

Health and local public health cuts

House of Commons

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Key messages

- Councils play a vital role in commissioning and providing vital public health services for their communities. Since the transfer of public health to local government in 2013, councils across England have seized the opportunity to transform public health.
- Devolving public health to the local level was a positive step. By joining up care, health, housing, transport, welfare and education, councils have made positive strides in improving the social determinants of health and wellbeing.
- Despite councils' good work, the current funding model is not sustainable. Local authorities' public health grant funding has reduced by over £700 million in real terms between 2015/16 and 2019/20.¹
- It is positive that the Government has issued its firm commitment to the NHS Long-Term Plan, with prevention put very much at its heart and a forthcoming prevention Green Paper. It is, however, short-sighted to accompany this with reductions to public health services.
- Investing in prevention saves money for other parts of the public sector by reducing demand for the NHS and social care services. It is also more effective in improving people's health. Reductions in the public health budget will only prove counterproductive to both the public purse and health outcomes.
- The forthcoming prevention Green Paper should allow us to explore the benefits of prevention from a system-wide perspective which includes all the social determinants of health. Any proposals must be based on engagement with councils and with the public health community.
- There will be an £8 billion shortfall facing councils by 2025. A range of services that contribute to health and wellbeing are significantly underfunded, including housing, leisure, and green spaces. It is vital that the Government uses the 2019 Spending Review to deliver truly sustainable funding for public health and local government.

Briefing

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FURTHER INFORMATION

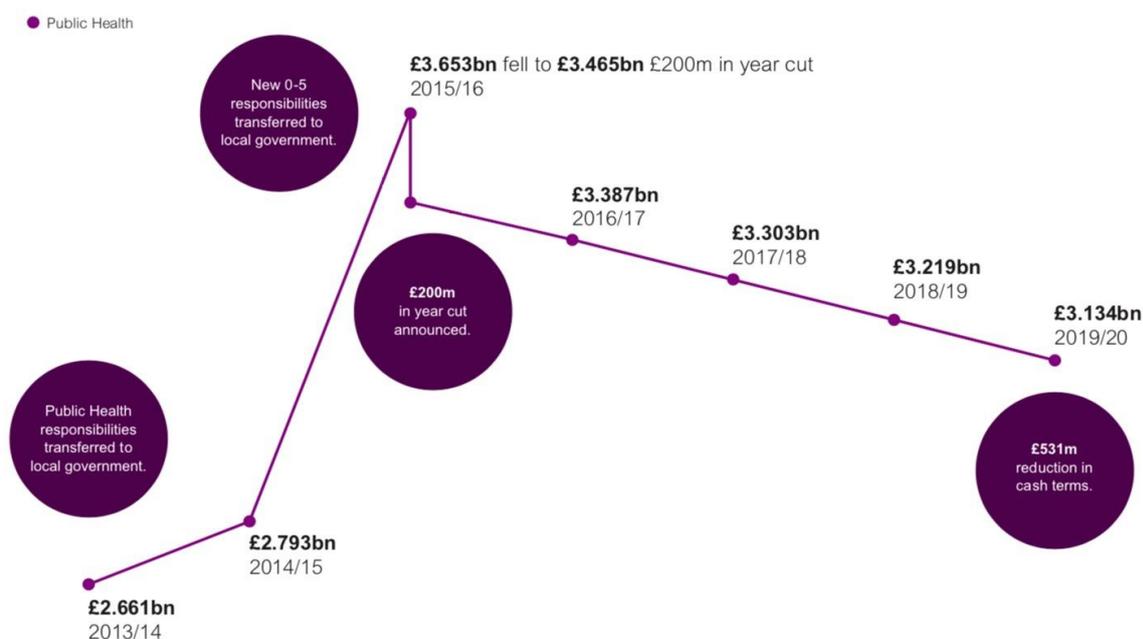
The financial context

Local government is operating within extremely tight financial constraints. The public health grant has been cut by over £700 million in real terms from 2015/16 to the end of the decade.² This equates to £531 million in cash terms.

In addition, Government funding for the Early Intervention Grant has been cut by almost £500 million since 2013 and is projected to drop by a further £183 million by 2020.³ Our analysis shows that at current levels of funding and service provision, and taking into account inflation and demography, local government will face a funding gap of nearly £8 billion by 2025.

PUBLIC HEALTH FUNDING A MISSED OPPORTUNITY?

A short history of the public health grant in local government.



