

Executive Board – 21 May 2024

Subject:	Use of ring-fenced public health grant allocation 2024/25
Corporate Director/Director:	Catherine Underwood – Corporate Director for People Lucy Hubber – Director of Public Health
Portfolio Holder:	The Portfolio Holder with responsibility for Public Health
Report author and contact details:	Nancy Cordy, Head of Strategy and Service Improvement, Public Health, Nancy.cordy@nottinghamcity.gov.uk
Other colleagues who have provided input:	
Subject to call-in:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Key Decision:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Criteria for Key Decision:	
(a)	<input checked="" type="checkbox"/> Expenditure <input type="checkbox"/> Income <input type="checkbox"/> Savings of £750,000 or more taking account of the overall impact of the decision
and/or	
(b)	Significant impact on communities living or working in two or more wards in the City <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Type of expenditure:	<input checked="" type="checkbox"/> Revenue <input type="checkbox"/> Capital If Capital, provide the date considered by Capital Board Date:
Total value of the decision:	£37,202,982 – This is the total ring-fenced public health grant (RFPHG) allocation for 2024/25. All RFPHG spend will be subject to relevant approvals being obtained.
Section 151 Officer expenditure approval	Has the spend been approved by the Section 151 Officer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/a
	This report describes the use of the RFPHG in 2024/25 for assurance purposes and is not seeking spend approval for the RFPHG in its totality. The Section 151 Officer has approved all existing expenditure commitments that have arisen since the Section 114 Report was issued (29 November 2023). This report also describes funds that have been allocated but not yet committed. Spend approval by the Section 151 Officer will be sought for all RFPHG expenditure in line with Council processes and requirements.
Commissioner Consideration	Has this report been shared with the Commissioners' Office? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Any comments the Commissioners wish to provide are listed below.
Wards affected:	All
Date of consultation with Portfolio Holder:	
Relevant Council Plan Key Outcome:	
Clean, Green and Connected Communities	<input type="checkbox"/>
Keeping Nottingham Working	<input type="checkbox"/>
Carbon Neutral by 2028	<input type="checkbox"/>
Safer Nottingham	<input type="checkbox"/>
Child-Friendly Nottingham	<input type="checkbox"/>
Living Well in Our Communities	<input checked="" type="checkbox"/>
Keeping Nottingham Moving	<input type="checkbox"/>
Improve the City Centre	<input type="checkbox"/>
Better Housing	<input type="checkbox"/>
Serving People Well	<input type="checkbox"/>

Summary of issues:

Along with all other unitary and upper tier authorities, Nottingham City Council receive an annual public health grant allocation from the Department of Health and Social Care (DHSC). The public health grant allocation for 2024/25 has been confirmed as £37,202,982. The public health grant is ring-fenced and must only be used where the main and primary purpose is public health. The public health grant conditions set out a range of prescribed and non-prescribed public health activity against which public health grant expenditure must be reported.

On average, people in Nottingham are less healthy than those in other parts of the East Midlands region and when compared to the England average. Notably, 21.2% of adults in Nottingham are current smokers, which is the second highest rate in England. Nottingham's communities have wide ranging health and wellbeing needs and these can vary significantly between different groups.

The RFPHG must be invested eligibly, but also efficiently and effectively, to address identified health and wellbeing needs, ensuring the greatest possible positive impact on the health and wellbeing of Nottingham's people.

The purpose of this report is to set out the planned use of the totality of the RFPHG 2024/25 allocation for Executive Board's approval. This is an important part of the strengthened governance processes to provide assurance that all RFPHG expenditure is eligible, and has been recognised as best practice by the Office of Health Improvement and Disparities (OHID).

Does this report contain any information that is exempt from publication?

No

Recommendations:

- 1 To note and endorse:
 - the additionality of the 2024/25 Public Health Grant of £0.588m from £36.615m in 2023/24 to £37.203m in 2024/25,
 - the use of £32.574m of the ring-fenced public health grant for 2024/25 for activity commissioned and grant funded directly by public health (as set out in 2.6, Tables 1-4), in order to improve the health and wellbeing of Nottingham's population, in line with agreed relevant strategies and plans, and in line with the public health commissioning framework, and
 - the use of £4.629m of the ring-fenced public health grant for 2024/25 to wider Council services (as set out in 2.6, Table 5) to enable the delivery of additional activity which will contribute to improved health and wellbeing outcomes for Nottingham's residents.

