Shifting the gravity of spending?
Exploring methods for supporting public health commissioners to improve population health and address health inequalities

Professor David Hunter

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Background

- Return of public health commissioning to local authorities
- Priority-setting will take place in new organisational and cultural settings in a context of local democratic accountability
- Transfer of public health budget (ring-fenced until 2015-16)
- Increased urgency of demonstrating return on investment for public health
- Austerity, minimising risk and strategies for disinvestment
Research Questions

- Which prioritisation tools do local authority commissioners find useful for prioritising public health investment and why?

- What are the enablers and barriers for decision-making related to prioritising investment in public health?

- What difference does the use of specific decision-making support exert on spending within and across programmes with reference to improving health and addressing health inequalities?
Project Approach

- Case study sites: three local authorities in England (borough council, city council, county council)

  - Applied research focus and working in partnership
  - Three days of targeted health economics support for each case study site
Emerging Findings

- Views on prioritisation methods
- Public health and the ring-fenced budget
- Adopting priority-setting tools: enablers and barriers
- Decision-making contexts
Methods for Decision-Support

- Varied experience of decision-support methods
  - Portsmouth scorecard, option appraisal, PBMA, decision-conferencing, ROI

- Scorecard approaches are of interest (in two sites to date)
  - Prioritising across the ring-fenced budget
  - Assessing options for specific service areas/topics

- Different approaches are emerging over the selection of criteria and over what counts as evidence

- Flexibility and sustainability of methods is important
Views on Prioritisation Methods

- Different organisational arrangements for public health teams
  - distributed across the local authority
  - centralised team
- Deployment of the public health budget is under review in all sites
- Different perceptions over the ‘room for manoeuvre’ in the ring-fenced budget
- A shift (in some sites) towards addressing wider determinants of health with longer-term impacts – likely to affect current patterns of provision
- Questions being raised over how to maximise public health impact across the local authority
Adopting Priority-setting Tools: Enablers and Barriers

- Importance of discussing local needs and context, finance, political influence, values, evidence
  - Political values shape decisions on investment and disinvestment
  - Concerns about adequacy of evidence and its reliability
  - Time constraints and participants' knowledge and skills base
Decision-Making Contexts

- Impact of austerity and spending cuts
- Broader understanding of public health
- Local authorities viewed as having a stronger influence over the social determinants of health
- Protecting public health from the demands of acute care spending seen to be important
- Disconnect between public health and NHS problematic
- Central influence of political interests and what holds public appeal
Next Steps

- Completion of decision support to field sites
- Further data collection and analysis – national survey, follow-up interviews
- Comparative analysis of case study sites
- Possible follow on study
Contact Details

www.shiftingthegravityofspending.org.uk

Silvia Scalabrini
silvia.scalabrini@durham.ac.uk