

# MOTION ON NOTICE

22 June 2015



## GOVERNMENT ANNOUNCEMENT ON CUTS TO PUBLIC HEALTH FUNDING

On 4<sup>th</sup> June 2015 the Government announced that it is launching a consultation on removing £200 million from local authority Public Health budgets within the current financial year. This forms part of a programme to make £4.5 billion of savings in the upcoming July budget. The announcement indicates that the figure, which amounts to 7.4% of local authority Public Health funding, is based on projected underspends of Public Health grant funding.

There are currently no details as to how the proposed cuts to funding will be allocated.

Plymouth is already under-funded for Public Health. The per head of population allocation is currently £47 compared to the target figure of £57 per head, representing an existing shortfall of approximately £3 million on what would be a target allocation. This situation exists despite the fact that Plymouth has a number of complex public health challenges. The 2015 Health Profile for Plymouth published by Public Health England shows that the situation is significantly worse in Plymouth than the national average for 13 out of 32 health indicators, including smoking prevalence and smoking related deaths, opiate and crack use, sexually transmitted infections and alcohol specific hospital stays in under 18's.

The whole health economy in Plymouth and the NEW Devon CCG area is significantly challenged and has been identified by NHS England as one of 3 areas in need of additional support to protect and promote services to patients through a support regime.

The NHS Forward View, which has received cross party support, sets the aspiration of an “upgrade in prevention” and commits to making the NHS a service that prevents as well as treats illness. The plan recognises that prevention is essential to ensuring the sustainability of the NHS going forward.

Our ability to invest money into innovative programmes of work aimed at tackling health inequalities in Plymouth has been restricted by our historical underfunding, which means that there is little scope in investing money into anything other than mandated public health services. Last year, there were opportunities to save money; not through restrictions to public health services, but through things such as staffing costs. A decision was made to use this money to develop a planned programme of public health projects, to be initiated in 2015-16, which would go beyond the services currently commissioned and explore new ways of improving the health of the population. This programme would not be possible without those savings.

We call upon this Council and the City's Members of Parliament to write to the Under Secretary for Public Health [Jane Ellison MP] and the Chancellor of the Exchequer [George Osborne MP] asking that the government reconsider this decision or in taking it forward that they;

- (1) Ensure transparency in how budget claw-back will take place and use the opportunity it presents to address the inequitable current public health funding allocations by making savings from those local authorities who are funded to levels above their target value and by raising the funding allocation of those below their target value to that value.
- (2) Consider the 3 health economies identified for additional support by NHS England to be special cases in terms of public health funding allocation and recognise that public health funding and a preventative health approach will be an essential resource to help the local health economies meet the challenges they face in developing sustainable local health systems.
- (3) Recognise that local authorities should be able to operate in a way that enables them to forward plan to deliver new services and drive forward locally relevant service initiatives to tackle health inequalities and improve the health of their local populations. This may require financial management that delivers an under-spend in any one year and the building of a local financial reserve.
- (4) Recognise that reducing funding for public health goes against the aspiration and ambition of the NHS Forward View for increasing investment in prevention.
- (5) Recognise that local authority public health funding is currently used to commission NHS services [e.g. NHS stop smoking services, sexual health services including hospital based GUM services, school nurses] and as such, the statement that these funding cuts are not related to NHS services is incorrect.

**Proposed by Councillor Tudor Evans**

**Seconded by Councillor Ian Bowyer**

**Dated 15 June 2015**