1. Reasons for recommendations

- 1.1 Nottingham City's RFPHG allocation for 2024/25 has been confirmed as £37.203m. The grant is ring-fenced for use on public health functions, meaning that the main and primary purpose of all grant expenditure is public health. The local authority circular published alongside the grant allocation sets out the conditions that apply to the grant, as well as reporting requirements. Receipt of the RFPHG supports the local authority to meet its duty to improve the health and wellbeing of the local population.
- 1.2 The National Health Service Act (2006) includes a statutory duty to be informed by the health needs of the local population when deciding on the

most appropriate use of the RFPHG. The Joint Strategic Needs Assessment, published on Nottingham Insight, identifies the health and wellbeing needs of the local population. This has informed the Integrated Care Strategy (for Nottingham and Nottinghamshire), the Joint Local Health and Wellbeing Strategy for Nottingham, the Public Health Divisional Plan and the Strategic Council Plan. The public health commissioning framework set out the principles and processes through which these strategies and plans, alongside other relevant drivers are translated into commissioned (and grant-funded) services/activity. The planned use of the RFPHG allocation in 2024/25, as set out in this report, is assessed as being the most appropriate allocation of resource to ensure the delivery of activity required within the conditions of the grant, as well as address the health and wellbeing needs of the local population, in line with the aforementioned statutory duty, strategies and plans.

- 1.3 The conditions in which people are born, grow, live, work and age have a profound influence on health and health inequalities. Local authorities have a key role to play in shaping these conditions, and as a consequence also have a key role in terms of improving the health and wellbeing of their local population (in line with statutory duties). It is recommended that RFPHG continues to contribute to a range of wider Council services (as set out in 2.6, Table 5) in order to enable the delivery of additional activity which improves health and wellbeing. Arrangements are in place to ensure effective ongoing joint working and regular review of contributions to provider assurance that all RFPHG expenditure continues to be eligible.

2. **Background**

- 2.1 Local authorities (upper tier and unitary) are statutorily responsible for improving the health of their local population and reducing health inequalities, under the National Health Service Act 2006. Alongside this duty, a ring-fenced public health grant (RFPHG) is provided, for expenditure where the 'main and primary purpose...is public health'. The RFPHG 2024/25 allocation for Nottingham is £37,202,982.
- 2.2 Nottingham City Council is statutorily required to ensure the provision of public health services in line with the terms and conditions of the RFPHG. Local authorities must provide an annual Statement of Assurance confirming that the grant has been used for the purposes intended, and that all expenditure is eligible. This return must be certified by the authority's Chief Executive (or S151 Officer) and the Director of Public Health. The terms of the grant outline prescribed (services mandated in the NHS Act 2006) and non-prescribed services, all of which are required as part of the conditions of the grant. Local authorities must report forecasted and actual RFPHG expenditure against these categories.
- 2.3 The population of Nottingham have a lower life expectancy when compared to regional and national averages. They can also expect to live a shorter proportion of their lives in good health (healthy life expectancy measure). Nottingham has the second highest smoking rates amongst adults in England, with more than 1 in 5 (21.2%) of adults being current smokers. This demonstrates the importance of continued focussed investment in effective interventions that will have a positive impact on the health and wellbeing of the population.

2.4 The current Joint Local Health and Wellbeing Strategy (JLHWS) for Nottingham, agreed in March 2022, set out four priority areas for collective action in order to improve health and wellbeing, and reduce health inequalities in Nottingham;

- Smoking and tobacco control
- Eating and moving for good health
- Severe multiple disadvantage (SMD)
- Financial wellbeing

RFPHG will continue to be invested to support the delivery of the above priorities. Further detail about the progress to date, including onward delivery plans, can be found in the annual report to Health and Wellbeing Board (March 2024). The JLHWS will be updated during 2024/25, including a review of current and potential additional priorities, for agreement by the Health and Wellbeing Board in March 2025. The updated JLHWS will inform the use of the RFPHG in 2025/26 and beyond.

