

MINUTES OF THE PUBLIC HEALTH WORKING GROUP

Tuesday, 13 January 2015 at 7.00 pm

PRESENT: Councillors Stella Jeffrey (Chair), David Michael, John Muldoon, Jacq Paschoud and James-J Walsh and Alan Hall

APOLOGIES: Councillor Ami Ibitson

ALSO PRESENT: David Austin (Head of Corporate Resources), Aileen Buckton (Executive Director for Community Services), Charlotte Dale (Interim Overview and Scrutiny Manager), Barrie Neal (Head of Corporate Policy and Governance), Georgina Nunney (Principal Lawyer), Shola Ojo (Principal Accountant, Budget Strategy), Dr Danny Ruta (Director of Public Health) (Public Health Lewisham) and Councillor Chris Best (Cabinet Member for Health, Wellbeing and Older People)

1. Minutes of the meeting held on 15 December 2014

- 1.1 **RESOLVED:** That the minutes of the meeting held on 15 December 2014 be agreed as a true record, subject to Councillor Muldoon's declaration of interest being amended from 'elected governor' to 'lead governor' of the SLAM NHS Foundation Trust.

2. Declarations of interest

- 2.1 Councillor Muldoon declared a non-pecuniary interest as the Lead Governor of the SLAM NHS Foundation Trust.

3. Public Health Working Group - draft report and recommendations

- 3.1 The results of the consultation with the Lewisham Clinical Commissioning Group were considered and discussed by the Working Group. In particular, the following points were noted:
 - Efforts were being made to encourage more schools to take up external public health programmes.
 - The Natural Childbirth Trust (NCT) issued licences to breastfeeding cafes in the borough, at a cost to the Council, which provided the users of the cafes with a level of assurance. However, there was no reason why breastfeeding cafes needed to be licensed in future, providing the crucial beneficial elements remained, such as facilitators having specific skills and training in breastfeeding and peer support. However, a six month extension to the breastfeeding support contracts to ensure UNICEF status was achieved might be worthwhile, although this would require £13k saving to be found elsewhere.
 - Driving down the costs of central Genito-Urinary Medicine (GUM) services was being tackled on a London wide level. Improving local sexual health clinics was challenging, when GUM services (that were

proportionately more expensive than local services) were taking a lot of the available budget by re-charging the borough for dealing with Lewisham patients. However, officers were working hard to improve the quality of the local offer and the Healthier Communities Select Committee was due to consider the Sexual Health Strategy action plan at its meeting the following evening.

- 3.2 The Working Group discussed the Public Health budget and the following points were noted:
- A lot of public health activity was contract based and these contracts were paid at the end of the year, making spend to date seem relatively modest. In addition, sexual health spending was tariff based and it could take a number of months for the invoices to be received.
 - All contracts were closely monitored to make sure that services were being delivered.
 - The only anticipated underspend in the Public Health budget was the uplift in funding received from the Department of Health at the start of the year which was unexpected and uncommitted and was being held.
 - It would be possible to profile the budget over the year but this would require a change to the Council's financial forecasting model.
- 3.3 The Working Group considered its final report and discussed the recommendations it would like to make.
- 3.4 **RESOLVED:** That the following recommendations be included in the Working Group's final report:

Public Health at Lewisham

1. The Working Group notes that the staffing arrangements in Public Health are due to be reviewed with a restructure effective from April 2015. The Working Group would like the Healthier Communities Select Committee to be updated on the new staffing structure once this is in place.

Mitigation

2. The Working Group supports the concerns raised by the Lewisham Clinical Commissioning Group that the achievement of UNICEF/WHO baby friendly status in 2015 might be put at risk by the renegotiation of contracts relating to breastfeeding cafes. Mayor and Cabinet should be provided with a list of the steps that will be taken by officers to ensure that this does not happen.
3. The integration of services via the neighbourhood model is crucial to achieving the required savings and further integration is clearly required. The Healthier Communities Select Committee should continue to receive updates on the integration programme including information on the savings being achieved via the programme.

4. The Health and Wellbeing Board will need to satisfy itself that the approach being taken in relation to the neighbourhood model involves a high degree of risk management and continuous review.
5. The impact of the reduction in funding on VCS organisations needs to be monitored and it is suggested that the Safer Stronger Select Committee reviews this at the end of September 2015.

Reinvesting savings

6. The Healthier Communities Select Committee should have the opportunity to comment on and scrutinise the proposed use of the savings resulting from the implementation of the 2015/16 public health savings proposals. A full breakdown of the use of the savings resulting from the proposals should be provided to the Healthier Communities Select Committee once this has been agreed.

4. Items to be referred to Mayor and Cabinet

- 4.1 The Working Group's report would be submitted to the Public Accounts Select Committee on 5 February 2015; and forwarded on to Mayor and Cabinet on 11 February 2015.

The meeting ended at 8.25 pm

Chair:

Date:
