

**7<sup>th</sup> November 2012****Agenda Item: 9****REPORT OF THE DIRECTOR OF PUBLIC HEALTH****REPORT ON PUBLIC HEALTH TRANSITION****Purpose of the Report**

1. The report provides information on progress around Public Health Transition including the recent self assessment assurance report to the Local Government Association. It also describes the work being taken forward to develop the work programme underpinning the work of the Health & Wellbeing Board.

**Information and Advice****Public Health Transition**

2. A project plan was initially developed in March last year to manage the transition of Public Health from NHS Nottinghamshire County and Bassetlaw to Nottinghamshire County Council. This plan has been regularly reviewed and maintained to keep the work on track according to national timescales and performance milestones.
3. There are 62 members (56.3 Full Time Equivalent) of the Public Health Department due to transfer to the Council on 1 April 2013. Five members of staff are currently employed by NHS Bassetlaw; the remainder are employed by NHS Nottinghamshire County. Nottinghamshire County staff are already co-located within County Hall and Meadow House.
4. A self assessment was submitted on 10 October 2012 to the Lead Chief Executive for the region on behalf of the Local Government Association. This described the status of the current transition arrangements.
5. There are no significant risks identified within the transition plan that are not being addressed. Detailed work is being taken forward to ensure the smooth and effective transfer of contracts, staff and Public Health functions by 31 March 2013. Further information is available from the Associate Director of Public Health.
6. A dedicated Project Board is being established to manage the remaining five months of transition to give in depth support to areas of transition that require detailed action. The project is sponsored through David Pearson and Chris Kenny and managed through Cathy Quinn, Associate Director of Public Health.

## **Public Health Grant**

7. Confirmation on the Public Health Grant for 2013-14 is still outstanding but is expected in December, following further discussion on the allocation formula. As Nottinghamshire County is not an outlier, it is not expected that the shadow grant will be significantly different to the actual allocation.
8. As part of the preparatory work, a report has been developed to describe the current expenditure across Public Health, including a summary of how this is spent within each policy area. This report is being used to prepare a discussion paper on future funding priorities within the Public Health Grant. Further information is available from the Associate Director of Public Health.
9. A confirm and challenge session took place on 8 October 2012 with senior Public Health managers to discuss priorities for funding over the next 1-2 years. Each policy lead presented their case, and members of the department challenged the information based on prioritisation criteria agreed by the Health & Wellbeing Board.
10. Proposals will be presented to the Corporate Leadership Team and Health & Wellbeing Implementation Group during November based on the information known to date. Once the Public Health Grant for 2013-14 has been confirmed, the final proposals will be presented to the Public Health Sub-Committee (once established) and Health & Wellbeing Board for ratification in January 2013. This will agree the Public Health Grant allocations and be used to develop the Public Health business plan for 2013-14.

## **Public Health Business Plan**

11. The Public Health Department continue to make progress against their annual plan. Regular reporting of activity is collated through departmental checkpoint reports. These describe all the work of the department and illustrate the broad scope of Public Health work and how it contributes to delivery of the Public Health and Health & Wellbeing agenda. Further information is available from the Associate Director of Public Health.

## **Health & Wellbeing Board**

12. The establishment of the Health & Wellbeing Board is also included in the Public Health Transition & Business Plan due to the connection with the Health & Social Care Act 2012. The Associate Director of Public Health provides leadership to the work programme, ensuring coordination of Board development, governance arrangements and Board business.
13. The Board meeting agendas and workshops continue as described in the forward programme (**Appendix One**) covering a range of health and wellbeing issues. Information on past agendas is also included in the forward programme. Members of the Board are asked to consider the programme and feedback any items for inclusion in the future programme.
14. The supporting structure to the Health & Wellbeing Board is now in place, which provides a good governance system to manage the work of the Board. Key developments are

described below and further information on the governance arrangement is available through the Associate Director of Public Health.

**14.1. Health & Wellbeing Implementation Group:**

The Health & Wellbeing Implementation Group provides the executive oversight to the Board by directing the work of the groups within the supporting structure. These include a range of integrated commissioning groups covering areas such as older people, mental health, children & young people & obesity along with other areas.

The Health & Wellbeing Implementation Group was established in May 2012 and meets every other month to performance monitor activity and manage the work programme.

**14.2. JSNA, Strategy & Outcomes Group**

The JSNA, Strategy & Outcomes Group has a coordinating function bringing together the outputs of the integrated commissioning groups. Its main role is to maintain a work programme to continually refresh and develop the JSNA and Health & Wellbeing Strategy (HWS).

Two of the three chapters of the JSNA were refreshed and formally approved by the Council and Primary Care Trusts in July 2012. The update of the Children & Young People's chapter has now commenced.

This work is supported by the development of a Local Outcomes Framework to monitor delivery of the strategy, and implementation of a communication and engagement plan to ensure the JSNA and HWS are developed around local views.

## **Health & Wellbeing Stakeholder Network**

15. A second stakeholder network is being organised for November/December 2012. The Implementation Group felt it important to consider a wider determinant of health. Therefore the event will concentrate on the link between housing and health, using case studies and sharing of good practice. Further information will be circulated in due course.

## **Development of the Health & Wellbeing Board**

16. The Health & Wellbeing Board has now hosted four workshops covering, development of the Health & Wellbeing Strategy, long-term neurological conditions and stroke, obesity and joint work with Productive Notts. Actions have been identified to consolidate commissioning plans or work programmes as relevant and these are being taken forward via the appropriate supporting group.
17. The Health & Wellbeing Board is due to discuss the recent self assessment at the next workshop on 28 November 2012 and identify development needs as part of discussions.

18. Seven Health & Wellbeing Board members also took part in the recent regional challenge event. A report is going to the next Board and the learning from the event is being considered as part of this forthcoming workshop.

19. Planned Work for November 2012 – January 2013 include the following areas:

- Development of Operating Principles for the Health & Wellbeing Board
- Completion of the HWB Self Assessment during the November Health & Wellbeing Board workshop
- Agree development plan for Health & Wellbeing Board based on findings of self assessment
- Development of reporting arrangements for the Health & Wellbeing Board supporting structure
- Development of a Local Outcomes Framework to monitor the delivery of the Health & Wellbeing Strategy
- Development of a Communications & Engagement Plan
- Development of plan to initiate a continual refresh for JSNA and Health & Wellbeing Strategy

## **HealthWatch**

20. The establishment of HealthWatch is also set out in the Health & Social Care Act 2012. Within Nottinghamshire Council Council, the process of commissioning a Local HealthWatch is led through Policy, Planning & Corporate Services and includes Public Health, NHS and LINKs involvement. A project plan manages the delivery of work against tight timescales.

21. The service specification for Local HealthWatch has been developed following consultation with key stakeholders and market sounding events have been held to provide information to potential providers of the service from April 2013. The contract is currently out to tender, which closes on 29<sup>th</sup> November 2012. Evaluation panels are scheduled to take place the first week in December to assess the applications.

## **Statutory and Policy Implications**

22. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **RECOMMENDATION/S**

- 1) The Health & Wellbeing Board are asked to note the content of the report and feedback any items for including in the forward programme for the Board.

**DR CHRIS KENNY**  
**Director of Public Health**

**For any enquiries about this report please contact:**

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**Constitutional Comments**

As the report is for noting, no constitutional comments are required.

**Financial Comments**

**Background Papers**

Public Health Self Assessment 10 October 2012

Public Health Checkpoint report April – July 2012

Supporting Structure for the Health & Wellbeing Board and delivery of the Health & Wellbeing Strategy September 2012

**Electoral Division(s) and Member(s) Affected**

All.

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