2.5 The planned use of the RFPHG allocation 2024/25 is assessed as being an effective and efficient use of the resource available, in order to ensure:

- That all RFPHG expenditure is eligible, as per grant conditions;
- The effective delivery of all required public health services;
- The delivery of activity identified as being required in order to address the four priorities set out within the JLHWS for Nottingham;
- The delivery of all activity within the Public Health Divisional Plan and Strategic Council Plan.

2.6 The Public Health Team commission a wide range of activity to address the health and wellbeing needs of Nottingham communities and improve outcomes for residents. The public health commissioning framework, agreed by CPEC (March 2023) shapes and guides the use of the RFPHG allocation, and sets out the processes through which ongoing eligibility and best value is assured.

Key commissioning activity undertaken during 2023/24 which has informed the use of the RFPHG allocation in 2024/25 includes:

- The conclusion of the commissioning review and procurement of substance use services, with new contracts implemented from the 1 October 2023. (Spend approval obtained from CPEC July 2022)
- The conclusion of the commissioning review and procurement of a new integrated wellbeing service for Nottingham (known as Thriving Nottingham) which launched on the 2 April 2024. This service provides a single point of entry to a broad offer of free to access support to help residents of all ages to live well and feel great (including but not limited to smoking cessation support, weight management and physical activity opportunities). (Spend approval obtained from CPEC May 2023)
- The procurement of a new oral health promotion service (live as of 1 January 2024). (Spend approval obtained via portfolio holder decision dated May 2023 (4927))

The public health commissioning pipeline for 2024/25 (agreed by Public Health Programme Board) includes the following activity:

- Mobilisation of the new contract for the delivery of Integrated Sexual Health Services (1 October 2024 start date) (Spend approval obtained from CPEC March 2023)
- New delivery model for distribution of condoms to priority groups to be agreed and implemented
- Complete procurement of new gambling related harm services and mobilisation of contracts (Spend approval obtained via portfolio holder decision dated December 2023 (5065))
- Commissioning review of asylum seeker and refugee health and financial wellbeing support to determine longer term model (grant funding arrangements currently in place until 31 March 2025).

The below tables provide an overview of RFPHG allocation 2024/25 for public health commissioned and grant funded services (by public health outcome) totalling £32.574m.

Health Improvement (Table 1):

Cost centre	Annual budget (£m)
Eating & Moving for Good Health	£0.279
Smoking & Tobacco Control	£0.257
NHS Health Checks	£0.215
Integrated Wellbeing Service	£2.375*
<i>Smoking (cessation)</i>	<i>£0.950</i>
<i>Eating & Moving for Good Health</i>	<i>£1.283</i>
<i>Mental Health and Wellbeing</i>	<i>£0.142</i>
Best Start in Life	£11.666
Oral Public Health	£0.150
Ageing Well	£0.040
TOTAL	£14.982

*This cost centre/budget line reflects the per annum contract value of Thriving Nottingham (Integrated Wellbeing Service). This service contributes to a range of public health outcomes, most specifically smoking, eating and moving for good health and mental health and wellbeing. It is necessary to attribute an appropriately proportionate sum from the overall contract value for the purposes of reporting RFPHG expenditure against the categories identified in the RFPHG conditions. These sums are shown for in italics for information but are indicative only due to the integrated nature of service provision.

Inclusion Health (Table 2):

Cost centre	Annual budget (£m)
Substance Use	£6.865**
Financial Wellbeing	£0.489
Refugee & Asylum Seeker Health	£0.062
Mental Health & Wellbeing	£0.350
TOTAL	£7.766

**This relates to the RFPHG allocation only – Nottingham City Council will receive three further ring-fenced grants for investment in increasing the capacity and quality of substance use services in 2024/25. There are also partnership contributions made to

these contracted services by the Integrated Care Board, Office of the Police Crime Commissioner and Probation.

