

**[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>	Ian Wake, Director of 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. Tilbury and Purfleet Integrated Healthy Living Centres Needs Assessment**

- 1.1 A comprehensive health needs assessment for the Purfleet and South Ockendon areas was completed by the Thurrock Public Health Team on 12 February 2016 and shared with key senior officers and clinicians across the CCG and with senior officers and members across Thurrock Council.
- 1.2 The needs assessment considers the demography, wider determinants of health, lifestyles, epidemiology and uptake of cancer screening services, together with the provision of primary care, community, mental health and social care services and their potential impact on secondary healthcare services. It also makes recommendations for future provision of an Integrated Healthy Living Centre (IHLC) for Purfleet in light of current need and future likely need given Thurrock Council's ambitious plans to regenerate the area. A copy of the full document is appended to this report, and the authors believe that it will act as a 'blue print' for the future design of world class health and social care provision in the area. Recommendations include co-location and integration of services to address the wider determinants of health, an expansion of primary care services including a comprehensive skill mix of different clinicians, integration of physical and mental health services, a stronger focus on primary, secondary and tertiary prevention with a view to improving care for patients with long-term conditions, and the co-location of some outpatient and diagnostic services currently provided at Basildon Hospital.
- 1.3 A meeting between chief officers of the Thurrock Council, Thurrock CCG, Basildon Hospital, NELFT, SEPT and NHS England, chaired by Thurrock Council's CEO earlier in February discussed a strategy for turning the vision set out in the needs assessment into reality. Key actions agreed in the meeting included:
- That Council officers will bring a business case to Cabinet seeking permission to borrow capital in order to develop the new IHLC
  - That NHS PropCo. will act as the lead provider in the short term and lease parts of the building to NHS providers, providing an income for the council to use to service its loan.
  - That the CCG will commence a procurement exercise to appoint a long term lead healthcare provider to lease the building from the council.
  - That a business case will be developed for NHS England to transfer two of the Tilbury GP practices into the new IHLC and also procure more GP provision
  - That an officer group within the council will bring together proposals to co-locate existing council commissioned and provided wellbeing services within the new IHLC.

## **2. Thurrock's Joint Health and Wellbeing Strategy, 2016-2021**

- 2.1 A new Joint Health and Wellbeing Strategy for Thurrock was approved by the Thurrock Health and Wellbeing Board on 11 February 2016. Details of this work are contained within a separate report to the CCG Board.

## **3. PET-CT Scanner**

- 3.1 At the January 2016 meeting of full Council a motion of no-confidence in NHS England's local consultation on proposals to relocate the PET-CT scanner from Basildon Hospital to Southend Hospital was passed, receiving universal cross party support. As a result, the Leader of Thurrock Council has written to The Secretary of State for Health setting out member's concerns, and the Council's Chief Executive has written to NHS England's Area Director for The East of England also raising the concerns of members. This follows universal rejection of the proposal by Thurrock's Health Overview and Scrutiny Committee in October 2015 after clinicians from the Thurrock CCG and Basildon Hospital raised strong opposition to the proposal.

- 3.2 A new consultation on the proposals is being launched by NHS England at the time of writing this report, and the author awaits further details.

#### **4. Public Health Grant Allocation – 2016/17.**

- 4.1 The Department of Health finally released details of the 2016/17 and 2017/18 Public Health Grant allocation for Thurrock on 11 February 2016, following announcements made by The Chancellor of The Exchequer back in June 2015 of a 6.2% 'in year cut' and further reductions in his Autumn Statement, together with announcements made by the Department of Health in October 2015 on development of a new funding formula by which 2016/17 Public Health Grant allocations would be calculated. It has now been confirmed that the 2015/16 'in year' cut will be recurrent, and further reductions amounting to a total of 7.43% in 2016/17 and 9.64% in 2017/18 will be applied to Thurrock's Public Health Grant from the 2015/16 out turn.
- 4.2 These additional cuts place significant short term financial pressure on the council, not least because we had already committed to three year contracts (not due to end until March 2017) with NHS providers to deliver sexual health services, drug and alcohol services, tobacco control, weight management services, health visiting and school nursing prior to the announcement of funding reductions in the Public Health Grant locally. At time of writing this report, the DPH is currently working through the potential implications of further funding reductions with NHS providers and will bring a paper back to the CCG Board once these are more fully understood.

#### **5. Lower Thames Crossing Consultation**

- 5.1 On 27 January 2016, Highways England launched a consultation on the future of the Lower Thames Crossing, recommending 'option C' in their consultation documentation - a new river crossing to be built through use of a bored tunnel. The proposed scheme would run from the end of the M2, crossing the river just east of Gravesend and Tilbury, and join the M25 between junctions 29 and 30. Highways England has identified three routes for the new road to the north of the river and two routes south of the river. They are inviting views on them all but their proposed route is Route 3 on the map below. Further details can be found at:  
<https://highwaysengland.citizenspace.com/cip/lower-thames-crossing-consultation> or  
<http://www.lower-thames-crossing.co.uk/> The consultation will close on Thursday 24 March, 2016. Highways England have agreed to attend the SE LEP Board meeting on 11<sup>th</sup> March, 2016 to present the options and discuss this in more detail.
- 5.2 There is cross-party opposition to the proposals from members of Thurrock Council. Our JSNA has already identified that poor air quality is a major Public Health issue for many of our residents, and members fear that the proposals will make this situation worse, to the detriment of the health of our population.

#### **6. Thurrock Online Data Repository**

- 6.1 Due to the increased digital agenda both within the Council and nationally, more and more people are turning to web services for information and data sources. Creation of a shared information portal to collate and publish a range of Council and Health data indicators should result in assurance that accurate and validated data sources are used to inform decision making, support the integrated commissioning principles by encouraging closer work between local authority and health colleagues, and ensure Thurrock's alignment to the future digital agenda. The Council's Directors Board approved the Public Health team's request to create an online data portal/repository in November 2015 as part of the Council's wider Digital Transformation workplan.
- 6.2 Some of the expected benefits to creating and maintaining this portal include:

- A robust, continually updated data repository will ensure accurate and validated sources of data are used to inform decisions
- All Joint Strategic Needs Assessment (JSNA) products can be published on the data repository, increasing access to, and use of them across and beyond the council to support evidence based commissioning
- Increased transparency of data
- A data repository provides *one version of the truth* for all local agencies to access.
- A data repository can be used by statutory and third sector agencies in Thurrock to find data on local need to support external funding/grant applications, potentially increasing revenue.
- It could support non-analytical staff to increase their understanding and use of data sources, and subsequently increase capacity for specialist analysts to undertake more complex tasks
- It will be quicker and easier to find sources of information
- It will lead to improved joint working between Local Authority and CCG colleagues
- It will enable those who live and work in Thurrock to have a better understanding of their borough
- The ability to refresh publically-released data more regularly may result in strategy documents needing to be fully updated on a less-frequent basis.

6.3 Some background work of potential suppliers has already been carried out, and discussions are currently underway with key stakeholders to consolidate high-level requirements. A service specification is being drafted to incorporate these requirements before it is subjected to the Council's procurement processes and an external supplier appointed. The process is being project-managed by Public Health; however it is envisaged that ongoing maintenance and support to the portal will be a collective effort.