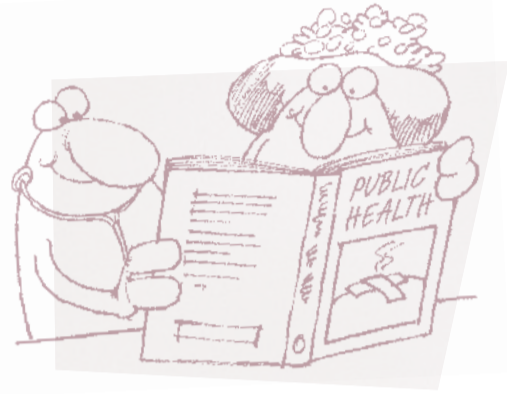


WHAT'S IT ALL ABOUT?

Public Health and Clinical Commissioning Groups

Public health improves and protects health and reduces inequalities by taking a population approach to health outcomes.

What are your public health functions and responsibilities?



- **improving health, preventing ill health and reducing health inequalities** – CCGs will be well placed to commission and contribute to local programmes which deliver improved outcomes for public health issues such as obesity, smoking cessation, alcohol misuse, sexual health
- **delivering value for money, evidence-based health and social care whilst maintaining quality** – CCGs will want their commissioning to be based on evidence of clinical and cost effectiveness, quality and improved outcomes for patients
- **protecting health** – CCGs will be well placed to address infection control, immunisation and vaccination, and emergency planning

Who can help CCGs?

Public health professionals with expertise to assist in delivering public health responsibilities.

- **specialists:** qualified at consultant level with expertise across all public health functions; available through the new national Public Health Service, via the Director of Public Health located within local councils, or specifically employed or contracted in on a project or sessional basis



- **operational staff (practitioners):** delivering a range of programmes on the ground and including health visitors, sexual health nurses, infection control nurses, health information analysts, health promotion officers, smoking cessation advisers; available to consortia via programmes commissioned from a range of providers or directly through practices or local councils

What can help CCGs?

Specific public health skills and knowledge to deliver effective commissioning.

- **health intelligence:** analysing, interpreting and presenting information to aid comparison of referral/performance activity across practices/populations; informing Joint Strategic Needs Assessments, understanding where to target to get the best return on investment; and monitoring of health outcomes
- **evidence base:** providing succinct evidence of what works based on cost, activity, population impact, risk and best practice; and identifying areas for disinvestment/best return on investment
- **effective clinical pathways:** mapping patient and clinical pathways; using evidence to inform service redesign and negotiating change with clinicians; and effective integrated pathways for health and social care
- **engaging communities and partners:** providing methodologies for working with and accessing relevant information from communities, councils, public and patients, to deliver health improvement and effective joint working
- **protecting health:** responding to threats to health through specific immunisation and infection control programmes, providing advice on effective prevention and screening, managing disease outbreaks
- **improving health:** providing evidence of what works to deliver targeted behaviour change within discrete populations



Questions for CCGs?

- What do you need to understand about “public health” to commission services effectively?
- What skills do you need to develop amongst your own staff, including key GPs?
- What support will you want to obtain from other organisations?