

Public health advice to NHS commissioners



Strategic planning: assessing needs

Public health advice to NHS commissioners	Examples
Supporting clinical commissioning groups to make inputs to the joint strategic needs assessment and to use it in their commissioning plans	Joint strategic needs assessment and joint health and wellbeing strategy with clear links to clinical commissioning group commissioning plans
Development and interpretation of neighbourhood/locality/practice health profiles, in collaboration with the clinical commissioning groups and local authorities	Neighbourhood/locality/practice health profiles, with commissioning recommendations
Providing specialist public health input to the development, analysis and interpretation of health related data sets including the determinants of health, monitoring of patterns of disease and mortality	Clinical commissioners supported to use health related datasets to inform commissioning
Health needs assessments for particular conditions/disease groups – including use of epidemiological skills to assess the range of interventions from primary/secondary prevention through to specialised clinical procedures	Health needs assessments for condition/disease group with intervention/commissioning recommendations



Strategic planning: reviewing service provision

Public health advice to NHS commissioners	Examples
Identifying vulnerable populations, marginalised groups and local health inequalities and advising on commissioning to meet their health needs. Geo-demographic profiling to identify association between need and utilisation and outcomes for defined target population groups, including the protected population characteristics covered by the equality duty	Vulnerable and target populations clearly identified; public health recommendations on commissioning to meet health needs and address inequalities
Support to clinical commissioning groups on interpreting and understanding data on clinical variation in both primary and secondary care. Includes public health support to discussions with primary and secondary care clinicians if requested	Public health recommendations on reducing inappropriate variation
Public health support and advice to clinical commissioning groups on appropriate service review methodology	Public health advice as appropriate





Strategic planning: deciding priorities

Public health advice to NHS commissioners	Examples
Applying health economics and a population perspective, including programme budgeting, to provide a legitimate context and technical evidence base for the setting of priorities	Review of programme budget data Review of local spend/ outcome profile
Advising clinical commissioning groups on prioritisation processes – governance and best practice	Agreed clinical commissioning group prioritisation process
Work with clinical commissioners to identify areas for disinvestment and enable the relative value of competing demands to be assessed	Clear outputs from clinical commissioning group prioritisation
Critically appraising the evidence to support development of clinical prioritisation policies for populations and individuals	Clinical prioritisation policies based on appraised evidence
Horizon scanning: identifying likely impact of new National Institute for Health and Clinical Excellence guidance, new drugs/technologies in development and other innovations within the local health economy and assist with prioritisation	Public health advice to clinical commissioners on likely impacts of new technologies and innovations





Procuring services: designing shape and structure of supply

Public health advice to NHS commissioners	Examples
Providing public health specialist advice on the effectiveness of interventions, including clinical and cost-effectiveness (for both commissioning and de-commissioning)	Public health advice on focusing commissioning on effective/cost-effective services
Providing public health specialist advice on appropriate service review methodology	
Providing public health specialist advice to the medicines management function of the clinical commissioning group	Public health advice to medicines management, for example ensuring appropriate prescribing policies

Procuring services: planning capacity and managing demand

Public health advice to NHS commissioners	Examples
Providing specialist input to the development of evidence-based care pathways, service specifications and quality indicators to improve patient outcomes	Public health advice on development of care pathways/specifications/quality indicators
Public health advice on modelling the contribution that interventions make to defined outcomes for locally designed and populated care pathways and current and future health needs	Public health advice on relevant aspects of modelling/capacity planning





Monitoring and evaluation: supporting patient choice, managing performance and seeking public and patient views

Public health advice to NHS commissioners	Examples
Public health advice on the design of monitoring and evaluation frameworks, and establishing and evaluating indicators and benchmarks to map service performance	Clear monitoring and evaluation framework for new intervention/service public health recommendations to improve quality, outcomes and best use of resources
Working with clinicians and drawing on comparative clinical information to understand the relationship between patient needs, clinical performance and wider quality and financial outcomes	
Providing the necessary skills and knowledge, and population relevant health service intelligence to carry out health equity audits and to advise on health impact assessments	Health equity audits Public health advice on health impact assessments and meeting the public sector equality duty
Interpreting service data outputs, including clinical outputs	Public health advice on use of service data outputs





The National Child Measurement Programme

The National Child Measurement Programme (NCMP) annually weighs and measures children in reception year and year six in maintained schools in England. The NCMP provides high-quality, locally reliable data on child overweight and obesity levels and trends. This surveillance data is key to improving our understanding of overweight and obesity in children and is used both locally and nationally to inform the planning and development of policy and programmes. It also provides an opportunity to raise public awareness of child obesity and to assist families to make healthy lifestyle changes through provision of a child's result to their parents.

The quality and reliability of the data gathered through the NCMP is dependent on sustaining a high participation rate within every area, and on the data being collected in a consistent way. This ensures: a complete picture of the national prevalence of child obesity; consistency of data between areas; local data that is as robust as possible; and year-on-year, allows reliable statistical comparisons to be made.

To ensure that the quality of the data is maintained, in addition to giving local authorities funding and power to deliver the

NCMP as part of their local public health responsibilities, the Government will mandate the collection and return of NCMP data so that the programme can continue to successfully fulfil its public health surveillance function.

NHS Health Check Assessment

The NHS Health Check programme is for people in England aged 40 to 74 and aims to prevent heart disease, stroke, diabetes and kidney disease, which account for a significant burden of ill health and premature mortality. It is a risk assessment and risk management programme, and both elements are important. Those receiving a NHS Health Check risk assessment need to be supported to manage their risk through appropriate follow-up. The Government intends to mandate local authorities to offer everyone eligible between the ages of 40-74 a Health Check assessment every five years. While the provision of lifestyle advice and interventions will not be mandated, there is an expectation that local authorities will commission appropriate services and ensure that the NHS Health Check assessments are adequately followed up.

Local authorities will need to work closely with clinical commissioning colleagues to ensure that people identified as high risk through their assessment, or requiring additional testing or medical interventions are provided with the services they need. This is an area which the health and wellbeing board may wish to focus on to ensure that there is a well-integrated system, where checks are properly followed up by appropriate treatment.

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