

MEETING:	CABINET
DATE:	12 JULY 2012
TITLE OF REPORT:	UPDATE ON THE IMPLEMENTATION OF THE PUBLIC HEALTH TRANSITION PLAN
PORTFOLIO AREA:	HEALTH AND WELLBEING

CLASSIFICATION: Open

Wards Affected

County-wide

Purpose

The purpose of this report is to provide Cabinet with assurance that the Public Health Transition Project is on course to achieve the safe transfer of legal responsibility for Public Health from Herefordshire Primary Care Trust to Herefordshire Council in April 2013, and to inform Cabinet about the scope of those new legal responsibilities and the opportunity they give the Council to improve the health and wellbeing of the people in Herefordshire.

Key Decision

This is not a key decision.

Recommendation(s)

THAT the Cabinet Notes:

- a) **the Public Health Transition Project is on course to achieve the safe transfer of legal responsibility for Public Health from Herefordshire Primary Care Trust to Herefordshire Council in April 2013,**
- b) **the scope of the public health responsibilities that are transferring to Local Authorities in April 2013 creating new opportunities for improving the health and wellbeing of people in Herefordshire,**
- c) **the intention to present a further report to Cabinet seeking agreement of Herefordshire Council's Vision for Public Health and to provide an update on progress of the Public Health Transition Project.**

Key Points Summary

- The Health and Social Care Bill that received Royal Assent on 27 March 2012 introduces wide-ranging NHS reforms and establishes a new public health system in England;
- The Act will result in the disestablishment of Primary Care Trusts and Strategic Health Authorities, and the establishment of Health and Wellbeing Boards, Clinical Commissioning

Groups, the NHS Commissioning Board, Commissioning Support Organisations, Healthwatch and Public Health England;

- Under the Act, and with effect from 01 April 2013, local authorities will have a range of new responsibilities for public health, including a set of mandatory public health services. The public health functions currently undertaken by Primary Care Trusts will transfer, along with their associated budgets and staff, to local authorities and to other legacy organisations;
- The transfer of public health to Herefordshire Council provides exciting new opportunities for councillors, council officers and public health specialists to improve the health and wellbeing of people of all ages in Herefordshire;
- A comprehensive Herefordshire Public Health Transition Plan has been developed using Prince2 methodology and is on track to ensure the safe transfer of Public Health responsibilities from Herefordshire Primary Care Trust to Herefordshire Council and other legacy organisations;
- The Council will receive a ring-fenced public health grant to support it in carrying out its new public health functions based on historical spend on the services transferring. The Department of Health have indicated that the allocation for Herefordshire will be no less than £6.657million based on the PCT's 2010/11 accounts. The PCT's 2011/12 accounts more accurately reflect the cost of the NHS Health Checks programme, and the Council and PCT have jointly requested the final allocation for 2013/14 should be based on a submission of the PCT's 2011/12 accounts.
- A Director of Public Health has been jointly appointed by Herefordshire Primary Care Trust and Herefordshire Council who will provide leadership and expertise to develop the new public health system in Herefordshire.

Reasons for Recommendations

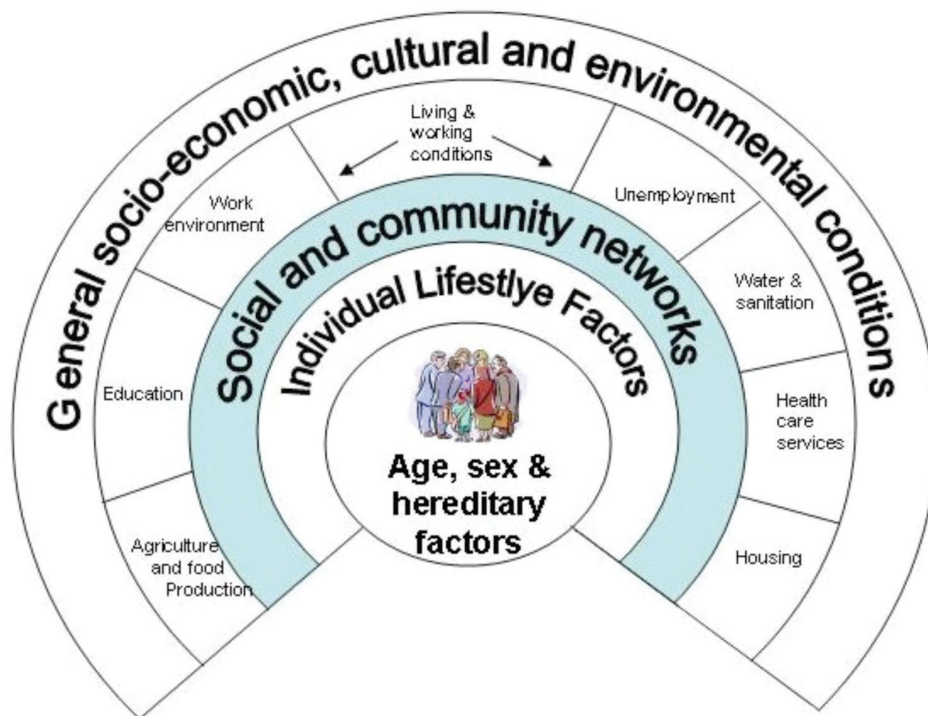
To provide assurance to Cabinet about the safe transfer of responsibility for public health from Herefordshire Primary Care Trust to Herefordshire Council in April 2013, and to inform Cabinet about the scope of those new responsibilities and the opportunity they create to improve the health and wellbeing of people in Herefordshire.

