

5. It seeks approval for delegated authority to the Director of Public Health, in consultation with the Executive Lead Member, to approve individual grants with total expenditure up to the approved total.

Contextual information

6. The COMF was provided to English local authorities initially to be used for test, trace and contain activity connected to COVID-19. A letter from the UK Health Security Agency, 'Use of Control Outbreak Management Fund', 16th December 2022, stated that criteria for use are now:
 - a. Public health action on the impact of COVID-19 on health outcomes and health inequalities, and
 - b. Public health recovery projects aimed at directly addressing health inequalities'

There was also a requirement that the rationale/business case must be signed off by the Director of Public Health, be taken through local approval processes, and state the public health outcome intended and its link to the impact/recovery from COVID-19 and pandemic related health inequalities.

7. Health inequalities can be defined as 'avoidable, unfair and systematic differences in health between different groups of people' ([King's Fund](#)); these differences can include health status, access, quality and experience of care, behavioural risk factors and wider determinants. 'Health inequalities are often analysed and addressed by policy across four types of factors:
 - socio-economic factors, for example, income
 - geography, for example, region or whether urban or rural
 - specific characteristics including those protected in law, such as sex, ethnicity or disability
 - socially excluded groups, for example, people experiencing homelessness.'
8. The COVID-19 pandemic has had wide ranging impacts on the health and wellbeing of the population; both direct impacts of the disease and indirect impacts, including on prevention, diagnosis and management of long-term diseases such as cardiovascular disease and cancer, and on mental health and wellbeing. Health inequalities have also been exacerbated as a result of the pandemic, with these health impacts seen in the most deprived populations, ethnic minority populations and socially excluded (or 'inclusion health') groups.
9. The County Council must meet the public health duties which mean taking steps appropriate to improve the health of the population in its area. Improving healthy life expectancy and reducing health inequalities are key priorities for Hampshire Public Health as defined in the [Hampshire Health and Wellbeing Board Strategy 2019-24](#). The NHS is well placed to support many aspects of public health activity through referrals and delivery of services. We already have many examples of collaborative working to deliver joint priorities, such as

substance misuse workers embedded within NHS Trusts, co-occurring conditions programme and joined up sexual health provision.

10. The 2021 [‘Integration and Innovation’](#) white paper which introduced Integrated Care Systems, set out the desire to increasingly work in partnership across the NHS and local government. Integrated Care Systems’ key responsibility is to support joint working across partners; mechanisms of increasing integrated working outlined in the paper include commissioners working in partnership to improve outcomes and value and supports examples of local areas ‘seeking to align decisions and pool budgets’.
11. These proposed grants would therefore enable the County Council to increase collaboration and delivery of public health priorities through NHS services in the future. Key areas which the grants would support may include, but are not limited to:
 - a. Cardiovascular disease prevention: this is an Integrated Care System priority in both Hampshire and Isle of Wight (HIOW) and Frimley Integrated Care Boards and a significant source of inequalities. Grant funding would be used through the Integrated Care Board to improve prevention, detection and management of risk factors associated with cardiovascular disease, which have been negatively impacted as a result of COVID-19.
 - b. Mental Health interventions to meet the impact of increased mental ill health as a result of the pandemic, supporting the delivery of the actions within the [Hampshire Mental Wellbeing Strategy](#).
 - c. Activity to improve health and wellbeing for inclusion health groups and areas of higher deprivation: this aligns with our aims of reducing inequalities and the NHS’s CORE20plus5 agenda.
 - d. Reduction in inequalities as an impact of access to NHS care though working more systematically and embedding action on inequalities within local NHS Trusts (Hampshire Hospitals Foundation Trust, Southern Health NHS Trust and any successor organisation).
12. The NHS organisations which could receive grants would include: Hampshire and Isle of Wight Integrated Care Board, Frimley Integrated Care Board, Hampshire Hospitals NHS Foundation Trust, Southern Health NHS Trust and any successor organisation.

Legal

13. Section 2B of the NHS Act 2006 states that ‘Each local authority must take such steps as it considers appropriate for improving the health of the people in its area.’ and that ‘steps that may be taken under subsection (1) also include providing grants or loans (on such terms as the local authority considers appropriate).’

Finance

14. The source of the funding for the grants is the Contain Outbreak Management Fund (COMF). All allocations given would be required to be spent in accordance with the terms of the grant.
15. The grants of up to £3 million of public health funding would be utilised for delivery of public health priorities in NHS organisations. Each grant would have a grant agreement completed, which would ensure the funding is used to support the public health duties of the County Council and is used in accordance with the COMF criteria.
16. The Director of Public Health, in consultation with the Executive Lead Member for Adult Social Care and Public Health, would have approval for the spend within the total expenditure approved.

Performance

17. The Hampshire County Council Public Health Team monitor health and wellbeing outcomes using local and national data, including the Public Health Outcomes Framework.
18. Each programme or project utilising this grant funding would have its own monitoring and evaluation associated with it, which would be outlined within each grant agreement.

Consultation and Equalities

19. The purpose of these grants would be to reduce health inequalities, as defined in the COMF criteria. Reducing inequalities is a public health priority and also a priority for the NHS who work under the Core20PLUS5 framework. Reducing inequalities would therefore be a core consideration when grant funding allocation decisions are taken.
20. The impact on health inequalities would be assessed through an equalities impact assessment (EIA) for each grant approved; this information would inform the decision-making process.

Climate Change Impact Assessment

21. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience impacts of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C

temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.

22. The carbon mitigation tool and/or climate change adaptation tool were not applicable because the decision is essentially strategic/administrative in nature and does not have any climate change considerations.

Conclusions

23. Collaborative working with the NHS can support delivery of public health priorities. The proposals set out in this report would enable use of COMF within NHS organisations through grants of up to £3 million.

REQUIRED CORPORATE AND LEGAL INFORMATION:

Links to the Strategic Plan

Hampshire maintains strong and sustainable economic growth and prosperity:	no
People in Hampshire live safe, healthy and independent lives:	yes
People in Hampshire enjoy a rich and diverse environment:	no
People in Hampshire enjoy being part of strong, inclusive communities:	yes

Other Significant Links

Links to previous Member decisions:	
<u>Title</u>	<u>Date</u>
Direct links to specific legislation or Government Directives	
	<u>Date:</u>
National Health Service Act 2006	2006

Section 100 D - Local Government Act 1972 - background documents	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	

EQUALITIES IMPACT ASSESSMENT:

1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

2. Equalities Impact Assessment:

The purpose of these grants would be to reduce health inequalities, as defined in the COMF criteria. Inequalities are also a priority for the NHS, who work under the Core20PLUS5 framework to reduce inequalities. Reducing inequalities would be a core consideration when grant funding allocation decisions are taken.

The impact on health inequalities for each grant approved would be assessed through an equalities impact assessment; this information would inform the decision making process.