TRAFFORD COUNCIL

Report to:	Health & Well Being Board
Date:	7 th April 2013
Report for:	Information
Report of:	Director of Public Health

Report Title

Public Health Transition Update

<u>Summary</u>

This paper summarises the update on the Public Health transition from NHS Trafford to Trafford Council on 1st April 2013.

Recommendations

It is recommended that the Health and Well Being Board note:

 The progress update on the successful transfer of Public Health staff and Public Health services to Trafford Council on 1st April 2013.

Contact person for access to background papers and further information:

Name: Imran Khan, (Partnerships Officer).

Background Papers:

Health and Social Care Act 2012

The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations; March 2013 http://www.legislation.gov.uk/uksi/2012/3094/contents/made http://www.legislation.gov.uk/ukdsi/2012/3094/contents/made

Ring fenced public health grants to local authorities 2013-14 and 2014-15. Department of Health. 9 January 2103. <u>http://www.dh.gov.uk/health/2013/01/ph-grants-las/</u>

The Public Health Outcomes Framework 2013-2016, January 2012 <u>http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/Publicatio</u>

Public Health Transition Update

1. Introduction

The new Public Health role for local authorities is part of wider reforms under the Health and Social Care Act 2012. Public Health functions, assets, liabilities and staff have formally transferred from NHS Trafford to Trafford Council on 1st April 2013.

In March 2013 the Council approved the necessary amendments to the Trafford Council Constitution, including appropriate delegated authority to the Director of Public Health, in preparation for the transfer of Public Health on 1st April 2013.

This report describes the new Public Health functions of Trafford Council, gives a brief update on the progress of the Public Health transition since the last Health and Well Being Board update on the formal Transfer Scheme and Staff Transfer Order in support of the legal process taking place on 31st March 2013.

2. The new Public Health responsibilities of Local Authorities

From 1 April 2013 Trafford Council will be responsible for the health of Trafford people. The government's public health vision is to '*improve and protect the nation's health and wellbeing and to improve the health of the poorest fastest*.' This requires a whole population perspective, beyond a focus on eligible clients or service users, spanning determinants of health, healthy behaviours, health protection and health and care services.

The Public Health Outcomes framework summarises the breadth of population health outcomes for which local authorities will be responsible. The indicators are aligned to the NHS Outcomes Framework and Social Care Outcomes Framework to promote greater joint working between NHS and Local Authority.

The main duties of the Director of Public Health and Public Health team are listed below:

- Advising on all matters health;
- **Commissioning** a specified list of Public Health services. Mandatory services are sexual health, NHS Health Checks and the National Child Measurement Programme (NCMP), health protection and the Local Authority CCG core offer on population healthcare advice.
- **Providing commissioning support back** to the NHS Trafford Clinical Commissioning Group (CCG). This is a mandatory function and includes: need assessment, clinical effectiveness review, priority setting, clinical pathway redesign, monitoring and evaluation. This is an important lever for influencing the CCG commissioning budget.
- Assuring local health protection arrangements are robust. This covers emergency planning, infection control, screening and

immunisations. They are commissioned by Public Health England (PHE) within NHS England and delivered mainly by NHS providers, including primary care. For emergency planning NHS England has taken over the coordination of the health service response with an accountable Emergency Officer role at the CCG.

- **Producing a statutory annual report** on the health of the local population, to be published by the Local Authority.
- Being a statutory member of the local Health and Wellbeing Board.

3. <u>Transfer of Public Health staff</u>

The Public Health team have been transferred on a 'lift and shift' basis and are part of the new Children, Families and Well Being directorate of the Council with the Director of Public Health role to promote and influence health across the Council and wider partner organisations.

Public Health staff members will be transferring with their current NHS terms and conditions, including access to the NHS Pension Scheme.

Recent guidance from Public Health England and the Local Government Association confirmed that from April 2013 all transferring staff will retain access to the NHS Pension Scheme if they are subsequently compulsorily moved to another post within the same local authority, or if they make a voluntary move within the same local authority and are within 10 years of normal pension age. All other transferring staff will join the local government pension scheme if they move posts voluntarily after transfer.

The council has undertaken Human Resources due diligence on the transfer of staff and has submitted approval of transferring staff data from NHS Trafford.

4. Transfer of Public Health Services Contracts

There are seven main topic areas that account for almost all of the Public Health contracts. A summary is provided below for each of these topic areas.

