

# Public Health Commissioning Strategy and Framework 2022/23

## Introduction

Nottingham City Council has a duty to improve the health and wellbeing of the population, namely the council 'must take such steps as it considers appropriate for improving the health of the people in its area'<sup>1</sup>. This means that the council should pay regard to the evidence of need and identify services, approaches or interventions to improve health outcomes and address inequalities.

To support this duty, a Director of Public Health (DPH) is appointed jointly by the Council and Secretary of State for Health and Social Care. The DPH is accountable for the delivery of their authority's public health duties and is an independent advocate for the health of the population and provides leadership for its improvement and protection. The DPH is a statutory chief officer of their authority and the principal adviser on all health matters to elected members and officers, with a frontline leadership role spanning all three domains of public health - health improvement, health protection and healthcare public health. They have a vital leadership role for system-wide efforts to secure better public health<sup>2</sup>.

The DPH has a number of statutory responsibilities<sup>3</sup>, including:

- all of their local authority's duties to take steps to improve the health of the people in its area
- any of the Secretary of State's public health protection or health improvement functions that s/he delegates to local authorities
- exercising their local authority's functions in planning for, and responding to, emergencies that present a risk to the public's health
- their local authority's role in co-operating with the police, the probation service and the prison service to assess the risks posed by violent or sexual offenders
- such other public health functions as the Secretary of State specifies in regulations and under dental public health powers.

To support these responsibilities, the DPH is responsible for a public health grant. The level of the grant is set by the Treasury and is ring-fenced for specific uses. In 2021/22, Nottingham City Council has been allocated £34,400,364 for public health services, with an additional £89,535 for Pre-Exposure Prophylaxis (PrEP) for HIV. Since transferring to local government in 2013, there has been a real term reduction in the grant.

The council needs to demonstrate that the public health grant has been used to improve the health and wellbeing of the population in line with evidence of need and in accordance with the legislative and requirements set out in the grant determination letter<sup>4</sup>. These requirements use the public health domains of health improvement, health protection and healthcare public health with the addition of tackling the wider determinants of health (see figure 1).

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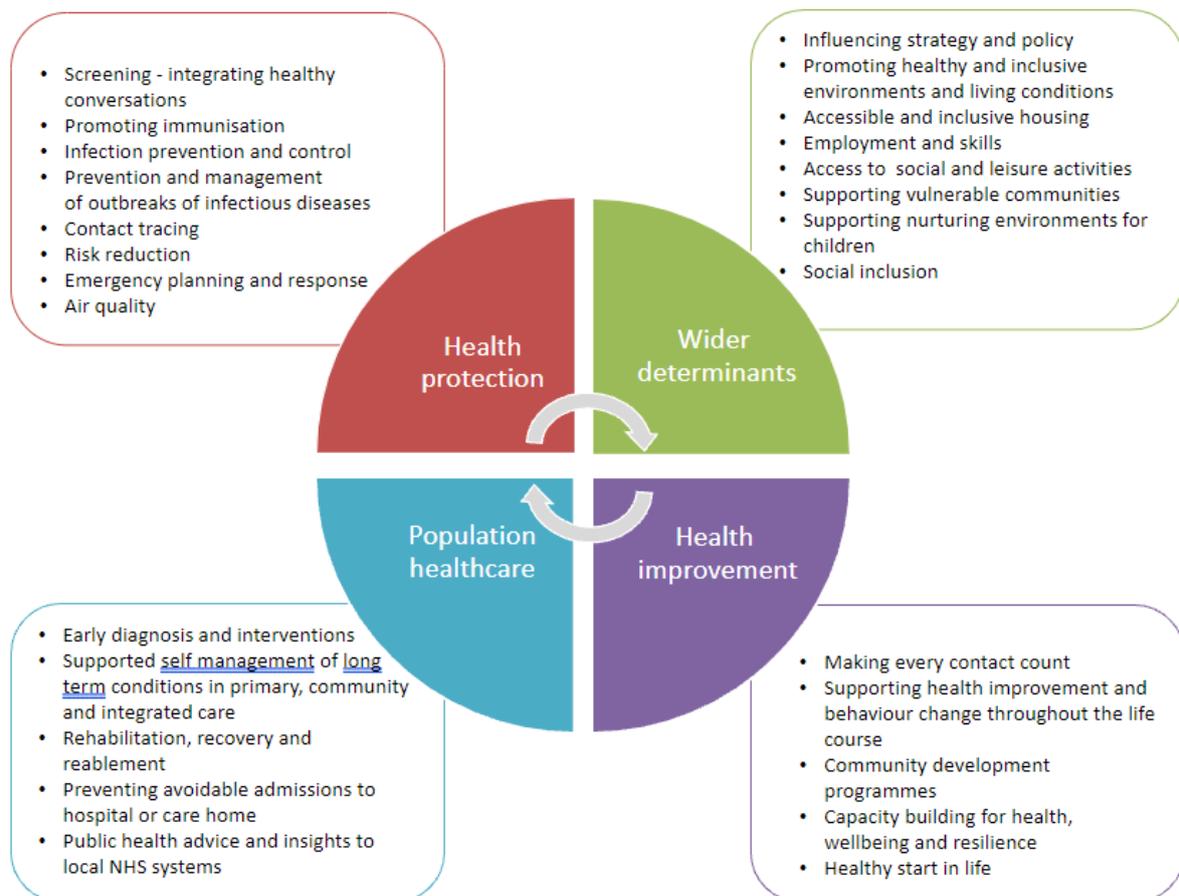
<sup>1</sup> Section 2B of the National Health Service Act 2006

