in March 2013. This will be followed by an agreed communications strategy to advise the wider community of the establishment of the Health Protection Forum and its purpose.

Objectives

10. To achieve this, the initial objectives for the Committee will be to:
 - assess risks to the health of the local population
 - prioritise those risks and develop plans to prevent, mitigate and manage them
 - act as the single authoritative body within Hackney and the City of London on matters relating to Health Protection
 - act as the principle group convened to support the locality response to any health-related incident that threatens the population of City and Hackney

- ensure Health Protection is incorporated into the ways of working of all Departments and service areas across Hackney and the City of London Corporation, through active engagement and education of staff
- ensure that Health Protection issues are raised in the appropriate internal and external fora, including the Local Health Resilience Partnership, the City of London Resilience Forum and the Hackney Borough Resilience Forum
- ensure that plans set out the key arrangements needed to respond to incidents and events, including the release of clinical resources, handover protocols, and clearly defined roles and responsibilities
- provide a forum for effective multi-agency working with the City of London Corporation, the London Borough of Hackney, the Clinical Commissioning Groups, Commissioning Support Services, Health and Social Care Providers, National Commissioning Board and Public Health England
- ensure clear lines of communication in planning and response with multi-agency partners

Accountability

11. The Health Protection Forum will be chaired by the Director of Public Health, or nominated Deputy, and will report to the Health and Wellbeing Boards in both the City of London and the London Borough of Hackney.

Key relationships

12. The Health Protection Forum will need to establish effective working relationships with the following:
 - All internal Directorate and Service Areas concerned with health protection in the City of London and Hackney
 - Local Clinical Commissioning Group and Support Unit
 - Local Public Health England Unit
 - NHS Commissioning Board Local Area Team
 - City of London Resilience Forum and Hackney Borough Resilience Forum
 - London Local Health Resilience Partnership
 - Equivalent bodies in neighbouring Boroughs

Additional Membership

13. The following agencies are also to be represented at the committee:
 - London Ambulance Service representative
 - Voluntary sector representative
 - NHS Provider Organisations
 - City of London Police

- British Transport Police
- Metropolitan Police Service
- London Fire Brigade
- Other organisations as may be required

Proposals

14. That the Health and Wellbeing Board notes the contents of this report and supports the formation of the City and Hackney Local Health Protection Forum.
15. That the Health and Wellbeing Board notes their evolving role with regards to emergency planning and emergency response as the system evolves over time.

Appendices

- Appendix 1 – Diagrams showing health and local authority emergency planning and response arrangements

