

SHADOW HEALTH AND WELLBEING BOARD

1st October 2012

REPORT OF THE DIRECTOR OF PUBLIC HEALTH

TRANSITION OF PUBLIC HEALTH FUNCTIONS – UPDATE

Purpose of Report

1. To update the Shadow Health and Wellbeing Board on the progress with the transition of Public Health functions to the Council.

Background

2. As a result of the enactment of the Health & Social Care Act 2012 NHS reforms are now being implemented with significant changes to responsibilities as the new bodies which will succeed the Strategic Health Authority (SHA) and the Primary Care Trust (PCT) emerge and are established. This paper identifies the current expected range of responsibilities to be held by the Local Authority; provides an update on progress with local planning and the establishment of Public Health England; and asks members to note this progress.
3. The Council has welcomed public health responsibilities being transferred back to local government because public health was at the heart of modern local government from the 19th century until 1974. To meet the Council's aim of providing the best public health services possible, an Office of Public Health is to be established in the Council, within the Chief Executive's Department with the Director of Public Health reporting directly to the Chief Executive.
4. The Health and Social Care Act 2012 places a new duty on Local Authorities to improve health and ensure that robust plans are in place to protect the local population, and provide public health advice to NHS commissioners. The new law also requires the Council to establish a Health and Well-Being Board for Dudley. This has already been done in Shadow form. As members are aware, the Board will be a new Committee of the Council, and brings together Elected Members of the Council, the Council's three statutory Directors of Public Health, Children's Services and Adult Social Services with partners from the Clinical Commissioning Group and others. Amongst its purposes, the Board will undertake a Joint Strategic Needs Assessment of the health and care needs of the Dudley population. It will produce a Joint Health and Well-Being Strategy for Dudley based on this assessment through which it can address health inequalities.

The Board also has responsibility to ensure that the voice of people using health and care services and our communities is heard to inform the leadership of the Board. One of the ways that it will do this will be through a Local Healthwatch for Dudley having a representative on the Board.

5. The Act also creates a new executive agency, Public Health England which will deliver services and support (health protection, public health information and intelligence including social marketing and behavioural insight activities), lead for public health (by encouraging transparency and accountability, build the evidence base, build relationships promoting public health) and support the development of the specialist and wider public health workforce (appointing Directors of Public Health jointly with Local Authorities, supporting excellence in public health practice and bringing together the wider range of public health professionals)
6. Dudley Council will have new responsibilities along with partners in the Dudley Clinical Commissioning Group and others to improve the health of Dudley people through addressing health inequalities and the quality of health services in Dudley. The Council can use the influence that it has through all of its services in education, housing, adult learning, social care and regeneration amongst others to improve the health of Dudley people. The NHS will also continue to commission specific public health services and will seek to maximise the impact of the NHS in improving the health of the public, making every clinical contact count. The focus will be on outcomes. The new Public Health Outcomes Framework sets out key indicators of public health from the wider determinants of health through to effectiveness in reducing premature mortality. The overall goals will be to increase healthy life expectancy and reduce health inequalities.
7. While Local Authorities through Health and Wellbeing Boards are largely free to determine their own priorities and services, they will be required to provide a small number of mandatory services (open access sexual health services, NHS health checks, National Child Measurement Programme, providing public health advice to NHS Commissioners and ensuring plans are in place to protect the health of the public). A Department of Health ring-fenced public health grant will support Local Authorities in carrying out their new public health functions. Shadow estimates have been announced for local authorities for 2012/13 to help them prepare for taking on formal responsibility in 2013/14. A DH consultation paper on the proposed formula for future grant allocations has been published. A Dudley response on the technical content of the formula has been sent.

Strategy

8. Plans have been established to manage the process. First, a Public Health Transition Group has been formed, chaired by the Chief Executive. Membership includes:

