

The new arrangements for Public Health in Sheffield

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Director of Public Health

Health scrutiny committee, July 18th 2012

Healthy Lives, Healthy People
the new public health system
December 2011

Healthy Lives, Healthy People: our strategy for public health in England



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The Government aims to:

- empower local leadership to strengthen health and wellbeing
- support self esteem, increased confidence and personal responsibility
- promote healthier behaviour and lifestyles
- change the environment to support healthier choices
- protect the public from threats to health.

Following extensive consultation, further details published in July 2011's *Update and Way Forward*



December 2011: finalising key elements of the design of the new public health system

The new public health system

new roles and responsibilities

leadership role for local authorities

supported by a new integrated public health service, Public Health England

working alongside the NHS, with its continuing role promoting health through clinical services

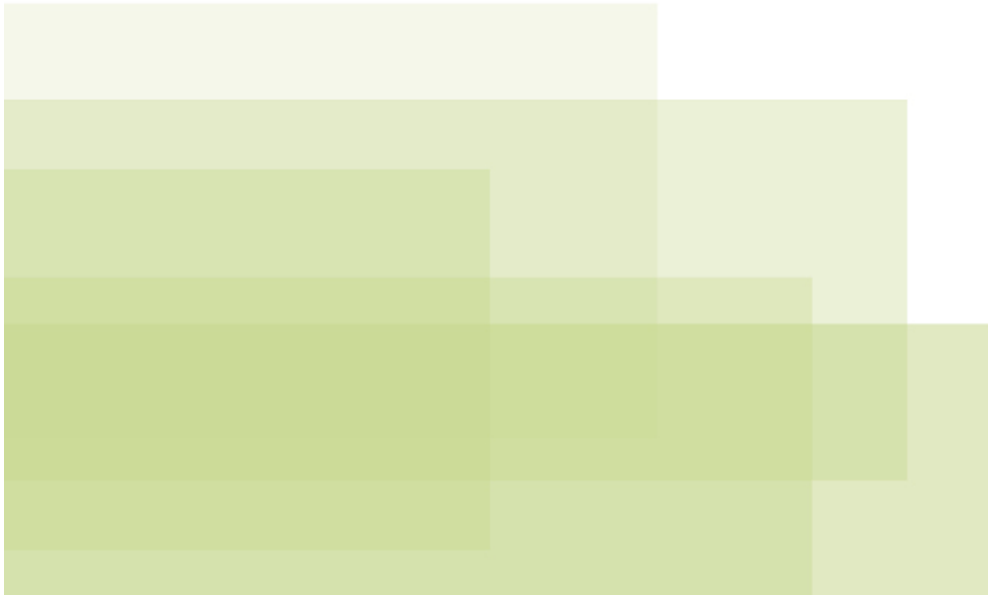
clear priorities

stronger focus on health outcomes, supported by the Public Health Outcomes Framework

public health as a clear priority for Government, backed by ring fenced resources

Who does what locally

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Local government leadership

Local government should lead for public health because of its:

- **population focus**, as the democratically accountable stewards of local health and wellbeing
- role as the **shapers of place**
- ability to address many of the **wider social determinants** of health, and
- experience of, and ability to tackle, **inequalities** in health.

Factsheet: local government
leading for public health

Local government's new functions

New duty to improve the health of the population:

- commissioning services from a range of providers
- working with Clinical Commissioning Groups to integrate care pathways
- using health and wellbeing board to integrate commissioning approaches
- providing population healthcare advice to the NHS
- duty to ensure plans in place to protect health.

Local political leadership critical to making this work.

**Factsheet: local government's
new public health functions**

Local authority commissioning responsibilities (1)

- Tobacco control & smoking cessation
- Alcohol and drug misuse
- Services for children 5-19
- National Child Measurement Programme*
- Obesity and weight management
- Local nutrition services
- Increasing physical activity

- NHS Health Checks*
- Public mental health services
- Dental public health services
- Injury prevention
- Birth defect prevention
- Behavioural and lifestyle campaigns to prevent LTCs
- Local initiatives on workplace health

- Support and challenge of NHS services (imms and screening)
- Public health advice to NHS*
- Sexual health services*
- Seasonal mortality initiatives
- Local role in health protection incidents*
- Community safety
- Social exclusion

* Indicates mandated services

Role of the Director of Public Health

- **Leadership role** within the local authority for the DPH and their team, to exercise these new functions:
 - DPH should be the lead officer for health and championing health across the whole of the authority's business
 - we expect there to be direct accountability between the director of public health and the local authority chief executive for the exercise of the local authority's public health responsibilities
 - the DPH should have direct access to elected members
- Produce an **annual report**
- Statutory member of **Health and Wellbeing Board** – and engaging across the health and wellbeing system.
- Further work to follow on **transition process and appointments**, building on Faculty of Public Health standards

**Factsheet: role of the Director
of Public Health**

Local leadership for health protection

- ➔ Secretary of State responsible for health protection via PHE
- ➔ Local authority under a duty to ensure plans are in place to protect the local population

Local authority role

- Ensuring plans in place for:
- outbreaks and emergencies; and preventing them occurring
 - immunisation and screening
 - infection control

How the role will work

- DPH leadership, rather than managerial role to highlight, advise, challenge and advocate.
- Supported by PHE expertise and infrastructure
- NHS commissioners duty to cooperate
- Lead DPH to co-ordinate local authority public health input to LRF emergency planning and response
- DPH challenge and advice to NHS on local screening and immunisation plans
- Professional relationship between DsPH and the Chief Medical Officer

