Dear Colleague,

Commissioning Intentions 2016-2017 Public Health Suffolk

This letter sets out the commissioning intentions for Public Health Suffolk in 2016-2017. During 2015-16 the procurement process has been completed for an integrated Healthy Lifestyle Service and the new integrated Drug and Alcohol service and Integrated Sexual Health Service have been put in place. In October 2015 the commissioning responsibility and budget for Health Visiting services and Family Nurse Partnerships were transferred from NHS England to Public Health Suffolk.

During 2015-16 the Department of Health clawed back 6.2% of the public health grant which for Suffolk was £1.89 million. Public Health Suffolk has been able to accommodate this decrease in funding without affecting commitments for 2015-16. The Government has since announced that this reduction is recurrent and further reductions of 2.2% in 2016-17 and 2.8% in 2017-18 will take place followed by further reductions over the two financial years 2018-19 and 2019-20. Additionally Suffolk County Council (SCC) has severe financial pressures and Public Health Suffolk have budgeted for £1 million recurrently from April 2016 to support the continuation of activities and interventions that improve health and wellbeing that would otherwise have been at risk. These commissioning intentions have been produced in the context of the described reductions in funding.

The responsibilities of Public Health in Suffolk County Council

The Health and Social Care Act 2012 gave SCC a duty to improve the health of their population. There was a requirement to appoint a Director of Public Health (DPH) as a statutory chief officer with a leadership role spanning health improvement, health protection and public health support to NHS commissioning.

There are a number of steps and services that have been mandated:

- Steps must be taken to protect the health of the local population
- SCC needs to ensure NHS commissioners receive the specialist public health advice they need
- The mandated services that must be commissioned are:
  - Sexual health services with appropriate access
  - The National Child Measurement Programme (NCMP)
  - NHS Health Check assessments
  - 0-5 public health services (including Health Visitors)

SCC is also responsible for commissioning a range of other services for example drug and alcohol services and lifestyle services such as smoking cessation services and weight management services. Performance is monitored locally in line with the Public Health
business plan objectives and judged nationally through the Public Health Outcome Framework.

Commissioning services that produce the required outcomes are effective and value for money

Public Health Suffolk follows Suffolk County Council’s Procurement Regulations. This means that for services of a significant value and where there is a mature and identifiable market we will run open competitions which will follow these regulations. (http://www.suffolk.gov.uk/business/supplying-us/).

Public Health commissions services that improve health and reduce health inequalities for people in Suffolk. If disinvestment is required then decisions will be backed by an understanding of the impact of the intervention on the public’s health (including health inequalities) and the health burden that the intervention addresses.

All financial commitment will be underpinned by a process of:
- The assessment of needs including identification of the current level of service provision, outcomes being achieved and any gaps or inequity of provision.
- Consultation with service users and stakeholders
- Use of research and evidence to identify clinical effectiveness and good practice;
- Alignment with national and local policy and guidance.

Where possible extensive market engagement will take place as part of any procurement process to ensure that commissioned services offer best value and meet the diverse needs of the Suffolk population.

We ensure that improvements in quality and innovation are embedded into our contracts. Value for money is considered as a matrix of cost, quality standards and the likely health and economic benefit of having a service, or a particular model of service delivery, in place.

We adhere to the principles within the SCC Commissioning and Procurement Good Practice Guide (2013). We will also consider how to improve the economic, social and environmental well-being of Suffolk through our commissioning.

Commissioning plans for 2015/16

We will continue to work with the providers of drug and alcohol services and sexual health services as they develop the services started during 2015. We will work with the new providers of the extended integrated healthy lifestyle service (IHLS) to ensure a smooth transition and the provision of the extended range of services set out in the specification.

We will continue to work with GP practices and community services to commission services that improve local access and provide timely interventions.

We intend to re-procure three services where contracts expire by April 2017:
- Health Visiting, Family Nurse Partnership and School Nurses in Waveney as the contract that transferred from NHS England expires in April 2017. For the rest of Suffolk these services are provided by the Children and Young People’s Directorate in SCC, and there are no plans to re-procure this part of the service.
- Community support services for those with HIV living in Suffolk
- Breast feeding peer support services
We will also:

- Tender for “tier 4” Drug and Alcohol service. The aim is to improve the consistency of quality and cost effectiveness of these specialist residential services for individuals in need of detoxification and rehabilitation.
- Procure a new service for accommodation and support for the Syrian Refugee programme in Suffolk

All procurements for services will be advertised on the County Council’s electronic tendering system and therefore it is important that prospective as well as current providers register on that system. [https://www.suffolksourcing.co.uk/epps/home.do](https://www.suffolksourcing.co.uk/epps/home.do)

During 2016-17 we will continue to build on our work with colleagues in Adult and Community Services, Children and Young Peoples services, NHS clinical commissioning groups in Suffolk, neighbouring Public Health teams in Norfolk, Suffolk and Essex and NHS England to ensure that our services complement rather than duplicate. We will also work with partners to ensure that our services can address issues that are difficult to resolve. For example the Health and Wellbeing Board have highlighted the need to work towards a “smoke free Suffolk” which involves work with hospitals, housing providers and the police.

Other priority areas Public Health Suffolk will be focusing on during 2016-17 are: relevant recommendations from the needs assessments focusing on Groups at Risk of Disadvantage, Hidden Harm and Alcohol use in the over 50s; the development of three year contracts for primary care providers; supporting the improvement of the quality of healthy lifestyle conversations in primary care and exploring the possibility of setting up a rotational apprenticeship scheme within public health commissioned services to help develop the workforce going forward.

If you have any queries relating to this letter then please contact Dr Amanda Jones, Assistant Director of Public Health and Lead Consultant for Health Protection and Health improvement at amanda.jones@suffolk.gov.uk

Yours sincerely,

[Signature]

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Director of Public Health