- Cllr. Zafar Islam as the Cabinet Member for Health and Well Being and Chair of the Dudley Shadow Health and Well Being Board.
 - Director of Public Health together with the Deputy Director of Public Health.
 - Director of Adult, Community and Housing Services.
 - Director of Children's Services.
 - Assistant Director, Directorate of the Urban Environment.
 - Officers from a range of the Council's resources responsibilities – finance, ICT, accommodation, legal and Human Resources.
 - Dudley Clinical Commissioning Group's Senior Responsible Officer.
 - Black Country PCT Cluster Director of Operations.
9. An Action Plan has been developed which covers initial consideration of a vision for public health and is embraced and monitored by all partners as outlined above. Specific public health activity is included in the Plan such as developing the Public Health Business Plan 2012/13, continuing public health quality assurance of adult screening programmes and establishing working arrangements for delivery of agreed Public Health "Core Offer" to the Dudley Clinical Commissioning Group amongst other actions. Actions relating to communications are also included such as the agreement that the Council's October Management Forum will focus on public health. The Action Plan also includes practical issues relating to finance, ICT, accommodation, legal and Human Resources that need to be finalised ahead of April 2013 when the transition needs to be completed.
10. Board members are reminded that, although provided locally here in Dudley, public health services have been part of the wider NHS organisation in the Dudley Primary Care Trust. As part of a national organisation, the NHS have wanted to make arrangements that support their employees and the needs of the services they have managed across the country. This has sometimes been a frustration for localities. For instance, both the Council and the Black Country PCT Cluster have to enter into a period of "due diligence" with regard to the transfer of the staff, budgets, contractual commitments, assets such as computer equipment and liabilities. To support them with this process the Black Country PCT Cluster have appointed KPMG to represent them in their contact with Councils on these detailed due diligence items. This has caused some delays for Councils in acquiring information which they might otherwise have wanted to have at an early a point as possible. Nevertheless, a direction has now been established to carry this work forward. It is important to note that the Council has worked in related ways to take on new responsibilities or to share responsibilities with others before. The Council is using learning from these experiences as it approaches public health transition (e.g. in taking on former-Connexions staff into the Children's Services; or working in partnership with NHS mental health services).
11. It is now increasingly accepted that the consequences of NHS Reform such as public health transition will mean that by October, the Council will be seen to be "in the driving seat" as far as decision-making and ownership of the

local public health agenda in Dudley is concerned. With this in mind, the Council is also establishing a Public Health Integration Board which will bring together relevant Cabinet Members and Directors and/or Assistant Directors covering Health & Well-Being, Housing, Adult Social Care, Urban Environment and Children's services. These are seen as the main service areas where public health issues connect to the Council although there are others, too, such as Emergency Planning. The Board is due to have its first meeting in September.

12. The Public Health Integration Board will consider the challenge and vision for the Council as a body corporate in ensuring delivery of a new significant function.
13. The Council is also participating in relevant regional and national meetings to assist learning about how others are approaching the transition of public health services. In May 2012, the Public Health Transition Group held a successful Learning Event with Directors of Public Health from Wigan and Newham in attendance as a means to generate wider learning from others. This has helped strengthen decisions and direction about specific actions such as developing an initiative called Healthy Living Champions - and "Making Every Contact Count" – this is an approach of extending public health knowledge across all or most Council employees who in their contacts with the public may be able to give helpful advice about issues connected to improving health. In addition, work is being undertaken to build on approaches developed so far to focus on the health and well-being of the Council's workforce so that the Council leads by example as an employer in the locality.
14. In terms of organisational arrangements, the Board will recall that the Joint Director of Public Health has attended the Council's Corporate Board for sometime. Arrangements have been made for senior public health staff to meet with Council Directorate Management Teams so that mutual understanding and appreciation of the tasks and challenges being faced by all concerned can be shared.

Public Health England

15. Public Health England is a new organisation with which the Council will be developing its relationship. The Structure of Public Health England was announced in July. There is an intentional emphasis on professional health leadership through the appointment of three recognised leaders for **health protection**, for **health improvement and population health** and a **Chief Knowledge Officer**. These directors will lead the ambition for knowledge and research to enable outstanding delivery. Public Health England will have a publicly appointed Chair, with an advisory board consisting of the Chair, three non-executive directors and the Chief Executive. As Public Health England will be an executive agency of the Department of Health, its Chief Executive will be accountable to the Secretary of State for Health.

16. Public Health England will operate through four regions and 15 centres. Locally this will be the Midlands and East of England region and the West Midlands centre.
17. **Regions'** functions will be:
 - supporting transparency and accountability across the system, managing strategic discussions with partners including leaders in the NHS Commissioning Board, local government, Health Education England and others, in relation to the achievement of public health outcomes
 - providing professional support and leadership to the public health system including the joint appointment of directors of public health, clinical and medical supervision, and professional guidance and leadership
 - ensuring consistently high-quality services are provided by the agency's centres, overseeing their contribution to improving health outcomes and in addressing local needs and priorities
 - ensuring the delivery of the national emergency planning, resilience and response strategy across their region
18. Public Health England's 15 **centres** will provide the organisation's local presence and leadership. They will develop and maintain key relationships with local authorities, local resilience forums, the NHS and other partners to support and influence the delivery of improved outcomes for the public's health. The centres will integrate the different public health disciplines, providing effective services and support for health protection, health improvement and health service public health.
19. They will provide a single point of access to the full range of Public Health England's specialist skills and knowledge.
20. The **centres** will lead the delivery of the agency's functions for their geographies, including:
 - building Public Health England's relationship with local authorities, local public health teams and providing professional support to them and other partners to maximise health improvement for their populations
 - the provision of health protection services, maintaining and building on the services offered by current health protection units of the Health Protection Agency
 - supporting the local Director of Public Health in their relationship with the NHS
 - employment and professional development of certain immunisation and screening teams integrated with the NHS Commissioning Board's Local Area Teams
 - development of the specialist and wider public health workforce to support local authorities on public health workforce issues and