Factsheet: commissioning responsibilities

Population health advice to the NHS

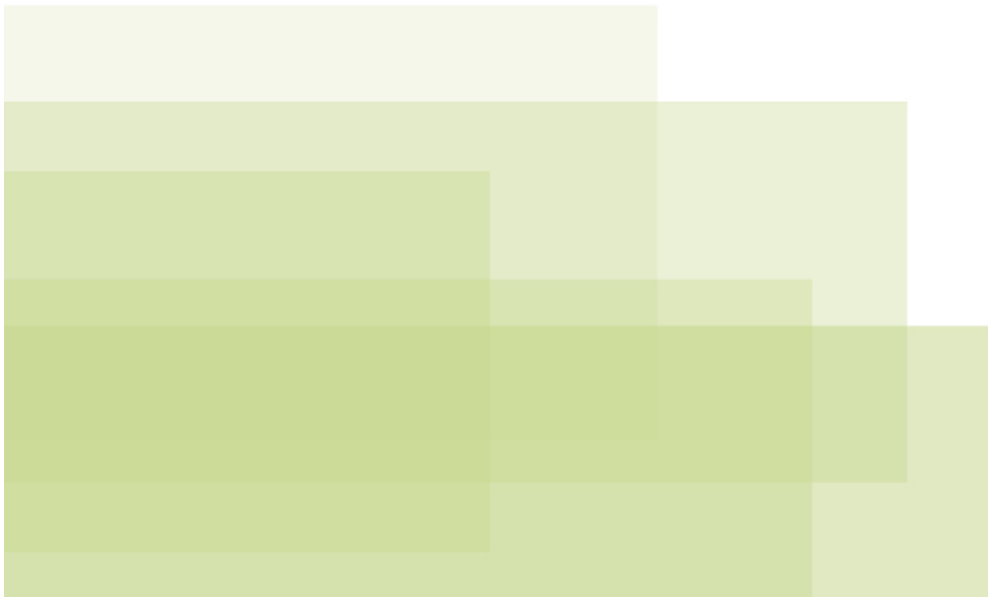
Local authorities will provide population healthcare advice to the NHS

- To support healthcare commissioners, including via the JSNA, with strategic population data from many sources
- Applying skills to interpret data
- Advice at all stages of the commissioning cycle alongside:
 - advice from new commissioning support organisations, which will focus on processes and clinical systems
 - PHE role through information and intelligence service to LAs e.g. by providing baseline data
- Further work on role for supporting the NHS Commissioning Board and how this advice will meet the needs of CCGs

**Factsheet: public health advice
to NHS commissioners**

How Public Health England fits in

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PHE will have three functions

delivering services

- deliver specialist public health services to national and local government and the NHS
- deliver information and intelligence service to support effective action, locally and nationally
- support the commissioning and delivery of effective health and care services and public health programmes
- design and deliver nationwide communications and interventions to support the public to protect and improve their health

leading for public health

- encourage transparency and accountability across the system
- support public health policy development through evidence and advice on the best operational means to achieve strategic goals
- allocate its budget and manage relationships effectively to
- work with partners to build the evidence base about what works in improving and protecting health and wellbeing
- act for public health science and delivery on the international stage

workforce

- Public Health England will support the development of the specialist and wider public health workforce

Factsheet: PHE functions

PHE's Units

- **Directors of public health** are the local leaders for public health
- Alongside this, **PHE will deploy expert and specialist capacity** at a level that allows it to understand and respond to local needs and support local leaders.
- The units' main areas of work:
 - **deliver services** and advice to local government, the NHS and work in partnership to protect the public, involving national centres where appropriate
 - make an effective contribution to **emergency, preparedness, resilience and repose system**
 - **support effective local action** to promote and protect health, and wellbeing and tackle inequalities.
- PHE's units will develop from the current health protection units of the Health Protection Agency.

The NHS's role in public health

- The NHS will continue to play a key role in improving and protecting the public's health. The provision of health services and ensuring fair access to those services will contribute to improving health and reducing inequalities.
- 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.
- PHE will have a close working relationship with the NHS Commissioning Board.
- The NHS Future Forum is currently considering how the NHS can contribute to improving the health of the public. Its interim findings have been published on the DH website.

Timeline – transfers to local authorities

- Jan 2012: *Transition Planning Guidance* issued
- Jan 2012: *Local Government HR Transition Guidance* published
- Mar 2012: Local transition plans completed
- From Apr 2012: Local areas agree arrangements for any in year delegation of functions and secondments/assignment of transferring staff in line with guidance
- By Oct 2012: Local area test arrangements for delivery of specific public health services in particular screening and immunisation, and Emergency Response
- Oct 2012: Agree arrangements on public health information requirements and information governance
- Jan 2102: Ensure final legacy and handover documents produced
- Apr 2013: Local authorities formally take on new responsibilities.

In Sheffield

- Long history of joint working to build on
- Coterminosity, single tier
- Joint appointments
- ‘Hub and spoke’ model agreed, including allocation of functions to Portfolios
- Cabinet paper approved
- Alignment of PCT PH directorate staff

In Sheffield

Transition steering group

PID, transition dashboard

Supporting workstreams

Finance, HR, Contracts, Accommodation, IT

- PH business plan for 12/13
- Transition year
- Risks
 - Managing the transition
 - Functions transferring to PHE