

Wiltshire Council

Cabinet

22 March 2011

Subject: Transfer of NHS Wiltshire Public Health to Wiltshire Council under Section 75 Arrangements

Cabinet member: Councillor Jane Scott – Leader of the Council

Key Decision: Yes

Executive Summary

This report sets out the background and rationale for the transfer of Public Health services from NHS Wiltshire to Wiltshire Council and seeks Cabinet approval of the proposals set out below.

Proposal(s)

That the Cabinet agrees to proceed with a transfer of the current Public Health functions from NHS Wiltshire to the Wiltshire Council by way of, and to the extent permitted, by an arrangement under section 75 of the National Health Service Act 2006 and the relevant regulations, with a target date of September 2011, and to be an “early implementer” of the Health and Wellbeing Board.

That the authority to finalise that agreement be delegated to the Corporate Director of Public Health and Wellbeing following consultation with the Leader and the Solicitor to the Council.

That the transition process is recognised in the Wiltshire Council Corporate and Business Plans.

Reason for Proposal

The Health and Social Care Bill (currently progressing through parliament) sets out the Government's intention to transform the delivery of health services in England. This Bill proposes, amongst a number of reforms, radical changes to the organisation of the commissioning and management arrangements for local health services. One of these reforms is the transfer of Public Health services from the NHS to local government.

Name of Director: Maggie Rae

Designation: Corporate Director for Public Health and Wellbeing

WILTSHIRE COUNCIL

CABINET

25th March 2011

Subject: **Transfer of NHS Wiltshire Public Health to Wiltshire Council under Section 75 Arrangements**

Cabinet member: **Councillor Jane Scott – Leader of the Council**

Key Decision: **Yes**

Purpose of Report

This report sets out the proposal for the transfer of Public Health services from NHS Wiltshire to Wiltshire Council.

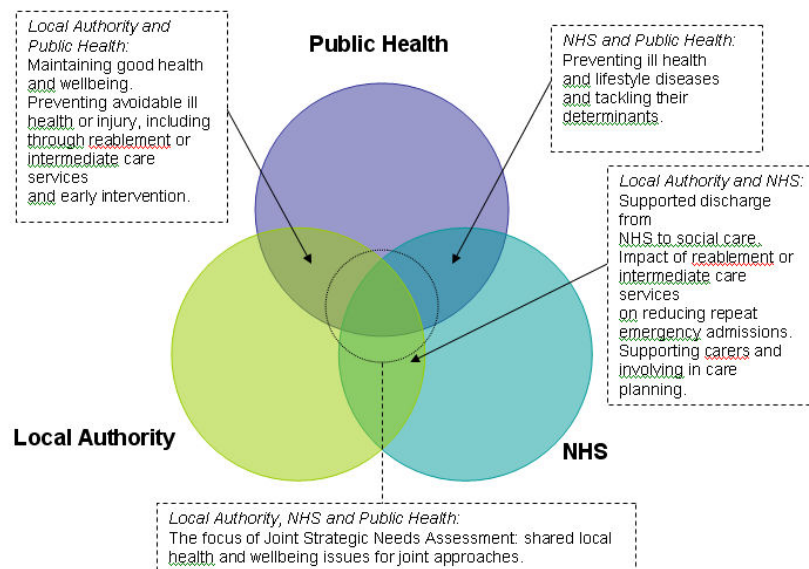
Background

1. In November 2010 the Department of Health published the White Paper *Healthy Lives Health People: our strategy for public health in England*. This followed the earlier White Paper “*Equity & Excellence - Liberating the NHS*” (July 2010). Both papers set out the government’s vision for the future of health service provision in England and both propose radical changes to the commissioning and management arrangements for health.
2. Under the proposals contained within *Healthy Lives Health People: our strategy for public health in England*, the challenges facing the nation in terms of reducing smoking, alcohol and substance misuse, obesity, sexually transmitted infections, poor mental health and deep rooted health inequalities are outlined. As part of the approach to addressing these challenges the White Paper proposes ending central government control and giving local government the freedom, responsibility and funding to innovate and develop their own ways of improving public health. This will be facilitated through greater financial incentives for improving health and reducing inequalities and measured by enabling greater transparency so people can see the results achieved. In addition, local government will be given new functions to increase local accountability and support integration and partnership working across social care, the NHS and public health.
3. Integral to the delivery of the government’s vision is the proposed transition of Public Health functions, activities and teams from the NHS to local government. If approved, it is expected that these transfers will take place nationally by April 2013, the proposed date at which Primary Care Trusts will be dissolved. The public health functions will be funded via the allocation of a ring fenced public

health budget and measured against a set of public health outcomes that local government will be expected to deliver. These outcomes are outlined in the consultation document *'Healthy Lives, Healthy People: Transparency in Outcomes'*.

