NIHR School for Public Health Research

Shifting the gravity of spending? Exploring methods for supporting public health commissioners in priority-setting to improve population health and address health inequalities

Introduction
This project is in the final wave of studies being funded through the NIHR SPHR. It is concerned with decision-making for investment in prevention at a time when local authorities in England are taking on a new role as commissioners for public health services. This will formally commence in April 2013. The project is developmental and evaluative and based on the premise that if decision-support methods are to be used they should be developed in conjunction with local commissioners, reflecting local priorities. The project will take place over two years starting in November 2012, and will involve close engagement with commissioners, practitioners and other stakeholders through targeted activities in three case study sites.

The new public health commissioning landscape
From April 2013, upper tier and unitary local authorities will take responsibility for a ring-fenced public health budget with decisions on priorities taken by Health and Wellbeing Boards (HWBs) and reflected in health and wellbeing strategies. There are complex accountability arrangements, including those between Directors of Public Health, Chief Executives and elected members, and between local authority- and public health backed partners of Sheffield, Bristol, Cambridge, UCL; The London School of Hygiene and Tropical Medicine, The Peninsula College of Medicine and Dentistry, the LiLaC collaboration between the Universities of Liverpool and Lancaster and Fuse; The Centre for Translational Research in Public Health, a collaboration between Newcastle, Durham, Northumbria, Sunderland and Teesside Universities.

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Aims of the research
• Develop support for local authority-led public health commissioners and other stakeholders in priority-setting to improve population health and address health inequalities, and in deciding on disinvestment
• Evaluate the use of evidence in the prioritisation process in order to develop broader insights for knowledge exchange

Research questions
• Which prioritisation tools do commissioners find useful for prioritising public health investment and disinvestment?
• What are the enabling and barriers for decision-making related to prioritising investment in public health?
• How could these be used in priority-setting support methods for priority setting across settings?

Methods
The project adopts a mixed methods approach
• Scoping review of priority-setting methods
• An initial review of at least three case study sites, setting up priorities in setting, setting priorities in setting, prioritising across settings
• Case study analysis and comparative evaluation of cases
• Direct observation of selected key meetings
• Case study analysis and comparative evaluation of cases

Approaches to decision-making
Decision-support methods will include FRMA (programme budgeting and financial appraisal), option analysis, and scenario modelling. The research team, in conjunction with the expert advisory group (membership to be finalised), combines skills in health economics, including FRMA, epidemiological modelling tools, and databases which include guides and costing tools. There will also be support for knowledge exchange across sites.