managing Public Health England's relationship with the Local Education and Training Boards

- provide public health specialists to support specialised commissioning and dental commissioning. It is proposed that public health specialists supporting specialised commissioning at this level will be integrated with their specialised commissioning colleagues in NHS Commissioning Board Local Area Teams
- oversee delivery of drug and alcohol services, building on the role and structures of the National Treatment Agency for Substance Misuse

Summary / Opportunities

21. The transition of public health responsibilities to Dudley Council is an opportunity which is being embraced at a number of levels.
22. First, it is an opportunity which is being embraced in terms of the vision for the Council as a whole taking on new responsibilities for the improvement of the health of Dudley people and addressing health inequalities as outlined above. The Council is reminding itself of all that it does already which contributes to the improvement of people's health but is also mindful that we need to deepen our awareness of our new responsibilities including those that the public health service will bring to the Council as part of their functions including the role of the Director of Public Health as the Chief Advisor on Health to the Council.
23. Secondly, there is the opportunity of working with new partners as the structural shape of NHS Reform beds down:
24. Good relationships with the Dudley Clinical Commissioning Group have already been secured. The Chief Executive of the Council is a member of the Clinical Commissioning Group Board, as is the Director of Public Health, and officers from both organisations take business forward at relevant meetings.
25. The NHS Commissioning Board will be required to send a representative to the Health and Well Being Board but the area of responsibility which they cover for Birmingham, Solihull and the Black Country will now be a much larger one than first envisaged.
26. Black Country Directors of Public Health have continued work on how public health services across the Black Country might work more effectively together to address any local issues which are shared across the Black Country.
27. The Health and Well-Being Board will increasingly be the instrument through which whole-Council efforts are effected, cutting across the responsibilities of the Director of Public Health, the Director of Children's Services and the Director of Adult, Community and Housing Services working together with local NHS, voluntary sector and patients organisations services through an

agreed Joint Health and Well Being Strategy based on a robust Joint Strategic Needs Assessment to improve the health of Dudley people and the quality of local health services.

28. Thirdly, through the establishment of an Office of Public Health in the Chief Executives Directorate, the Council has a direction for the integration of the Public Health Team and budget of 80 FTEs with an indicative budget of £16.3m for 2012/13, into the Council. The work of the Public Health Transition Group, the Public Health Integration Board and the presence of the Director of Public Health on the Corporate Board with other Directors is key to ensuring that Dudley MBC develops as a health improving Council and discharges effectively its duties in relation to health protection and healthcare public health. It is understood that improving health will be a continuing corporate theme for the Council as a whole.

Finance

29. The Department of Health have shown a baseline estimate of £16.3m for 2012/13. This is stated to be a guaranteed minimum. The grant will be determined on a resource allocation formula, the details of which are currently being consulted upon. Final declaration of the Council allocation for public health services is not expected until December 2012. The grant for public health services will be ring-fenced.

Law

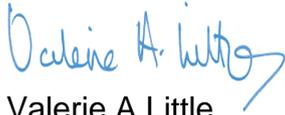
30. The Health and Social Care Act 2012 sets out arrangements for the provision of public health services. This Act is the culmination of a number of White Papers and other publications by the Department of Health which have set direction for the transition of public health to Local Authorities.

Equality Impact

31. The transition of public health to the Council extends the influence which the Council has independently and as a leader in the Shadow Dudley Health and Well-Being Board to work more closely with partners, particularly GP and Clinical Commissioners, to address health inequality issues. The Office for Public Health will provide specialist expertise on health inequalities, available to support the whole Council.

Recommendation

32. That the Health and Shadow Health and Wellbeing Board note the strategy and progress to date for the transition of public health responsibilities to Dudley Council.



Valerie A Little
Director of Public Health

Contact Officer:

Tony Collins
Deputy Director of Public Health
Telephone 01384 321885
Email: tony.collins@dudley.nhs.uk