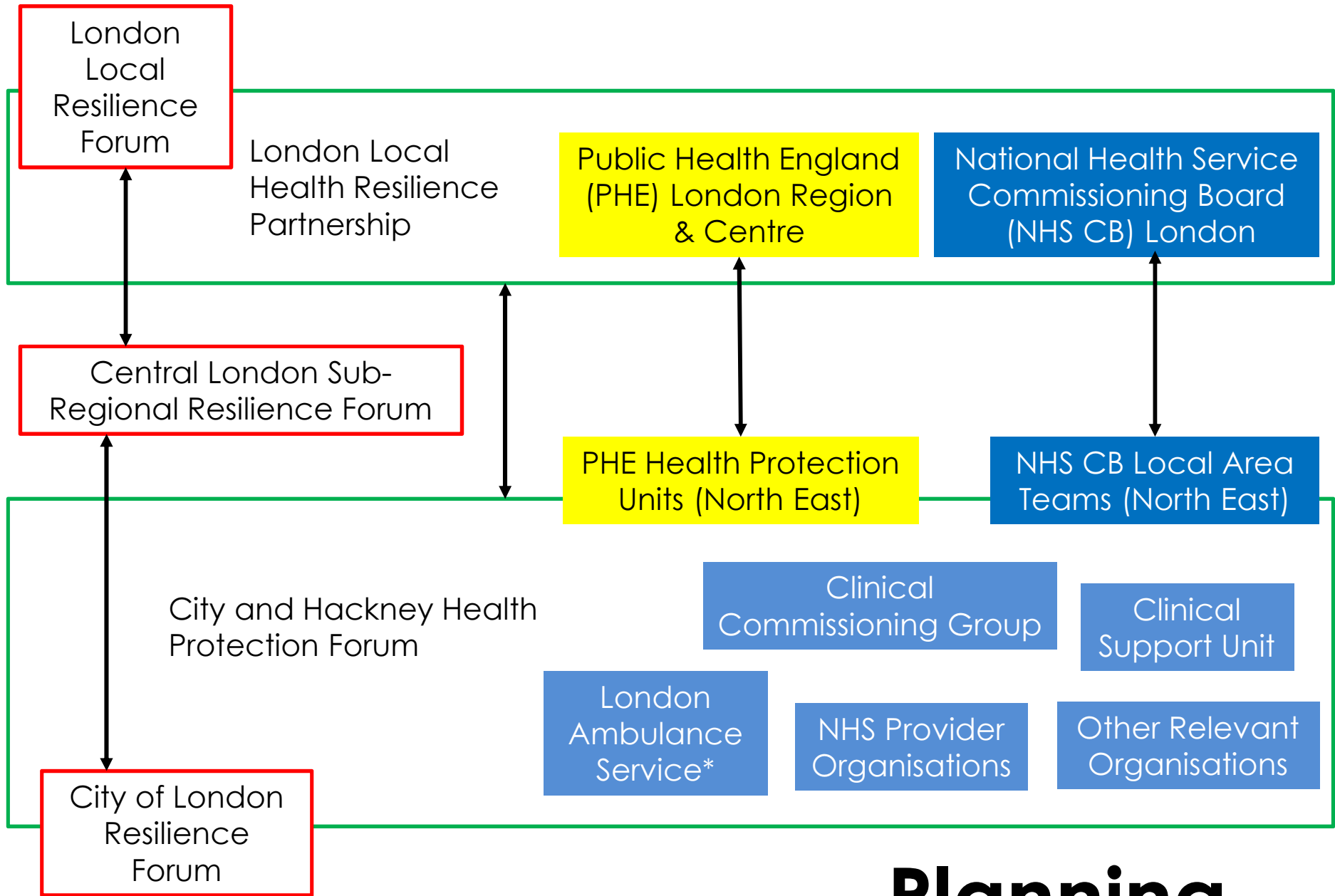
Néstor A. Alfonzo Santamaría

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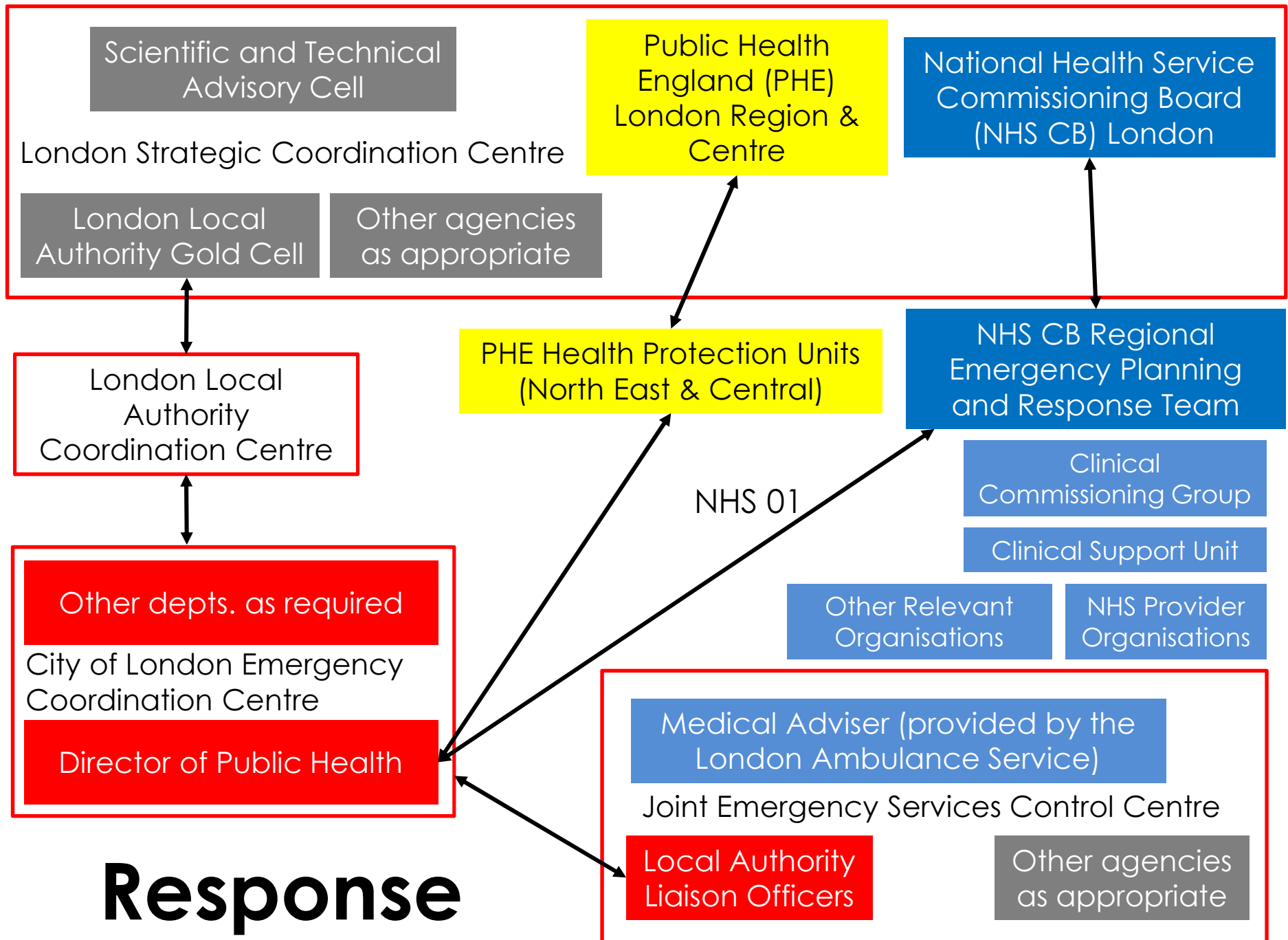
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**Appendix 1 – Diagrams
showing health and local
authority emergency planning
and response arrangements**



Planning



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