

<b>DECISION-MAKER:</b>	CABINET GOVERNANCE COMMITTEE COUNCIL		
<b>SUBJECT:</b>	TRANSFER OF PUBLIC HEALTH FUNCTIONS TO SOUTHAMPTON CITY COUNCIL		
<b>DATE OF DECISION:</b>	19 FEBRUARY 2013 19 MARCH 2013 20 MARCH 2013		
<b>REPORT OF:</b>	CABINET MEMBER FOR COMMUNITIES		
<b><u>CONTACT DETAILS</u></b>			
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<b>STATEMENT OF CONFIDENTIALITY</b>			
None			

### **BRIEF SUMMARY**

The Health and Social Care Act 2012 transfers public health from the NHS to local authorities and a new body called Public Health England from April 2013. This report outlines the key issues for delivering local authority public health functions and sets out proposals for a scheme of delegation to the Director of Public Health that will be incorporated into the Constitution.

### **RECOMMENDATIONS:**

#### **CABINET**

- (i) That the details of the local authority public health responsibilities set out in this report be noted;
- (ii) That the proposed scheme of delegation to the Director of Public Health set out in Appendix 1, be approved for submission to Council as an amendment to the Council Constitution
- (iii) That authority be delegated to the Director of Public Health, together with other directors of the Council as appropriate, to undertake any actions and make any arrangements necessary for the transfer of relevant public health functions to the Council

#### **GOVERNANCE COMMITTEE**

- (i) That Governance Committee advises of any comments or views it has upon the proposed scheme of delegation to the Director of Public Health set out in Appendix 1, to be incorporated into Part 10 of the Council Constitution in accordance with its governance role.

## **COUNCIL**

- (i) That the proposed scheme of delegation to the Director of Public Health set out in Appendix 1, be approved and incorporated into Part 10 of the Council Constitution

## **REASONS FOR REPORT RECOMMENDATIONS**

1. To enable new local authority public health functions to be delivered from 1<sup>st</sup> April 2013.

## **ALTERNATIVE OPTIONS CONSIDERED AND REJECTED**

2. None. Public Health becomes a local authority function from 1<sup>st</sup> April 2013, and it is necessary to make provision for the Authority to be able to discharge its new functions.

## **DETAIL (Including consultation carried out)**

3. The Health and Social Care Act 2012 transfers a number of key public health responsibilities to local authorities. A significant amount of work has been undertaken by both the Council and the PCT to ensure the smooth transfer of staff and the seamless transition of the service and activities. A transition plan, approved both by the PCT and SCC Cabinet, was submitted to South Central Strategic Health Authority in March 2012 and is being implemented and monitored.
4. In preparation for the transfer, Executive responsibility for public health was allocated to the Cabinet Member for Communities at the Annual Meeting of the Council in May 2012. From April 2013, the Cabinet Member will be directly responsible and accountable for setting a strategic and policy direction for public health.
5. Professional and operational leadership will be the responsibility of the Director of Public Health, who will also be the Council's principal adviser on health and health-related issues. The Director of Public Health will lead a multi-disciplinary public health team with support staff who have transferred from NHS Southampton to continue to deliver public health functions and responsibilities. These functions include:
  - health surveillance and needs analysis
  - health protection (including emergency preparedness)
  - population health care advice (including effectiveness and priority setting)
  - commissioning health improvement services
  - collaborative programmes to tackle causes of ill health
6. The Director of Public Health will also link to, and have overall strategic leadership responsibility for, other public health responsibilities that are currently delivered elsewhere in the Council. Those linked specifically to the defined public health services include:
  - Drugs misuse, - SCC Health and Adult Social Care Strategic Commissioning Team (includes the Drug Action Team)
  - Domestic violence – SCC Community Safety Team

- Alcohol, mental health promotion – Joint (SCC/NHS) mental health commissioning team
  - Teenage pregnancy and children’s prevention and inclusion – SCC Children’s Services, Education and Learning Directorate.
7. Public Health will be a function that needs to input into and influence work across the Council. With the function being located in the People Directorate there will be strong connections to the work of children’s and adult social care, housing services, and port and environmental health. To ensure opportunities to tackle wider determinants of ill health are maximised, Public Health will work with the new Place Directorate to co-design and support work programmes that link health improvement with private sector housing, transport, community safety and economic development. Through the Communities portfolio, Public Health will contribute to work on tackling poverty, Families Matter and equalities. The overall public health programme will be shaped by the Joint Health and Well-being Strategy, and deliver improvement across a range of prioritised outcomes, drawn from the national Public Health Outcomes Framework, which has links to, and a number of shared outcomes, with the frameworks for adult social care and the NHS.

#### **Transfer of Public Health Staff**

8. To assist with the smooth transfer of the function, public health staff were relocated from PCT premises to the Civic Centre in March 2012. The transfer of employment of staff to the Council will be covered by a Transfer Scheme to be drafted by lawyers acting for the Department of Health. This is consistent with arrangements for other Public Health Services and staff across the country, who formally transfer to local authority service on 1st April 2013.

