

**FINANCE AND PERFORMANCE REPORT – March 2016**

*To:* **Health Committee**

*Meeting Date:* **12<sup>th</sup> May 2016**

*From:* **Director of Public Health  
Chief Finance Officer**

*Electoral division(s):* **All**

*Forward Plan ref:* **N/A** *Key decision:* **No**

*Purpose:* **To provide the Committee with the March 2016 Finance and Performance report for Public Health. The report is presented to provide the Health Committee with the opportunity to comment on the financial and performance forecast outturn position as at the end of March 2016.**

*Recommendation:* **The Committee is asked to review and comment on the report.**

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## **1. BACKGROUND**

- 1.1 The Finance & Performance Report for the Public Health Directorate is produced monthly and the most recent available report is presented to Health Committee when it meets.
- 1.2 The report is presented to provide the Committee with the opportunity to comment on the financial and performance position of the services for which the Committee has responsibility.
- 1.3 The March Finance and Performance Report provides a forecast year end position that may change once the closedown of accounts is completed and any outstanding 2015-16 transactions have been finalised. A final 2015-16 Closedown Finance and Performance Report will be presented to July Health Committee.

## **2. MAIN ISSUES**

- 2.1 The March 2016 Finance and Performance report is attached at Annex A.
- 2.3 Public Health Grant income will be £1.6m less than anticipated due to an in year reduction in Public Health Grant. Savings on expenditure budgets, and over achievement of income, totalling £1.7m have been identified. Therefore an anticipated surplus of £128k will be transferred into the Public Health Grant reserves to produce a balanced year end position. This is a positive change from the last Finance and Performance Report presented to Health Committee (January 2016), when it was forecast that £410k would need to be drawn down from the Public Health Grant reserve.
- 2.4 The Public Health Service Performance Management Framework for February 2016 is contained within the report. Of the thirty eight Health Committee performance indicators, twelve are red, six are amber, sixteen are green, and four currently have no status.

## **3.0 ALIGNMENT WITH CORPORATE PRIORITIES**

- 3.1 **Developing the local economy for the benefit of all**  
There are no significant implications for this priority.
- 3.2 **Helping people live healthy and independent lives**  
There are no significant implications for this priority.
- 3.3 **Supporting and protecting vulnerable people**  
There are no significant implications for this priority.

## **4.0        SIGNIFICANT IMPLICATIONS**

### **4.1        Resource Implications**

This report sets out details of the overall financial position of the Public Health Service.

### **4.2        Statutory, Risk and Legal Implications**

There are no significant implications within this category.

### **4.3        Equality and Diversity Implications**

There are no significant implications within this category.

### **4.4        Engagement and Consultation Implications**

No public engagement or consultation is required for the purpose of this report.

### **4.5        Localism and Local Member Involvement**

There are no significant implications within this category.

### **4.6        Public Health Implications**

This report provides an overview of the finance and performance position of the Public Health service.

<b>Source Documents</b>	<b>Location</b>
None	