



Department
of Health &
Social Care

From Steve Brine MP
Parliamentary Under Secretary of State for Public Health and Primary Care

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Your Ref: Council - Funding - 20181212

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Dr Carolyn Wilkins OBE
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22 JAN 2019

Dear Dr Wilkins,

Thank you for your letter of 19 December to Matt Hancock about public health funding.

I note the concerns and suggestions raised by Oldham Council.

The Government fully appreciates the importance of protecting and improving public health. We also believe that reducing the deficit and promoting economic growth is vital to the long-term health of our economy and all public services. We recognise that the funding position for local government is extremely challenging, and understand the huge efforts that local government has made to focus on securing the best value from every pound spent.

The 2015 Spending Review made available £16 billion of funding for local authorities (LAs) in England over the five-year period. This is in addition to what the NHS spends on prevention, including over £1 billion on immunisation, vaccination and screening and £340 million on vaccine stocks in 2016/17, and the world's first national diabetes prevention programme.

Health improvement is about far more than the services funded through the grant. The transfer to local government provides the opportunity to join up public health with decisions on other local services, such as housing and economic regeneration, in the interests of improving the health of the local population.

Whilst working within the conditions and regulations of the grant, it is for LAs to determine how best to invest these resources. We expect LAs to focus on securing value for money and to challenge the way services have historically been delivered.

Many councils have redesigned services, taking a holistic approach, and are demonstrating real innovation, and we welcome this. LAs will decide their own spending, based on assessment of local need, and many local councils are re-tendering contracts and achieving better value for money than in the past.

We believe that LAs are best placed to make decisions about services that best meet the needs of their populations. We see LAs commissioning different kinds of public health services that better fit local circumstances and priorities, and that deliver improved value.

I hope this reply is helpful.



STEVE BRINE