<sup>2</sup> [Directors of public health in local government: roles, responsibilities and context \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/92422/directors-of-public-health-in-local-government-roles-responsibilities-and-context.pdf)

<sup>3</sup> section 73B(5) & (6) of the National Health Service Act 2006

<sup>4</sup> [Public health ring-fenced grant 2021 to 2022: local authority circular - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/92422/public-health-ring-fenced-grant-2021-to-2022-local-authority-circular.pdf)

Figure 1: Model of public health<sup>5</sup>



## Purpose

The Public Health Commissioning Strategy and Framework sets out the approach and key priorities (intentions) for the expenditure of the public health grant in 2022/23. It outlines how the council will assure that:

- The public health grant is spent in support of strategic priority areas
- Expenditure is demonstrably in line with the grant determination requirements
- Governance processes are robust and adequate
- Public health outcomes are reviewed and monitored

<sup>5</sup> [UK AHP Public Health Strategic Framework 2019-2024.pdf \(ahpf.org.uk\)](https://www.ahpf.org.uk/public-health-strategic-framework-2019-2024)

## Strategic Commissioning Objectives

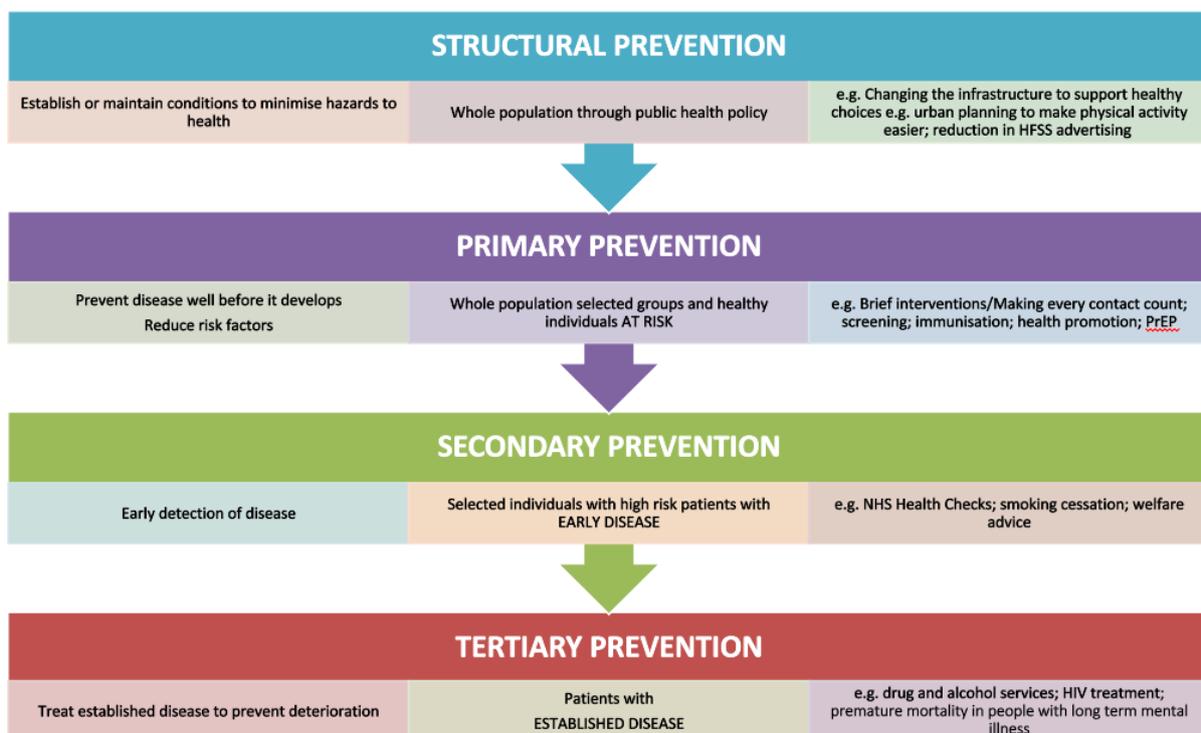
Improvement to the health and wellbeing of the population is delivered through a combination of interventions, including provision of expert advice, understanding the needs of the population, influencing system policy and developing collaborative and integrated approaches. Commissioning is a tool that can be used to effectively and efficiently deploy resources to ensure that wider system outcomes are met.