4. As part of these changes, Public Health England - a new national service will be set up to bring together the fragmented national systems to lead health protection. Public Health England will include the current functions of the HPA and the NTA,
5. Health and Wellbeing Boards will be established in all upper tier local authorities. These will have a proposed minimum membership of elected representatives, GP Consortia, DPH, Director of Adult Social Services, Director of Children's Services, local HealthWatch and, where appropriate, the NHS Commissioning Board.
6. Health and Wellbeing Boards will also develop a Joint Health and Wellbeing Strategy, informed by the JSNA. The purpose of the Health and Wellbeing Strategy is to encourage coherent commissioning strategies across the NHS, social care, public health and other local partners. This will provide the overarching framework within which more detailed and specific commissioning plans for the NHS, social care, public health and other services that the health and wellbeing board agrees to consider are developed.

The diagram below illustrates the inter-relationships between the NHS, Local Authority and Public Health responsibilities.



The table below summarises the national timescale for transition based on current consultation documents.

Summary timetable	Date
Consultation on specific questions set out in the White Paper	Dec 2010 – 8 March 2011
Consultation on: <ul style="list-style-type: none"> • The public health outcomes framework • The funding and commissioning of public health Both are due to be published on 20 December 2010	Dec 2010 – March 2011
Set up a shadow-form Public Health England within the Department of Health Start to set up working arrangements with local authorities, including matching of PCT Directors of Public Health to local authority areas	During 2011
Develop the public health professional workforce strategy	Autumn 2011
Public Health England will take on full responsibilities, including the functions of the HPA and the NTA Publish shadow public health ring-fenced allocations to local authorities	April 2012
Grant ring-fenced allocations to local authorities	April 2013

7. As part of Wiltshire Councils approach to the strategic management of the implications of the White Papers a joint NHS Wiltshire and Wiltshire Council Strategy Group has been established. In February 2011 the group considered the implications of Wiltshire Council being an early adopter of the transfer of public health and agreed the following recommendations:

- Wiltshire continues to be an early adopter of the integration of Public Health into local government with a proposal to transfer Public Health staff through a Section 75 arrangement by the Autumn 2011. PCTs will not fully transfer responsibilities to GP commissioning until April 2013. To ensure that Public Health continues to meet its PCT responsibilities a memorandum of understanding should be developed.
- The transition is project managed with early engagement at a strategic and operational level both with stakeholders (including Finance, Legal, Human Resources) and staff.
- The transition process is recognised in the Wiltshire Council Corporate and Business Plans

The draft report was considered by the Health and Adult Social Care Scrutiny Committee on 10th March 2011.

Main Considerations for the Council

8. The White Paper presents new opportunities for improved service delivery, partnership working and achievement of joint NHS Wiltshire and Wiltshire Council

priorities which can be further enhanced by the early transfer of the public health team from NHS Wiltshire to the Wiltshire Council.

The following considerations apply to this proposed transfer:

1. Accountability for public health outcomes

From April 2013, the accountability for the delivery of public health outcomes will rest with Wiltshire Council and its partners including the NHS. These outcomes are currently in draft form in the paper *Healthy Live, Healthy People: Transparency in Outcomes*. In the run up to this date NHS Wiltshire will retain responsibility for health outcomes and indicators contained within the NHS Outcome and Operating Frameworks and the Public Health team will continue to report to the Primary Care Trust on these matters.

2. Funding for public health activity

From April 2013 Wiltshire Council will receive grant ring fenced allocations for public health responsibilities. Until this date, funding for public health activities will remain the NHS Wiltshire.

3. The Director of Public Health

The Director of Public Health will have a role in the proposed new functions of local authorities in promoting integrated working across the NHS and social care. A number of critical tasks have been proposed including:

- Promoting health and wellbeing within local government
- Advising and supporting the GP consortia on the population aspects of NHS services
- Developing an approach to improving health and wellbeing locally, including promoting equality and tackling health inequalities
- Working closely with Public Health England health protection units to provide health protection
- Collaborating with local partners on improving health and wellbeing including GP consortia, other local DsPH, local businesses and others.
- Producing an independent annual report on the health of the local population.