#### **Public Health mandated and other commissioned or provided services**

9. Local authorities will be specifically responsible for commissioning or providing the following services. Whilst those marked \* are the mandated services in legislation, many of the others are required to make delivery of those mandated services a reality. It is essential that the Director of Public Health and his staff have the necessary authority and delegated powers to enable the following services to be delivered.
- NHS Health Check assessments\*
  - The national child measurement programme\*
  - Comprehensive sexual health services - including testing and treatment for sexually transmitted infections, contraception outside of the GP contract and sexual health promotion and disease prevention\*
  - A new expanded local authority role for public health - health protection including assurance of infection control, incidents, outbreaks and emergencies with a specific leadership role for Emergency Planning, Resilience and Response\*
  - Public health leadership, advice and support to NHS commissioners\*
  - Tobacco and smoking cessation services

- Alcohol and drug misuse services
- Public health services for children and young people aged 5 to 19 (and in the longer term all public health services for children and young people)
- Interventions to tackle obesity, such as community lifestyle and weight management services
- Locally led nutrition initiatives
- Increasing levels of physical activity in the local population
- Public mental health services
- Dental public health services
- Accidental injury prevention
- Population level interventions to reduce and prevent birth defects
- Behavioural and lifestyle campaigns to prevent cancer and long-term conditions
- Local initiatives on workplace health
- Supporting, reviewing and challenging delivery of key public health funded and NHS delivered services such as immunisation and screening programmes
- Local initiatives to reduce excess deaths as a result of seasonal mortality
- Public health aspects of promotion of community safety, violence prevention and response
- Public health aspects of local initiatives to tackle social exclusion
- Local initiatives that reduce public health impacts of environmental risks

### **Public health protection**

10. From April 2013, the local authority will become responsible for all aspects of public health protection, supported by Public Health England. This will include community infection prevention and control. Other issues where public health may be called on would include chemical spills, natural disasters and the covert deliberate release of biological and chemical agents. The local authority will be expected to provide public health leadership in such circumstances and action to mobilise the NHS response.

### **Partnership with the Southampton CCG: The Local Public Health Advisory Service**

11. One component of the new LA responsibilities for public health includes a Public Health Advice Service or “Core Offer” to Clinical Commissioning Groups (CCG). The elements of public health advice have been laid out in a memorandum of understanding that has been negotiated as part of the NHS transition into CCGs and new public health accountabilities and responsibilities. The Southampton memorandum of understanding covers two years to include the transition year 2012-13 and the first year of health act implementation in 2013-14.

## **Delegated powers required by the Director of Public Health**

12. In order to undertake the activities described in this report, a series of delegations to the Director of Public Health are required. Appendix 1 sets out a list of the delegations required, and the Cabinet and Council are requested to endorse and adopt them so the Director of Public Health will be in a position to ensure the statutory duties can be undertaken.

## **RESOURCE IMPLICATIONS**

### **Capital/Revenue**

13. Public Health transfers to the local authority with a budget that is ring-fenced for a period of 3 years. With a number of public health functions transferring to Public Health England, it is not simply a case of transferring the existing PCT public health budget to the local authority. The Department of Health published the 2013/14 and 2014/15 budget allocations to enable local authorities to fulfil the public health function on 10<sup>th</sup> January 2013. The budget allocation announced for Southampton is £14.313m for 2013/14 and £15.050m for 2014/15. The final Public Health spending plan for 2013/14 is currently being compiled and from work completed to date is not expected to exceed the grant allocation announced. From April the budget will be subject to the standard council budget reporting and monitoring processes, and public health will be fully included in the budget setting process for 2014/15.
14. In addition to funding the Public Health Team and the Commissioned services, the grant is intended to fund any increase in the overheads and or support costs of the Council as a consequence of taking responsibility for Public Health. It has been estimated that the proportion of the grant intended for this purpose is £0.4m. Work is currently being undertaken to identify the nature and scope of these additional costs.
15. The grant is provided on the condition that quarterly returns to report progress on spend are made available to Public Health England to review. In addition, the Public Health outturn position, certified by the Chief Executive, is required to be provided in the same format as the quarterly reviews. The outturn grant spend will need to be subject to review by Audit.
16. The Public Health budget has been included within the budget to be agreed at Full Council on 13<sup>th</sup> February 2013.

### **Property/Other**

17. None.

## **LEGAL IMPLICATIONS**

### **Statutory power to undertake proposals in the report:**

18. The Health and Social Care Act 2012 transfers public health functions from PCTs to upper tier local authorities and Public Health England.

### **Other Legal Implications:**

19. None.

**POLICY FRAMEWORK IMPLICATIONS**

20.. None.

**KEY DECISION?** No

<b>WARDS/COMMUNITIES AFFECTED:</b>	None
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**SUPPORTING DOCUMENTATION**

**Appendices**

1.	Proposed amendments to part 10 of the Council Constitution : Delegations to the Director of Public Health
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**Documents In Members' Rooms**

1.	None
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**Equality Impact Assessment**

Do the implications/subject of the report require an Equality Impact Assessment (EIA) to be carried out.	/No
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**Other Background Documents**

**Equality Impact Assessment and Other Background documents available for inspection at:**

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
None	