In 2022/23, Nottingham City Council will commission public health services with a focus on primary prevention. Focusing on prevention will support residents to make healthier choices and reduce the risk of developing health conditions that may reduce healthy life expectancy. The model used in Nottingham focuses on delivering services across the four levels of prevention, as shown in figure 2. In addition to commissioning for prevention, the Public Health Team will look for opportunities to incorporate prevention in other internal and partner services, through the provision of expert advice, funding and integration.

Nottingham City Council will focus commissioning to support the following key strategic objectives:

- Advocate and implement a prevention approach
- Reduce the health inequalities gap in Nottingham
- Support the residents of Nottingham to live longer, and healthier lives
- Targeted interventions to the most vulnerable to keep them safe, supported and healthy
- Commission for outcomes, not outputs

Figure 2: Levels of public health prevention interventions

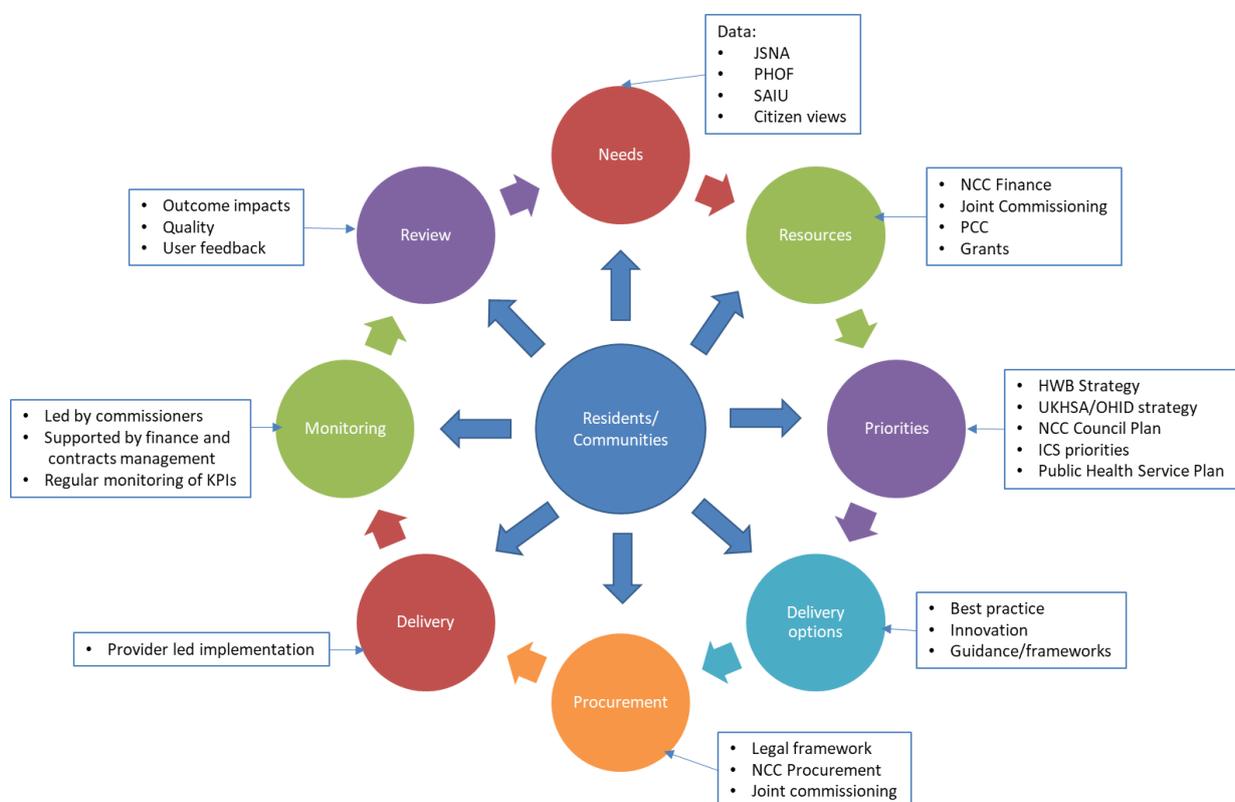


## Strategic commissioning cycle and principles

Commissioning is the strategic activity of identifying need, allocating resources and procuring a provider to best meet that need, within available means<sup>6</sup>. Strategic commissioning should be firmly based in engagement and co-production with communities and be based on evidence of need, for example through health needs assessments. Commissioning intentions should be guided by available resources and strategic priorities. In public health terms, it is important that equity of provision and tackling inequalities are built into the approach.

Specialist procurement advice is needed to ensure that contracts are awarded in line with internal and national legal requirements. Ideally, public health contracts should be focused on delivering improved outcomes (changes in people's lived experience) and use key performance indicators to understand progress and impact.

Figure 3: The Strategic Commissioning Cycle