Introduction and Background

1. The Health and Social Care Act (2012) introduces a series of NHS reforms and establishes a new public health system in England including new public health responsibilities for local authorities.
2. From 01 April 2013 Herefordshire Council will have a range of new public health duties which will include:
 - a. promoting the health of the local population by taking "such steps as it considers appropriate for improving the health of the people in its area";
 - b. specific responsibility for commissioning or providing a range of mandatory public health and health improvement services including:
 - i. ensuring appropriate access to sexual health services;
 - ii. the NHS Health Checks programme;
 - iii. the National Child Measurement Programme;
 - iv. providing public health advice to NHS commissioners (the "core offer"), and ;
 - v. ensuring that robust plans are in place to protect the health of the public including immunisation and screening plans;

- c. appointing a Director of Public Health who will have a central role in ensuring that the public's health and wellbeing is reflected in local authority policies and decisions and who will be responsible for preparing an annual report on the health of the people in the local authority area which the local authority will be required to publish;
 - d. leading on the development of the Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy;
 - e. ensuring a community-wide approach to the public's health and wellbeing.
3. Apart from their new mandatory public health services, local authorities will be largely free to determine their own Public Health priorities and services in line with local needs and local priorities. This will allow them to build on local knowledge and experience to tackle the wider determinants of health and differences in healthy life expectancy (Figure 1).

Figure 1 The wider determinants of health (from Whitehead and Dahlgren, 1991)



4. The transfer of public health to local government provides new opportunities for councillors, council officers and public health specialists to improve the health and wellbeing of people of all ages in Herefordshire through addressing the wider determinants of health by:
- a. embedding a systematic approach to health and wellbeing which spans the whole of the work of the council;
 - b. realising the synergies between the local authority's existing functions and its new public health responsibilities;
 - c. transforming the delivery of public health services; and
 - d. providing leadership to make improving health and wellbeing everybody's business.

5. A ring-fenced public health grant will support local authorities in carrying out their new public health functions.
6. A new national executive agency, Public Health England, will deliver some public health services (health protection, health information and intelligence, healthy lifestyle marketing campaigns), provide national public health leadership and support the development of the specialist and wider public health workforce.
7. The NHS will have a new legal duty to play its part in improving healthy life expectancy and reducing difference in healthy life expectancy.

Key Considerations

1. The transfer of public health functions, staff, budgets and contracts from the PCT to the LA and other legacy organisations is a complex process.
2. A Herefordshire Public Health Transition Plan has been developed using Price 2 methodology in accordance with Department of Health national guidance, has been agreed by the Chief Executives of Herefordshire Public Services and West Mercia Cluster of PCTs, and has been rated 'green' by the Department of Health. The plan is being implemented through the Herefordshire Public Health Transition Project which has achieved all the project milestones to date.
3. The objectives of Herefordshire's Public Health Transition Plan are to:
 - a. establish a new public health system in Herefordshire in line with national NHS and public health reforms and to ensure a seamless transition to this new system. This will include identifying and implementing those actions required for Herefordshire Council to assume a range of statutory responsibilities for public health and for the transfer of public health responsibilities from NHS Herefordshire to Herefordshire Council, the NHS Commissioning Board (NHSCB) and Public Health England (PHE);
 - b. to develop a Public Health Vision for Herefordshire. A vision and set of principles has been agreed for the Health and Wellbeing Board. This will inform the development of Herefordshire Council's vision for Public Health. The Health and Wellbeing Board's vision is that:

"Herefordshire residents are resilient; lead fulfilling lives; are emotionally and physically healthy and feel safe and secure, with the overall outcome to reduce the difference in healthy life expectancy in Herefordshire".
 - c. produce a public health leadership development programme linked to the Health and Wellbeing Board (HWB) development programme;
 - d. produce an operating model for each of the 'domains' of the new public health system locally including:
 - i. health improvement;
 - ii. health protection (including screening, immunisation and emergency preparedness, resilience and response);
 - iii. population healthcare advice to NHS Commissioners;
 - iv. health Intelligence;
 - v. dental public health;
 - vi. other health and wellbeing services falling within scope in Herefordshire;