Health Protection and Healthy Communities (Table 3):

Cost centre	Annual budget (£m)
Sexual Health	£5.217
Health Protection – Other***	£0.298
Healthy Communities	£0.453
TOTAL	£5.968

***Includes infectious disease prevention and control, vaccination/immunisations, and screening uptake

Cross-cutting (Table 4):

Cost centre	Annual budget (£m)
Staffing & Support****	£3.801
Public Health Intelligence	£0.057
TOTAL	£3.858

****This includes RFPHG contribution to corporate posts aligned to the public health team, as well as overheads (premises costs, contribution to support services)

In addition to the above activity, RFPHG is also used to enable the delivery of activity across the wider council which supports health and wellbeing outcomes. All contributions were comprehensively reviewed during 2021/22 and agreed as part of a public health transition plan. 2024/25 is the final year of the three-year transition plan, the delivery of which continues to be overseen by the Office of Health Improvement and Disparities and is the subject of twice-yearly assurance meetings.

Contributions are reviewed in conjunction with services on an annual basis, to ensure that the requirements of the associated service level agreement are still appropriate and being met. This is an iterative process which takes place alongside general fund discussions and decisions, to ensure that the RFPHG contribution continues to be at eligible proportions. Where budget related decisions have reduced or removed the general fund contribution to a service/activity, the ongoing public health need has been reviewed and suitable alternative arrangements put in place. This means that there are services/activity which RFPHG contributed to via the wider Council in 2023/24, but public health will be funding directly in 2024/25 in order to sustain services/activity that support the health and wellbeing of residents.

RFPHG allocation to wider Council Services (2024/25) totalling £4.629m (Table 5):

Finance & Resources	Comms & Marketing	£73,000
	Constitutional Services	£17,000
	Employee Wellbeing	£40,000
	Emergency Planning	£33,000
	Procurement & Payments	£118,468
Communities, Environment & Resident Services	Leisure Services	£500,000
	Sports Development	£59,000
	Parks & Open Spaces	£276,000

	Library Services	£377,000
	Domestic Violence Services	£652,496
	Resident Development	£50,000
	Community Safety Staffing	£106,516
	Trading Standards	£46,331
	Colwick Activity Centre (tbc)	£50,000
People	Healthy Schools	£138,210
	Early Years	£838,240
	Youth & Play	£322,000
	School Swimming	£50,000
	Adult Social Care Prevention	£150,000
	CAMHS	£222,517
	Contracts	£123,648
Growth & City Development	Planning (including GIS)	£105,000
	Nottingham Futures	£281,000

3. Other options considered in making recommendations

- 3.1 There are very clear terms and conditions relating to the use of the RFPHG. Alongside the implementation of the agreed transition plan (2022/23-2024/25) public health governance processes have been strengthened to provide confidence that commissioned services deliver best impact (in relation to health and wellbeing outcomes) within the total resource available. All decisions relating to RFPHG expenditure are considered by Public Health Programme Board (PHPB). PHPB must be assured that the recommended option is an eligible, effective and efficient use of the RFPHG prior to onward consideration and approval in line with Council processes. Consideration of alternative options is a key part of this process.

4. Consideration of Risk

- 4.1 The use of the RFPHG allocation 2024/25 as set out in this report is judged to be an eligible use of the grant, and fully in line with grant conditions. Forecasted and actual RFPHG expenditure will be submitted to the Department for Levelling Up, Housing and Communities and shared onwards with DHSC. This return must be accompanied by a statement signed by the Director of Public Health and Chief Executive / S151 officer confirming that the grant has been spent in accordance with grant conditions. In assessing whether the local authorities have complied with grant conditions DHSC will look at the primary purpose of the spend. If the Director of Public Health or Chief Executive / S151 officer are not able to provide the assurance statement or for some other reason it is considered by DHSC that ineligible expenditure may have been incurred the authorities use of RFPHG will be subject to additional scrutiny. If ineligible expenditure is identified, future RFPHG could be reduced and/or the local authority could be required to replay ineligibly used grant.
- 4.2 RFPHG allocations are confirmed on an annual basis (typically during Q4 of the preceding financial year) and no provisional or indicative allocation for 2025/26 has been provided. In line with the trajectory in recent years it is anticipated that the 2025/26 allocation will see a small increase (circa 1%) but that this will not be sufficient to meet inflationary pressures (including those associated with NHS agenda for change pay uplifts and estimated at 4%) which impact on contracts held by public health. Efficiencies are therefore

likely to be required to sustain the current levels of service/activity within the available RFPHG allocation.