Where the public health grant is invested in internal council services, formal contracts may not be required. These investments will be supported by service level agreements that demonstrate the contribution to improving outcomes and are reviewed at least annually.

The Nottingham City Council Public Health Team will apply to following principles to strategic commissioning activities:

- Based on robust evidence base of need, valuing lived experience and resident voice
- Led by subject matter experts
- Guided through engagement and co-production with service users, residents or communities

<sup>6</sup> [Understanding Commissioning \(local.gov.uk\)](https://www.local.gov.uk/understanding-commissioning)

- Based on a prevention approach (see strategic objectives) and reducing inequalities, focused on developing upstream interventions
- Seek opportunities for integration and joint commissioning with partner agencies to maximise benefits for residents and use of public funds
- Assessment of value for money and opportunities for social value
- Balance the need for stability of provision (for providers and service users) alongside the needs to retain flexibility and responsive to changing needs and context.

## Social Value

The Public Health Commissioning Strategy and Framework will adopt commitments within Nottingham City Council's Procurement Strategy (2018-2023) to ensure the Council's purchasing power is used to secure the best possible value and outcomes for Nottingham and its citizens. This includes consideration of the economic, social and environmental factors (all of which are wider determinants of health and wellbeing) throughout the commissioning and procurement cycle.

## National strategic drivers

Commissioning decisions will take into account:

- National Health Service Act 2006
- Health and Social Care Act 2012
- Health and Care Bill
- PHE Strategy 2020-2025 (or if UKHSA/OHID successors)

## Local strategic drivers

Commissioning decisions will take into account:

- Health and Wellbeing Board Strategy (currently being revised)
- Nottingham City Council Corporate Plan
- Nottingham JSNA
- Nottingham & Nottinghamshire ICS inequalities strategy