Healthy Lives, Healthy People indicates that the DPH will be the principal adviser on all health matters to the local authority, its elected members and officers, on the full range of local authority functions and their impact on the health of the local population. The Director of Public health will in future report to the Secretary of State (Chief Medical Officer) in respect of health protection functions, the local authority in respect of the local health and wellbeing priorities and be part of the Public Health England professional network.

4. Health and Wellbeing Boards

Health and Wellbeing Boards are a requirement from 2013. The new boards will be charged with the responsibility of:

- Assessing the needs of the local population and lead on the production of a statutory Joint Strategic Needs assessment – this includes both adults and children,
- Promoting integration and partnership across the borough, including joining up commissioning plans across the NHS, social care and public health,
- Supporting joint commissioning and pooled budgets arrangements between the NHS and local government.

Wiltshire Council and NHS Wiltshire have set up a Strategy Group which meets on a monthly basis and act as the decision making and governing body for both the overall transfer of Public Health responsibilities and establishing the new Public Health and Wellbeing Board ensuring the Board is fit for purpose.

5. The NHS and Public Health

The local Public Health team will also be part of Public Health England, a new national service. Subject to the passage of the Health and Social Care Bill, Public Health England will include the current functions of the HPA and the NTA, which will become functions of the Secretary of State for Health.

The Department of Health will work to strengthen the public health role of GPs by:

- Public Health England and the NHS Commissioning Board working together to support and encourage GP consortia to maximize their impact on population health and reducing inequalities. This includes looking specifically at equitable access to services and outcomes.
- Increasing public transparency about how effective GP practices are in giving public health advice and achieving public health goals.
- Incentives for prevention related work in the quality and outcomes framework (QOF). A sum equivalent to at least 15% of the current value of the QOF should be devoted to evidence-based public health and primary prevention indicators from 2013. The funding for this will be within the Public Health England budget.

6. Environmental and climate change considerations

In the longer term, it is anticipated that the public health team will transfer from Southgate House, Devizes, to a Wiltshire Council site. Environmental considerations will form part of this relocation decision and part of the transition planning process.

7. Equalities Impact of the Proposal

The proposed transfer of the public health team under a section 75 agreement will not impact on equality and inclusion at the point of transfer. A full Equality Impact Assessment is being undertaken with support from the Equality and Diversity Team and the findings will inform the ongoing transfer process.

8. Risk Assessment

Risks associated with this transfer will be considered and managed by the Wiltshire Council and NHS Strategy Board and wider transition team.

9. Financial Implications

The financial implications for future Public Health budgets are being considered nationally. However the early indications in the White Paper, Healthy Lives, Healthy People is that, nationally, over £4 billion will be made available through ring-fenced grant funding.

For the first phase of the transition the Section 75 arrangement will not require any transfer of funds from Public Health to the Council. It is anticipated that the resources allocated prior to the arrangement will be required at the same level post arrangement, but that no extra funding is required to either facilitate the move to the agreement or the operation under the new agreement.

10. Legal Implications

An agreement under section 75 of the National Health Services Act 2006 is a formal mechanism which enables PCTs and local authorities to pool resources and in this case will facilitate the transfer of aspects of the public health service functions to the Council. The Act and the relevant regulations set out the scope of the NHS services which may be the subject of such a partnership arrangement. Legal advice will be sought in respect of the detailed proposals.

11. Options Considered

The recommendations contained within the report are recommended by the NHS and Wiltshire Council Strategy group. These recommendations support the Wiltshire commitment to be an 'early implementer' of Health and Wellbeing Boards.

12. Conclusions

Cabinet are asked to ratify the recommendations contained within this report.

Name of Director: Maggie Rae

Designation: Corporate Director of Public Health and Wellbeing

Report Author: Maggie Rae, Corporate Director of Public Health and Wellbeing

Date of report: February 2011

Background Papers

The following unpublished documents have been relied on in the preparation of this report:

Healthy Lives, Healthy People: Our Strategy for PH in England - http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_121941

Healthy Lives, health People: Transparency in Outcomes Proposals for a PH Outcomes Framework – http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH_122962

Healthy Lives, Healthy People: consultation on the funding and commissioning routes for PH – http://www.dh.gov.uk/en/Consultations/Liveconsultations/DH_122916

The Operating Framework for the NHS England 2001-12 http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_122736.pdf

Appendices

None