4.3 In addition to the RFPHG public health receive and manage a number of other ring-fenced grants, particularly in relation to substance use. In 2024/25 additional grants are contributing a further £4.894m to the delivery of substance use services in Nottingham. It is not currently known if further grant funding will be made available beyond the current financial year. In addition, there are a number of other grant funded programmes operating within Nottingham that are due to end. It is anticipated that RFPHG may need to be utilised to sustain improvements that have been achieved.

4.4 System wide pressures (financial and otherwise) currently being managed have the potential to detrimentally impact on the health and wellbeing of the local population. Public health will support with understanding the ongoing and likely future need, as well as the health impacts. With this in mind current investment plans may need to be adjusted in order to meet the most critical needs in a changing landscape.

5. **Best Value Considerations, including consideration of Make or Buy where appropriate**

5.1 As described throughout the report, best value considerations are systematically built into all decisions relating to RFPHG expenditure. This includes reviews of existing services as part of continuous service improvement, as well as at the point of re/commissioning services. A full list of published decisions which relate to the approved use of RFPHG expenditure in 2024/25 is included at the end of this report.

- **Economy:** the review of the use of the RFPHG ensured eligible use of the grant and put in place strengthened governance processes to ensure that this was sustained. A revised JLHWS, based on population need, agreed by the Health and Wellbeing Board in March 2022 ensures that spend is directed towards activity that will most improve health and wellbeing outcomes.
- **Efficiency:** Investments in wider council services are articulated in service level agreements and subject to annual review. A commissioning pipeline has been developed for commissioned services and reviewed at monthly multi-divisional PHPB meetings.
- **Effectiveness:** Benchmarking for outcomes shows that Nottingham currently has significantly worse outcomes in all key domains. This is being addressed through focused investment in public health interventions directly improving outcomes.

5.2 Make or Buy options will be routinely considered and appraised by PHPB as part of the processes detailed in 3.1.

5.3 Public health contracts are managed with support from the contract management function within Peoples (with a proportionate RFPHG contribution made), This includes the submission of quarterly monitoring reports and quarterly contract review meetings for all contracted public health services. This is key to assessing whether best value is being achieved on an ongoing basis, and whether the contracted service is effectively meeting output/outcome related targets.

Performance is reported to PHPB on a quarterly basis for oversight and assurance, and a clear escalation process for responding to concerns is in place.

6. Commissioner comments

the report states that S151 approval for this report is n/a, but then it states that S151 approval must be sought for this grant 'in line with Council processes and requirements'. It further states that approval has been obtained 'for much of the activity outlined in this report'. Can this section be clarified please?. Para 1.1 states the grant is £37,203m. The use of the comma makes this £37 billion of grant. This needs to be corrected to £37.203m.

As a general point, I also note that smoking is mentioned several times in context of the City having one of the highest smokers population in the country, and 'smoking and tobacco control are listed as one of the top 4 priorities, yet the amount of grant attributed to this is just £257k – the 5th lowest amount across all the spending lines. It is not for me to comment on the amount itself, it just looks strange that this is the heading discussed most, and stats quoted for it.

Given the sums involved (by individual lines and also on total, I do wonder whether more can be said in terms of the outcomes delivered in previous years and what you expect the funding to deliver this year – i.e. what value for money is being achieved?

Subject to these clarifications being made the Commissioners are content with the proposals.

7. Finance colleague comments

This report seeks approval for the receipt and planned use of the Public Health grant for allocation for 2024/25.

Public Health Grant is ring-fenced to support the delivery of Council's statutory requirement to improve the health and wellbeing of the local population of Nottingham City.

The 2024/25 Public Health grant allocation/budget is £37.203m. The following table sets summarises the planned use of the grant funding in 2024/25 on eligible expenditure in line with Public Health grant conditions.