The impacts on services

The reductions to the public health budget reinforce the view that central Government views public health functions as nice-to-do but ultimately non-essential. Interventions to address teenage pregnancy, alcohol and drug misuse, physical inactivity, and sexually transmitted infections cannot be seen as an added extra for health budgets. Drug-related deaths continue to cause alarm, physical inactivity and obesity remain stubbornly high and mental health, although not a new priority, has become even more urgent.

The largest sections of the public health budget in many local authorities directly commission the NHS to deliver services like sexual health, drug and alcohol treatment and NHS health checks. Councils have had no choice but to passport these reductions onto providers and it will be impossible for these reductions to avoid hitting the NHS. Any reduction to public health budgets represents a cut to the NHS in all but name.

Pressures on sexual and reproductive health, stop smoking, and drug and alcohol services continue to be felt. We have repeatedly warned that sexual health services are at a tipping point, and are concerned that this will see waiting times start to increase and patient experience deteriorate.

Public health commissioning

The transfer of public health responsibilities to local government from the NHS under the Health and Social Care Act 2012 was one of the largest shifts in responsibilities from national to local government in decades.

Councils' public health teams have worked extremely hard to achieve more with less. They have collaborated with their local NHS and voluntary sector, sharing public health initiatives and sometimes even public health teams across councils.

Local authorities have taken some decisions that the NHS could not or would not make. Significant modernisation of sexual health services, for example, have coped with the substantial increase in demand for services despite a reduction in funding. The same can be said for health visiting: outcomes have held up while funding has reduced. Local government relationships with providers and partners have helped achieve these successes.

We support the renewed focus on prevention alongside commitments to tackle health inequalities and shift the NHS towards a population health focus. While commitments for the NHS to do more to promote prevention are welcome, cuts to local government funding for public health services underline the need for a more consistent approach across Government to the population's health.

Despite the welcome focus on prevention, health inequalities and population health, the success of the next few years will depend on proper funding for local government public health. Local partners must work effectively together to build on place-based plans to improve health and wellbeing.

Good practice from individual councils shows what potential there is for public health, if properly resourced, to make inroads into improving health and wellbeing, and to do it efficiently. We have, on a number of areas, delivered better outcomes at less cost than the NHS did when they controlled public health.

The future of public health

There needs to be a greater shift away from health and care investment in treatment and towards prevention. We are pleased that the recent NHS Long-Term Plan recognises this. By joining up care, health, planning, housing, transport, welfare and education, councils have made positive strides in tackling the social determinants of health and wellbeing from early childhood and throughout life.

Since the transfer of public health to local government, councils across England have seized new opportunities to make health everybody's business. The ability for local authorities to innovate and increase efficiency is nearing its end. Investment in public health must be increased. Reductions to public health budgets must be reversed and public health needs to be put on a sustainable footing.

The rationale for a local government lead in public health is clear. The greatest impacts on health are the circumstances in which we live, employment, education, environment and the effects of the social gradient of health, that is, equality or the lack of it. Local government can have a greater impact on these factors than the NHS.

The forthcoming Government prevention Green Paper should allow us to consider the opportunities for prevention from a system-wide perspective which includes all the social determinants of health. However, it must be based on engagement with councils and with the public health community, and for any progress to be made it must be accompanied by proper funding for local government public health.

PUBLIC HEALTH FUNDING A MISSED OPPORTUNITY?

If Public Health grant funding to local government keeps pace with NHS England funding councils will have had an **additional £1.7 billion** to invest in vital public services from 2020/21 to 2023/24.



FURTHER READING

LGA, *Public health transformation six years on: partnerships and prevention* (March 2019): <https://www.local.gov.uk/public-health-transformation-six-years-partnerships-and-prevention>

LGA, *Nobody left behind: maximising the health benefits of an inclusive local economy* (February 2019): <https://www.local.gov.uk/nobody-left-behind-maximising-health-benefits-inclusive-local-economy>

LGA, *Improving the public's health: local government delivers* (February 2019): <https://www.local.gov.uk/improving-publics-health-local-government-delivers>

¹ Public health grants to local authorities: 2018 to 2019 <https://www.gov.uk/government/publications/public-health-grants-to-local-authorities-2018-to-2019>

² Public health grants to local authorities: 2018 to 2019 <https://www.gov.uk/government/publications/public-health-grants-to-local-authorities-2018-to-2019>

³ Children's services funding – facts and figures (LGA) <https://www.local.gov.uk/about/campaigns/bright-futures/bright-futures-childrens-services/childrens-services-funding-facts>