Sexual health

 The commissioning of comprehensive, open-access sexual health services will become a mandatory function for local authorities in April.

• Substance misuse

- Drug and alcohol misuse commissioning function.
- School nursing
 - The School Nursing service has been subject to a full review and the recommendations will inform future service direction.

Health Improvement

- This health promotion team is based within the new Children, Families and Well Being directorate.
- NHS Health Checks
 - NHS Health Checks are offered to all adults aged 40-74 to help lower their risk of heart disease, stroke, diabetes and kidney disease.
- Smoking cessation

 Services for supporting people to stop smoking. A large amount of stop smoking support is provided through GP practices and community pharmacies.

• Weight Management services

• Specialist weight management and community dietetics services.

5. Transfer of Public Health clinical negligence claims

The Department of Health (DH) will take on any existing clinical negligence claims. However, a recent DH Bulletin (20130221 Stop Press Bulletin (3)) has stated that any 'incurred but not reported' (IBNR) Public Health liabilities will transfer from PCTs to Local Authorities. In discussion between NHS Trafford and Trafford Council the Public Health due diligence exercise has assessed that no claims of this sort have been made in the recent past and that the likelihood of any arising in the future is small as such claims normally are made against the provider, rather than the commissioner of services.

6. <u>PCT Closedown - Department of Health</u>

Decisions have been made by the Department of Health to resolve outstanding policy issues affecting transition and closedown of PCTs. The latest guidance (20130221 Stop Press Bulletin (3)) clarifies issues in relation to Transferring Claims and Liabilities from PCTs, and other issues relating to assets and liabilities.

7. Finance and Efficiency Implications

The Council received funding of £81k from NHS Trafford in 2012/13 to contribute towards the costs of the Public Health transition.

The Trafford Council Public Health budget allocation for 2013/14 is \pounds 10.171m (for 2014/15 it is \pounds 10.455m). This is provided through a ring-fenced grant. A range of conditions are attached to this grant, including:

- Funds are spent on activities whose main or primary purpose is to improve the health and wellbeing of the local population and reducing health inequalities.
- Local authorities cannot charge for most public health services. There are limited circumstances in which councils can charge for public health services, as set out in Department of Health guidance. These relate to services provided to private companies or academic institutions, rather than individuals or services provided to an individual, which are not given to them for the purpose of improving their own health e.g. training provided to another organisation's staff. Other council services which have a primary purpose other than health improvement will still be subject to charges e.g. adult social care, housing and leisure services.

The breakdown of this budget will be across four main areas: Workforce;

Commissioning (Contracts); Projects; and Support Services/Overheads.

It is anticipated that all staff and contract liabilities that transfer over to the Trafford Council will be met within Trafford's Public Health grant allocation.

8. Public Health Contracts and Procurement Implications

The Public Health team is now beginning to work on business planning for the 2013-14 Public Health Services Improvement Plan including consideration of how the Public Health services are commissioned. Local enhanced services (LES) have been extended for 12 months at AGMA to ensure a smooth transition. All extended contracts will be reviewed within the year and where necessary the procurement process will be followed for renewal and to ensure value for money.

9. Legal Implications

The transfer of functions and responsibilities to the Council follows the introduction of the Health and Social Care Act 2012.

Department of Health guidance has been followed in the transfer process with close involvement from the Council's Legal Services team during the transition process to undertake due diligence on the transfer of contracts and staff on behalf of the council.

- 10. Background Information
- Health and Social Care Act 2012
- Cabinet Office Staff Transfers in the Public Sector Statement of Practice (COSOP), January 2000.
- The Transfer of Undertakings (Protection of Employment) Regulations 2006.
- The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations March 2013 <u>http://www.legislation.gov.uk/uksi/2012/3094/contents/made</u> <u>http://www.legislation.gov.uk/ukdsi/2012/9780111531679/contents</u>
- Stop Press: Update on recent policy decisions for Transition. Department of Health, Issue no.1 February 2013:
- Ring fenced public health grants to local authorities 2013-14 and 2014-15. Department of Health. 9 January 2103. <u>http://www.dh.gov.uk/health/2013/01/ph-grants-las/</u>

• The Public Health Outcomes Framework 2013-2016, January 2012 <u>http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/Publication</u> <u>sPolicyAndGuidance/DH_132358</u>