

**[NAME] COMMITTEE  
PART I / PART II \*  
MEETING ON [DATE]**

<b>Title of Report:</b>	<b>Report of the Director of Public Health - Public Health Update</b>	
<b>Board Sponsor:</b>	Ian Wake, Director of Public Health	
<b>Prepared by :</b>	Emma Sanford – Strategic Lead, Health and Social Care Public Health	
<b>Committees previous consulted:</b>		
<b>Executive Summary:</b>	The purpose of this report is to provide an update to the CCG Board on work undertaken by the Thurrock Public Health Team on behalf of the CCG in support of our aspiration to be recognised for delivering the highest quality 'Public Health Core Offer' to a CCG in England.	
<b>Financial / Resource Implications:</b>		
<b>Fit with CCG strategy/objectives:</b>		
<b>Risks identified / Outcome / Link to BAF:</b>		<b>BAF Ref:</b>
<b>Actions Required:</b>		<b>When By:</b>
<b>Recommendation to the Committee:</b>	That the Thurrock CCG Board notes the contents of this report and continues to collaborate closely with Public Health staff in order to facilitate delivery of the core offer.	

\* Delete as appropriate

## **1. An Integrated Data Set**

- 1.1 A Contract has been awarded to Mede Analytics, however this has yet to be formally signed. There are currently no concerns about this happening.
- 1.2 An initial meeting with Mede Analytics has been scheduled for 20<sup>th</sup> December. We expect to discuss evaluation criteria and timescales for the proof of concept phase. We will circulate these shortly afterwards.
- 1.3 A more detailed update will be expected at the February Board.

## **2. Public Health Structure and Recruitment to vacant posts**

- 2.1 Monica Scrobotovici began work as HCPH Improvement manager in November.
- 2.2 Jo Pitt is expected to join her in January.
- 2.3 The work programme for these posts is currently under development.
- 2.4 Recruitment for graduate trainee posts was successful. There are three trainees starting in January. One will be aligned to the Healthcare Public Health Team providing further resource for the Public Health “core offer” and support to Adult Social Care.

## **3. Developing Patient Participation Groups**

- 3.1 Kelly Clarke will be leading this programme of work in association with Healthwatch and the CCG. Work has started with Healthwatch to scope the programme.
- 3.2 The training will be around the PPG understanding their role, governance and how they can support and add value to the GP practice, and in identifying health need within the GP practice population.

## **4. Annual report of the Director of Public Health**

- 4.1 The executive summary of the report is attached.
- 4.2 The report aimed to answer the question “how can we make the health and social care system in Thurrock more sustainable?”
- 4.3 Key highlights for primary care include; modelling work to identify the key drivers for non-elective hospital activity for Long Term Conditions; modelling work to identify key drivers for inappropriate A&E attendances; suggested mixed staffing models for Primary Care which will help to reduce pressure on GP’s and increase availability of appointments.
- 4.4 A detailed presentation on the Annual Report of the Director of Public Health will be taken to the CCG Clinical Executive in the new year and made to officers of the CCG.
- 4.5 Following presentation of the Annual Public Health Report at the Thurrock Health and Wellbeing Board there has been interest from the Essex Success Regime Out of Hospital Workstream, regarding replicating the analyses across the south and mid-Essex foot print and re-writing the current plans to reflect the recommendations within the report.
- 4.6 NELFT, SEPT and BTUH have also agreed to purchase the time of the DPH for two days per week from January to March to work with the CCG’s Director of Transformation, Director of Commissioning and Thurrock Council Adult Social Care to develop a business case for an Out of Hospital Accountable Care Organisation, piloting initially Tilbury. Engaging the Tilbury GP practices within this process to co-design the ACO will be absolutely key to its success. It is also a chance to bring together the recommendations within the APHR with “For Thurrock in

Thurrock” and “Living Well in Thurrock” to develop an integrated, population based response to system sustainability and demonstrable improvement in health and wellbeing.

## **5. Update on Re-procurement of Public Health Services**

- 5.1 Re-procurement of the Integrated Adults Substance Misuse Treatment Services is underway. Seven bids have been received from potential providers. Award of contract is planned for early in the new-year with the new service going live on 1 April 2017. The incumbent provider has not submitted a bid so there will be a new provider from April.
- 5.2 Procurement of the Healthy Lifestyles service is underway. This service will combine a number of existing services: smoking cessation, healthy weight, health checks, and Making Every Contact Count. Depending on funding it may also incorporate exercise on referral. It is currently out to tender. Award is expected in early 2017 with the new service going live from 1 April 2017.
- 5.3 The Healthy Families (0 – 19) re-procurement is at the service design stage. It is due to go out to tender by the end of January 2017. A first draft of the service specification has been completed and shared with partners (including CCG colleagues) for comment and discussion. Discussions on coordination of safeguarding and clinical governance arrangements with the CCG are ongoing. The new service will go live from September 2017. An interim 0 – 19 contract will be put in place to cover the period April to August 2017. This will be a continuation of the existing contract with NELFT and will continue to be part of the collaborative contract with the CCG though once re-procured, the new service will be on a Local Authority contract.