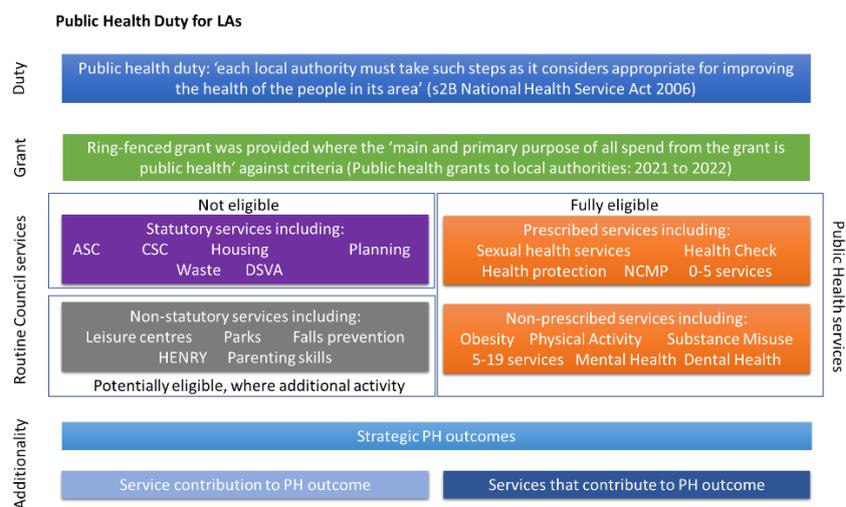
## Principles of public health grant allocation

Nottingham City Council receives a ring-fenced grant was provided where the 'main and primary purpose of all spend from the grant is public health'<sup>7</sup>. The DPH and Chief Executive/s151 officer have to confirm that expenditure of the grant is in line with the grant determination criteria (see appendix 1). The public health grant will be used to support a breadth of services against strategic outcomes to ensure equity of access, cover different levels of prevention and reduce inequalities.

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<sup>7</sup> [Public health ring-fenced grant 2021 to 2022: local authority circular - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/98481/public-health-ring-fenced-grant-2021-to-2022-local-authority-circular.pdf)

Figure 4: Legislative model for public health grant expenditure



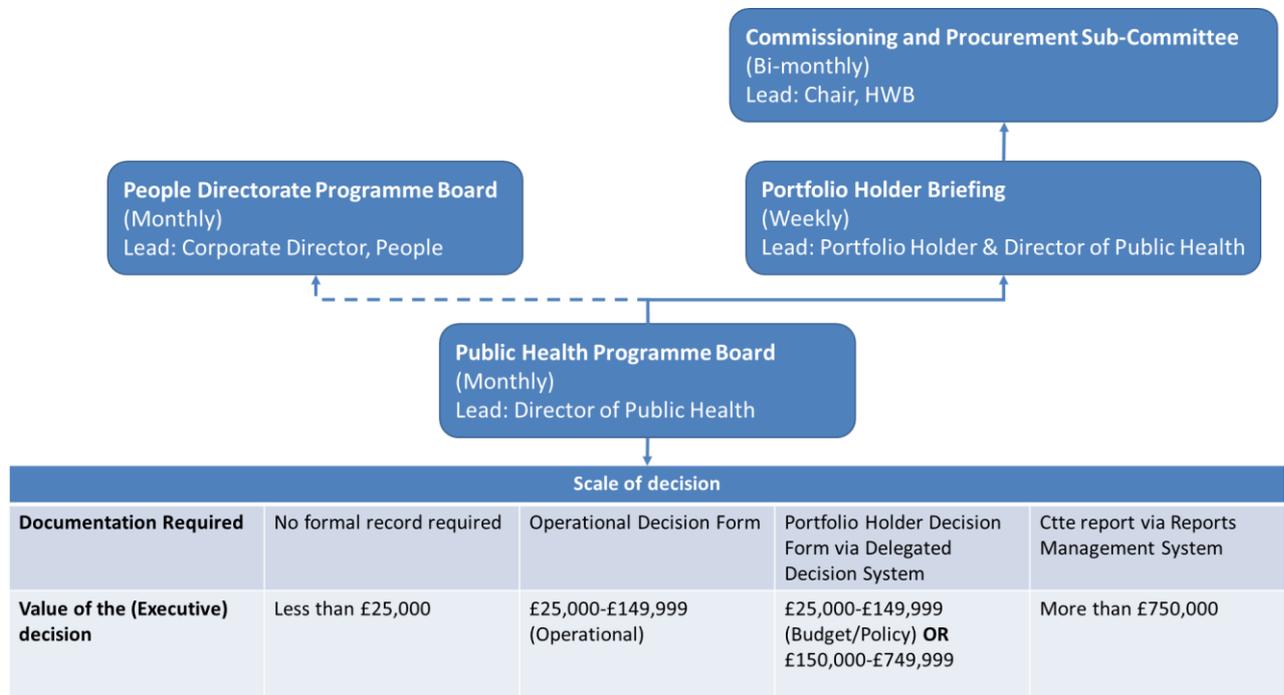
## Roles and responsibilities for public health commissioning

