### FINANCE AND PERFORMANCE REPORT - Outturn 2014/2015

To: Health Committee

Meeting Date: 16<sup>th</sup> July 2015

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 2014/2015 Finance and

Performance Outturn report for Public Health. The report is presented to provide the Health Committee with the opportunity to comment on the financial and performance

outturn position for 2014/2015.

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

report.

The Committee is asked to approve the proposals for the use of Public Health reserves so they can be forwarded to

the Chief Finance Officer for agreement.

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#### 1. BACKGROUND

- 1.1 The Finance and Performance Report for the Public Health Directorate is produced monthly and the most recent available report is presented to Health Committee when it meets. The Outturn Report is produced annually once the accounts have closed.
- 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.

#### 2. MAIN ISSUES

- 2.1 The 2014/2015 Finance and Performance Outturn Report is attached at Appendix A. The previous report presented to Committee (the March Finance & Performance Report) forecast the outturn position to be on target for yearend due to the carry-forward of the ring-fenced grant. The outturn position shows an increased carry-forward of £30K.
- 2.3 In July 2014, a proposal was agreed by the General Purposes Committee and then Council to change the Constitution in respect to the treatment of reserves. It was agreed that to ensure the effective use of resources and to provide some ability for reinvestment in service delivery, the basic premise of the Directorate Reserves should be retained and that any underspend against the original cash limit for the year should be retained within a Directorate Reserve. The significant change was that following the agreement of the Service Committee, the utilisation of the Directorate Reserve should be agreed between the relevant Executive/Corporate Director and the Chief Finance Officer and any element of the reserve not supported by an agreed programme will be transferred to the General Reserve at that point. Any public health funds placed in a reserve must be earmarked for public health purposes under the terms of the grant.
- 2.4 Health Committee is asked to approve the proposals below for the use of the Public Health Reserves which meet with the requirements of the ring-fenced grant. These will then be forwarded to the Chief Finance Officer for agreement.

Fund Description	Closing Balance 2014/15 £'000	Notes
	2 000	
Public Health carry-forward	952	Contingency to support in-year reduction in PH Grant
Healthy Fenland Fund	500	5 year programme commencing 2015/16
Falls Prevention Fund	400	Anticipated spend over 2 years, 2015/16 and 2016/17
NHS Healthchecks programme	270	Delayed expenditure anticipated to be spent in 2015/16
Implementation of Cambridgeshire Public health Integration Strategy	850	Spend over 2 years, 2015/16 and 2016/17
CFA DAAT	45	To be spent in 2015/16
CFA MEAM	13	To be spent in 2015/16
ETE Accident Awareness Signs	3	To be spent in 2015/16
TOTAL	3,033	

2.5 There are eighteen Public Health performance indicators in total and eight are shown as red, two as amber and eight as green. For the detail see Section 4 of the Finance & Performance Report and Appendix 6.

#### 3.0. SIGNIFICANT IMPLICATIONS

#### 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 outturn financial position of the Public Health Service for 2014/15.

## 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.

Source Documents	Location
There are no source documents for this report	