# **Blackpool Council - Public Health**

# Revenue summary - budget, actual and forecast:

	BUDGET EXPENDITURE				VARIANCE	
	2016/17					2015/16
FUNCTIONS OF THE SERVICE	ADJUSTED	EXPENDITURE	PROJECTED	FORECAST	F/CAST FULL	(UNDER)/OVER
	CASH LIMITED	APR-JUN	SPEND	OUTTURN	YEAR VAR.	SPEND B/FWD
	BUDGET				(UNDER) / OVER	
	£000	£000	£000	£000	£000	£000
PUBLIC HEALTH						
NET EXPENDITURE						
MANAGEMENT AND OVERHEADS	1,837	613	1,224	1,837	-	-
NHS HEALTH CHECKS - MANDATED	556	333	223	556	-	-
CHILDREN (5-19) - PUBLIC HEALTH PROGRAMMES	722	722	-	722	-	-
CHILDREN'S 0-5 SERVICES	3,113	2,487	626	3,113	-	-
TOBACCO CONTROL	565	64	501	565	-	-
MENTAL HEALTH AND WELLBEING	24	2	22	24	-	-
SEXUAL HEALTH SERVICES - MANDATED	2,345	1,661	684	2,345	-	-
SUBSTANCE MISUSE (DRUGS AND ALCOHOL)	3,746	1,074	2,672	3,746	-	-
HEALTHY WEIGHT/WEIGHT MANAGEMENT	178	48	130	178	-	-
OTHER PUBLIC HEALTH SERVICES	204	180	24	204	-	-
MISCELLANEOUS PUBLIC HEALTH SERVICES	6,106	6,106	-	6,106	-	-
GRANT	(19,392)	(4,848)	(14,544)	(19,392)	-	-
TOTALS	4	8,442	(8,438)	4	-	-

## **Commentary on the key issues:**

## **Directorate Summary – basis**

The Revenue summary (above) lists the latest outturn projection for each individual scheme against their respective, currently approved, revenue budget. Forecast outturns are based upon actual financial performance for the first 3 months of 2016/17 together with predictions of performance, anticipated pressures and efficiencies in the remainder of the financial year, all of which have been agreed with the services leads.

#### **Public Health Grant**

The Public Health Grant is a central government grant which is ring-fenced until March 2017.

The grant conditions require quarterly financial reporting of spend against a prescribed set of headings and spend of the grant must link explicitly to the Health and Wellbeing Strategy, Public Health Outcomes Framework and Joint Strategic Needs Assessment.

## Payment by Results (PbR)/ Activity-based Commissioning

A number of Public Health schemes' payments are linked to activity. The aim of Payment by Results (PbR) is to provide a transparent, rules-based system for payment. It rewards outputs, outcomes and supports patient choice and diversity. Payment will be linked to activity. This does, however, raise a number of challenges when determining accurate budgetary spend/forecast spend.

## **Summary of the Public Health Directorate financial position**

As at the end of June 2016, the Public Health Directorate is forecasting an overall spend of the full grant, £19,392,000, for the financial year to March 2017.

## Budget Holder - Dr Arif Rajpura, Director of Public Health