Role	Commissioning responsibility
Portfolio holder <sup>8</sup>	<ul style="list-style-type: none"> <li>Having strategic responsibility for public health, providing political leadership in this area of Council activity.</li> <li>Being accountable for performance and management of public health.</li> <li>Ensuring that the Executive functions within public health are performed in accordance with approved Council policies and strategies, and to the highest ethical standards.</li> <li>Below the level of Key Decision, taking strategic decisions in relation to Executive functions within public health</li> <li>Building relationships with officers and other relevant stakeholders, including in external organisations, working effectively with them and giving consideration to any advice provided.</li> <li>Speaking and issuing statements on their area of responsibility and representing the Council's views in line with agreed policy.</li> <li>Supporting open and transparent Overview and Scrutiny, including attending meetings when requested.</li> <li>Supporting open and transparent Audit processes, included attending Audit Committee meetings when requested.</li> <li>Responding to questions from the public and Councillors, including those asked at Full Council meetings.</li> </ul>
Director of Public Health <sup>9</sup>	<ul style="list-style-type: none"> <li>Strategic leadership of public health agenda</li> </ul>

<sup>8</sup> Guided by Article 4, NCC Constitution

	<ul style="list-style-type: none"> <li>• Provision of expert advice to elected members and officers</li> <li>• Ensuring the Council acts lawfully and with financial propriety</li> <li>• The day to day management of Council services and officers</li> <li>• Initiating implementing and managing policy in accordance with the overall framework set by Councillors</li> <li>• Giving professional advice to all Councillors</li> <li>• Advice on key decisions</li> </ul>
Consultant in Public Health/ Head of Service	<ul style="list-style-type: none"> <li>• Operationalisation of strategic plan</li> <li>• Working with system partners to look for integration opportunities</li> <li>• Provision of expert advice</li> </ul>
Public Health Practitioner	<ul style="list-style-type: none"> <li>• Performance and contract management</li> <li>• Quality improvement</li> <li>• Needs assessment</li> <li>• Service design</li> <li>• Partner engagement</li> <li>• Subject expertise</li> </ul>