Proposed use of 2024/25 Public Health Grant Allocation	
Health Improvement	£14.982m
Inclusion Health	£7.766m
Health Protection & Healthy Communities	£5.968m
Public Health staffing & support	£3.858m
Wider Council services	£4.629m
TOTAL	£37.203m

As outlined within the body of the report, the Public Health Commissioning Strategy and Framework sets out the approach and key priorities (intentions) for the expenditure of the Public Health grant. The Framework outlines how the Council will assure itself that the Public Health grant is spent in support of strategic priority areas, maximising the positive impact on health and wellbeing outcomes for

the Nottingham population and reducing inequalities in accordance with ring-fenced grant conditions whilst supporting best value.

Actual expenditure associated with the above proposed allocation of the 2024/25 Public Health grant will be subject to approval via the appropriate approval mechanism.

If the Public Health grant increases/reduces in future years the service will need to realign services within the funding available ensuring no financial pressures arise.

The report gives a full and robust financial breakdown based on the specific requirements to inform affordability and that all costs can be contained within the existing budget provision. This will ensure no financial pressures should arise.

Once this decision is approved, a budget virement will be posted to realign the 2024/25 budgets with the final grant allocation and planned spend, supporting budget managers to robustly monitor the budget and spend.

The Public Health actual grant costs will need to be closely monitored by the service to ensure they do not exceed the decision value.

The Public Health grant is subject to a number of external grant reporting processes which are detailed by the report author. It is essential that any expenditure is in line with the grant conditions and that reporting requirements are met to ensure no risk arises in relation to this grant funding.

Any annual variation from public health budget must be contained within the overall ring-fenced Public Health Account through the use of a separate Public Health Reserve. The estimated balance on the Public Health Reserve at 1st April 2024 is £8.871m which is committed to support Public Health Programme spend in the medium term. In addition, £3.862m Containing Outbreak Management Fund (COMF) Grant has been carried forward to 2024/25. This is committed and needs to be spent by 30th September 2024.

Mark Astbury - Interim Strategic Finance Business Partner
Tracey Moore - Commercial Business Partner
29/04/2024

8. Legal colleague comments

The Public Health Grant is paid in accordance with Section 31 of the Local Government Act 2003. The grant can be used for both revenue and capital purposes.

The purpose of the grant is to provide local authorities in England with the funding required to discharge prescribed Public Health functions where the main and primary purpose is the improvement of Public Health.

Subject to paragraph 5 of the Public Health Ring Fenced Grant circular 2021 the grant can only be used for meeting eligible expenditure incurred by Local Authorities' as set out in s.73B(2) of the National Health Service Act 2006.

The grant can be used to contribute to other sources of funding (including other LA funding) so long as the fund is used for the purposes outlined above and the authority must be satisfied that the functions have a significant effect on public health or are carried out in connection with the public health functions prescribed.

The arrangements must represent best value.

It is the responsibility of the Chief Executive or the s.151 officer and the Director of Public Health to certify that, to the best of their knowledge, the amounts shown on the Return Outturn report that must be submitted to the Secretary of State that the Local Authority expenditure has been spent in accordance with the grant terms.

The Secretary of State may require a further external validation to be carried out by an appropriately qualified independent accountant or auditor of the use of the grant where the Revenue Outturn Report return fails to provide sufficient assurance to the Secretary of State that the grant has been used in accordance with these conditions. In addition if the Local Authority identify or suspect that there is any financial irregularity in the use of the grant it is under a duty to report the same to the Department, explain what steps are being taken and to investigate the suspicion and keep the department informed about the progress of the investigation. A failure to comply with the Grant conditions or provide the requisite level of assurance to the Secretary of State means that the Secretary of State may reduce, suspend or withhold grant payments or require the repayment of the whole or any part of the grant monies paid. Any such sum would be repayable to the Secretary of State or may be offset against any future amount due to the authority from central government.

Beth Brown – Director of Legal & Governance and Monitoring Officer
01/05/2024

9. Crime and Disorder Implications

9.1 Public health are a key member of the Nottingham Community Safety Partnership (NCSP), in recognition of the significant contribution public health and community safety have to make to the successful achievement of each other's outcomes, many of which are shared. The Director of Public Health is the Senior Responsible Officer for the Substance Use Strategic Partnership (reporting into NCSP), in line with responsibilities for the commissioning of alcohol and drug use services. RFPHG contributes to the delivery of non-statutory domestic violence services and community safety staffing as set out in 2.6 (table 5).