- e. identify priorities and outcomes for 2013/14 in line with the Public Health Outcomes Framework and current performance trajectories;
 - f. identify and address all issues to be resolved;
 - g. identify the agencies involved in the delivery and the respective roles and responsibilities;
 - h. identify governance and partnership arrangements;
 - i. transfer of funding and contracts for public health services to legacy organisations including the Council and the NHS Commissioning Board and Public Health England;
 - j. transfer public health staff to legacy organisations including: incorporation of public health staff into the People's Services Directorate within the Council, and as appropriate, transfer of staff to the NHSCB and/or Public Health England;
 - k. ensure comprehensive handover from NHS Herefordshire to legacy organisations including publication of a legacy document and identification of potential liabilities including legal liabilities/litigation;
 - l. sustain delivery of public health responsibilities during the transition period.
4. All key milestones of the public health transition project have been achieved to date.

Community Impact

22. The Department of Health's vision is to build on local government's long history of public health leadership, and for local authorities to use their new responsibilities and resources to put health and wellbeing at the heart of everything they do, thereby helping people to lead healthier lives, both mentally and physically. This means:
- a. including health in all policies so that each decision seeks the most health benefit for the investment, and asking key questions such as "what will this do for the health and wellbeing of the population?" and "will this reduce health inequalities locally?";
 - b. investing the new ring-fenced grant in high-quality public health services;
 - c. encouraging health promoting environments, for example, access to green spaces and transport and reducing exposure to environmental pollutants;
 - d. supporting local communities - promoting community renewal and engagement, development of social networks for young families and isolated elderly people;
 - e. tailoring services to individual needs – taking a holistic approach, focusing on wellness services that address multiple needs rather than single issue services, and using new technologies to develop services that are easier and more convenient for users;
 - f. making effective and sustainable use of all resources, using evidence to help ensure these are appropriately directed to areas and groups of greatest need and represent the best possible value for money for local citizens.
23. To do this successfully will require a willingness to use all the tools at local authorities' disposal in a new way and not just rely on commissioning traditional services. Local authorities will need to work with a wide range of partners across civil society, not least the third sector, including through their leadership of Health and Wellbeing Boards. They will be supported in this by Healthwatch which through its seat on the local Health and Wellbeing Board will better enable people to help shape and improve health and social care services.
24. Local authorities already do this up and down the country. From 2013, with their new powers

resources they will be ideally placed to go further in creating healthier communities.

25. The Public Health Transition Plan will ensure that key public health functions, including health improvement, health protection and healthcare public health are maintained and protected throughout the transition period and into the future.

Financial Implications

26. The Council will receive a ring-fenced public health grant to support it in carrying out its new public health functions based on historical spend on the services transferring. The Department of Health has indicated that the 2013/14 allocation for Herefordshire will be no less than £6.657million calculated by the Department of Health from a submission based on the PCT's 2010/11 accounts. A joint resubmission by the Council and PCT based on the PCT's 2011/12 accounts more accurately reflects the cost of the NHS Health Checks programme which had not started in 2010/11. It is anticipated that the Department of Health will confirm the Public Health Grant budget by December 2012.
27. The Financial implications are addressed within the plan and include the transfer of budgets and contracts. The Public Health Transition Plan includes the establishment of a Finance and Resources work stream which will identify and address any issues.

Legal Implications

28. A review is underway to determine the legal implications for Herefordshire Council of the Health and Social Care Bill and associated Regulations.

Risk Management

29. A risk analysis has been done and is regularly reviewed. The key risks can be summarised as:
 - a. Actions to transfer staff, contracts, pensions and finances don't happen in time to transfer by the deadline;
 - b. Insufficient financial resources to cover Public Health responsibilities;
 - c. Herefordshire Council fails to understand the new duties and doesn't prepare itself sufficiently;
 - d. Insufficient capacity to both maintain key public health functions during the transition period and to implement the Public Health Transition Plan;
 - e. Performance concerns or urgent/additional public health work divert staff from necessary transition work.
 - f. Insufficient assurance in relation to functions transferring to other legacy organisations, for example screening and immunisation programmes and EPRR.

Alternative Options

30. There are no alternative options as the changes come about as a result of the Health and Social Care Act (2012).

Consultees

31. A comprehensive Communications and Engagement Strategy and supporting 90 Day Action

Plan has been developed which the Department of Health has reviewed and rated as green describing it as “A very comprehensive strategy and plan”.

Appendices

32. None

Background Papers

Public Health in Local Government – Department of Health Factsheets (Dec 2011)

www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_131904.pdf

- Local government leading for public health
- Local Government’s new public health functions
- The role of the Director of Public Health
- Commissioning responsibilities
- Public health advice to NHS commissioners
- Professional appraisal and support, and capacity building