Governance - decision making and performance monitoring

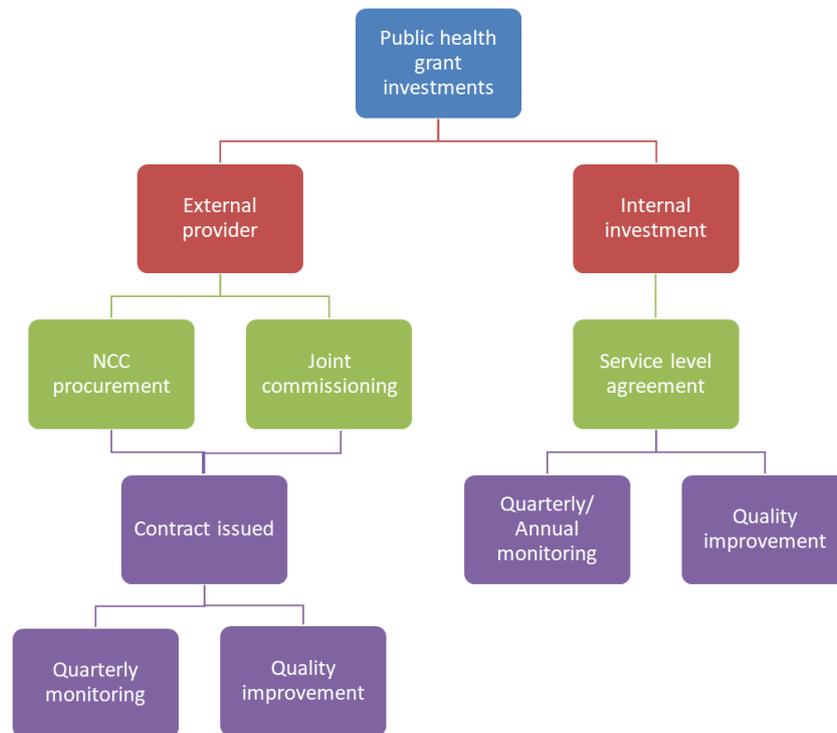


Contracts management

<sup>9</sup> Guided by Article 5, NCC Constitution

All expenditure on public health interventions will be subject to suitable contract and performance management, as outlined in figure 6. Quality assurance and improvement will be delivered through the regular monitoring of the investment agreements, with responsibilities for oversight held by the Public Health Programme Board.

Figure 6: Indicative investment expenditure framework



### Key service pressures 2022/23

- Notification of grant value. In the last two years, the grant determination letter and allocations has not been received until mid-March, making planning very challenging. A roll-forward position is assumed for 2022/23.
- Agenda for Change increases. These will be funded in line with NHS approaches, matching uplift with service efficiencies, using the NHS inflationary efficiency factors.
- Covid recovery. The pandemic has exacerbated some behaviours that contribute to poor health outcomes (e.g. tobacco or alcohol intake) and existing inequalities
- Implementation of the public health grant review transition plan. Supporting transformation and reinvestment of reallocated funds

### Key commissioning activities 2022/23

- Commissioning review of substance misuse services
- Commissioning review of sexual health services

- Implement public health grant transition plan, including supporting corporate transformation activities (\*linked actions)
- Develop healthy weight/physical activity commissioning plan\*
- Develop tobacco control commissioning plan
- Review of 0-19 public health services\*
- Implement Agenda for Change investment plan

## Commissioning Pipeline

The commissioning pipeline outlines the implementation plan for delivering the commissioning intentions. It sets out the current commissioned service, the timelines for the recommissioning and highlights areas of concern/opportunities for integration or joint working. This will include services funded/commissioned via one-off grant funding in addition to the annual Public Health grant. The pipeline will be reviewed monthly at the Public Health Programme Board.

Categories for reporting local authority public health spend in 2021/22 ([Public health ring-fenced grant 2021 to 2022: local authority circular – Annex C](#))

Prescribed functions:	Non-prescribed functions:
<ol style="list-style-type: none"> <li>1) Sexual health services - STI testing and treatment</li> <li>2) Sexual health services – Contraception</li> <li>3) NHS Health Check programme</li> <li>4) Local authority role in health protection</li> <li>5) Public health advice to NHS Commissioners</li> <li>6) National Child Measurement programme</li> <li>7) Prescribed Children's 0-5 services</li> </ol>	<ol style="list-style-type: none"> <li>8) Sexual health services - Advice, prevention and promotion</li> <li>9) Obesity – adults</li> <li>10) Obesity - children</li> <li>11) Physical activity – adults</li> <li>12) Physical activity - children</li> <li>13) Treatment for drug misuse in adults</li> <li>14) Treatment for alcohol misuse in adults</li> <li>15) Preventing and reducing harm from drug misuse in adults</li> <li>16) Preventing and reducing harm from alcohol misuse in adults</li> <li>17) Specialist drugs and alcohol misuse services for children and young people</li> <li>18) Stop smoking services and interventions</li> <li>19) Wider tobacco control</li> <li>20) Children 5-19 public health programmes</li> <li>21) Other Children's 0-5 services non-prescribed</li> <li>22) Health at work</li> <li>23) Public mental health</li> <li>24) Miscellaneous, can include but is not exclusive to:               <ul style="list-style-type: none"> <li>• Nutrition initiatives</li> <li>• Accidents Prevention</li> <li>• General prevention</li> <li>• Community safety, violence prevention &amp; social exclusion</li> <li>• Dental public health</li> <li>• Fluoridation</li> <li>• Infectious disease surveillance and control</li> <li>• Environmental hazards protection</li> <li>• Seasonal death reduction initiatives</li> <li>• Birth defect preventions</li> </ul> </li> <li>25) test, track and trace and outbreak planning</li> <li>26) other public health spend relating to COVID-19</li> </ol>