10. Social value considerations

10.1 In line with the Council's Procurement Strategy and as set out in the Public Health Commissioning Framework, opportunities to maximise social value will be considered and factored into all services commissioned and procured with RFPHG.

11. Regard to the NHS Constitution

11.1 Local authorities have a statutory duty to have regard to the NHS Constitution when exercising their public health functions under the NHS Act 2006. In making decisions relating to the use of RFPHG, we have properly considered

the NHS Constitution as well as shared plans and priorities, in order to commission services that improve the health of the local community.

12. Equality Impact Assessment (EIA)

12.1 Has the equality impact of the proposals in this report been assessed?

No



An EIA is not required. Reducing (health) inequalities is a primary consideration in all decisions taken in relation to RFPHG expenditure. EIAs are routinely completed as part of commissioning reviews, informed by engagement with local communities. Demographic data is routinely collected by commissioned services, and this is reviewed as part of regular contract monitoring to identify issues that may need addressing so as not to exacerbate inequalities.

13. Data Protection Impact Assessment (DPIA)

13.1 Has the data protection impact of the proposals in this report been assessed?

No



A DPIA is not required because this report does not related to the collection or use of any personal or identifiable data.

14. Carbon Impact Assessment (CIA)

14.1 Has the carbon impact of the proposals in this report been assessed?

No



A CIA is not required because this will be considered (where applicable) as part of individual decisions taken in relation to RFPHG expenditure.

15. List of background papers relied upon in writing this report

15.1 None

16. Published documents referred to in this report

- Public health ring-fenced grant financial year 2024 to 2025: local authority circular – available at www.gov.uk/government/publications/public-health-grants-to-local-authorities-2024-to-2025
- Joint Strategic Needs Assessment (JSNA) – available at www.nottinghaminsight.org.uk
- Joint Local Health and Wellbeing Strategy for Nottingham (2022-2025) – available at www.healthynottingham.co.uk
- Integrated Care Strategy (2023-2027) -available at www.healthandcarenotts.co.uk/integrated-care-strategy
- Joint Health and Wellbeing Strategy Delivery Update – Year 2 delivery updated (Nottingham City Health and Wellbeing Board – 27 March 2024) – available at PBP_JHWS_Year_2_Delivery_Report_-_March_2024_FINAL.pdf (nottinghamcity.gov.uk)

- All decisions relating to RFPHG expenditure with a value of £100,000 or higher are published on www.nottinghamcity.gov.uk

Related Key Decisions (in chronological order):

- 0-5 Integrated Service Contract – Commissioning and Procurement Sub-Committee – 13 June 2017
- Commissioning of substance misuse treatment and recovery services for Nottingham – Commissioning and Procurement Executive Committee – 12 July 2022
- Commissioning of substance misuse treatment and recovery services for Nottingham – Commissioning and Procurement Executive Committee – 15 November 2022
- Adjustment of ‘Giving Nottingham Children the Best Start in Life’ contract value – Commissioning and Procurement Executive Committee – 15 November 2022
- Commissioning of Integrated Sexual Health Service for Nottingham – Commissioning and Procurement Executive Committee – 14 March 2023
- Integrated Wellbeing Service (IWS) – 2024 onwards – Commissioning and Procurement Executive Committee – 30 May 2023
- Integrated and online Sexual Health Service contracts extension – Commissioning and Procurement Executive Committee – 10 October 2023

Related Portfolio Holder and Operational Decisions with a value of £0.100m or above (in chronological order):

- Procurement of a Needle and Injecting Equipment Supply Contract (4657)
- NHS Health Checks Programme Delivery (4842)
- Oral Health Promotion (4927)
- Infection Prevention and Control Service (4991)
- Receive and spend Public Health and ICB Health Inequalities grant funding for routine childhood and adolescent vaccination in the City of Nottingham (5014)
- Approval to spend Public Health grant contribution via a Healthy Communities Small Grants Scheme (5062)
- Gambling related harm strategy 2023-2028 (5065)
- Agenda for Change (AfC) for Integrated Sexual Health Services (ISHS) (5081)
- Grant funding for the provision of advice and assistance for people in financial difficulty to improve health and wellbeing outcomes (5110)