

**9 September 2019****Agenda Item: 8****REPORT OF THE DIRECTOR OF PUBLIC HEALTH****PUBLIC HEALTH INTELLIGENCE SUPPORT TO THE INTEGRATED CARE  
SYSTEM****Purpose of the Report**

1. To seek approval for the establishment of one temporary Public Health Intelligence Analyst post through Public Health Reserves in order to support the Integrated Care System in meeting the health needs of Nottinghamshire residents.

**Information**

2. The Health and Social Care Act 2012 sets out the statutory responsibilities of local authorities for public health services in order to improve and protect public health. This includes a statutory duty to provide NHS commissioning advice to maximise impacts on population health. A memorandum of understanding between the County Council and Clinical Commissioning Groups (CCGs) in Nottinghamshire underpins the delivery of this function.
3. Local commissioning decisions are supported by Joint Strategic Needs Assessments (JSNAs) that are produced by the Health and Wellbeing Board. JSNAs are individual chapters on specific health and care issues that provide comprehensive assessments of current and future health, wellbeing and social care needs. They inform actions and commissioning decisions that the County Council, NHS and other partners need to take to meet the needs of Nottinghamshire residents and address the wider determinants of health.
4. The Integrated Care System (ICS) model brings together NHS providers, commissioners and local authorities to work in partnership to improve health and care in their area. The County Council covers both the Nottingham and Nottinghamshire ICS and the South Yorkshire and Bassetlaw ICS.
5. The division of work and governance within the ICS has been split into three separate levels: Neighbourhood, Place and System. In both the Nottingham and Nottinghamshire ICS and the South Yorkshire and Bassetlaw ICS, these levels are managed by the Primary Care Networks (PCNs), Integrated Care Providers (ICPs) and ICSs respectively.

6. In order to support the establishment and development of PCNs and ICPs, public health advice is required to understand and assess the health needs of the populations they cover. This will in turn enable services to be effectively tailored and targeted to meet the needs of those specific areas.
7. It is therefore proposed to establish one temporary Public Health Intelligence Analyst post (Band B, 0.5 FTE) for one year to support the use of JSNA and Population Health Management (PHM) products within the ICS. The impact of providing additional capacity will be the fulfilment of the statutory functions outlined above and greater support to the ICS to realise its ambitions, particularly with regard to prevention.
8. The Public Health Intelligence Team, of which this post will be a part of, use statistical and epidemiological methodologies to support, promote and develop the evidence base for public health activity across the council and its partner organisations. Work involves analysis of a range of data to support the development of health needs assessment, identification of health inequalities and priorities for action. The team disseminate and explain the analysis, turning it into meaningful and timely health intelligence to improve services and outcomes.
9. The funding and approach for the work of the proposed role was previously agreed by Adult Social Care and Public Health Committee in December 2018 when considering additional use of Public Health Reserves.
10. It is anticipated that the establishment of this post will be combined with an existing vacant 0.5 FTE temporary Public Health Intelligence Analyst post, funded on a temporary basis for a period of 12 months from the date of appointment. This existing post was created to harness data from the General Practice Repository for Clinical Care (GPRCC) to support the assessment of population health and care needs; strategic planning of health; and social care systems and assessments of efficiency, effectiveness or equity of parts of the care system

### **Other Options Considered**

11. The option to not recruit to this Public Health post would mean a continued lack in capacity and capability to help the ICS define, assess, improve and measure population health and understand how best to deliver impacts on health.

### **Reason/s for Recommendation/s**

12. The recommendations relating to the establishment of the Public Health post are made to enable the County Council to deliver statutory responsibilities through greater support to the ICS.

### **Statutory and Policy Implications**

13. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public-sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below.

Appropriate consultation has been undertaken and advice sought on these issues as required.

### **Financial Implications**

14. Funding for the 0.5 FTE Public Health Intelligence Analyst (Band B) post, at a cost of £24,000, will be funded through Public Health Reserves. The funding to undertake this work was approved by Adult Social Care and Public Health Committee in December 2018 as part of a £120,000 funding provision for ICS support.

### **Human Resources Implications**

15. The human resource implications are outlined in **paragraphs 7 and 10**.

## **RECOMMENDATION/S**

That Committee:

- 1) gives approval for the establishment of the following temporary Public Health post:

<b>Post Title</b>	<b>FTE</b>	<b>Grade/ Band</b>	<b>End date</b>	<b>Cost per annum</b>	<b>Funding Source</b>
Public Health Intelligence Analyst	0.5	B	12 months from recruitment	£24,000	Public Health Reserves (as agreed December 2018)

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### **Constitutional Comments (EP 23/08/2019)**

16. The recommendation falls within the remit of the Adult Social Care and Public Health Committee by virtue of its terms of reference.

### **Financial Comments (DG 23/08/19)**

17. 0.5 FTE Public Health Intelligence Analysis post (Band B), to support the JSNA and use of PHM products, to be funded from Public Health reserves at a cost of £24k.

## **HR Comments (SJJ 23/08/2019)**

18. The post will be recruited to and appointed to on a temporary fixed term contract

## **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- [Use of Public Health General Reserves](#) - report to Adult Social Care and Public Health Committee on 10<sup>th</sup> December 2018.

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

All.