

Annex 1
Audit of Compliance with Public Health Statutory Requirements

Conditions and mandatory functions	Basis in legislation	NCC activity to comply with functions	Assurance by Council
Statutory functions of the Director of Public Health (DPH)			
<p>The DPH is a chief officer of their authority and the principal adviser on all health matters to elected members and officers, with a leadership role spanning all three domains of public health: health improvement, health protection and healthcare public health.</p>	<p>Section 73A(1) of the NHS Act 2006, inserted by section 30 of the Health and Social Care Act 2012</p>	<p>Employment of Director of Public Health within new PH structure. The post is managerially accountable to the Chief Executive, although it reports on a day to day basis to the Director of Adult Social Care, Health and Public Protection and Deputy Chief Executive. The post also is identified as a member of the corporate leadership team.</p> <p>The job description complies with national requirements and is approved by the Faculty of Public Health.</p> <p>DPH post has been continually filled since transfer in 2013. An interim acting-up arrangement is currently in place to ensure that the post is not left vacant. Deputising arrangements are set up whenever the DPH is absent.</p>	<p>The Director of Public Health post is appointed to by the Senior Staffing Sub-Committee.</p> <p>The Director of Public Health has an annual job plan via the EPDR process that is agreed with the Corporate Director of ASCH&PP and the Chief Executive.</p>
<p>Independent advocate for the health of the population and for system leadership for its improvement and protection. As such, in England this is a statutory role within local authorities with close links to the</p>	<p>As above</p>	<p>Status of the DPH as Chief Officer within the Council and input into corporate decision-making. The post is also a member of the Nottinghamshire Health and Wellbeing Board.</p>	<p>The Nottinghamshire HWB is chaired by the Chair of the Public Health Committee.</p> <p>The 2016 DPH annual</p>

NHS and PHE. The DPH is a Chief Officer and pre-eminent advisor on health and wellbeing to the LA.		DPH is a member of the Notts Clinical Congress group of CCGs. Production of independent annual report.	report was received and approved for publication by Public Health Committee in December 2016.
All of their local authority's duties to take steps to improve public health. Any of the Secretary of State's public health protection or health improvement functions that s/he delegates to local authorities, either by arrangement or under regulations.	Section 6C of the 2006 Act, inserted by Section 18 of the 2012 Act	The DPH job description incorporates these responsibilities. Responsibility is delegated for delivery by members of the Public Health team.	The DPH agrees portfolios of responsibility and annual job plans with the Consultants in Public Health (Service Director equivalence within the Council).
Planning for and responding to health emergencies; exercising their local authority's functions in planning for, and responding to, emergencies that present a risk to public health	Section 73A(1) of the NHS Act 2006, inserted by section 30 of the Health and Social Care Act 2012	The DPH job description incorporates this responsibility. Part of the responsibility is delegated to an identified Public Health Consultant. Public Health works closely with Public Protection / Emergency Planning in carrying out this responsibility.	Responsibility is linked into the Council's risk and emergency management reporting structures and through this, to Policy Committee.
Their local authority's role in co-operating with the police, the probation service and the prison service to assess the risks posed by violent or sexual offenders	As above	Public Health is the local commissioner of domestic violence and abuse services and has an identified policy lead to work on this agenda. The DPH is a member of the Safer Notts Board.	Public Health Committee receives performance information on the DVA contract as part of quality and performance reporting.
Such other public health functions as the Secretary of State specifies in regulations	As above	Provision for additional functions is written into the Nottinghamshire DPH job description.	The DPH Job Description is subject to internal Council

			approval processes as well as externally approved by the Faculty of Public Health.
Health improvement duty			
Carrying out research into health improvement, provide information and advice (for example giving information to the public about healthy eating and exercise)	Section 12 of the 2012 Act introduced a new duty at Section 2B of the 2006 Act for all upper-tier and unitary local authorities in England to take appropriate steps to improve the health of the people who live in their areas	Public Health intelligence function. Development of JSNA. Construction of specifications for commissioned Public Health services are based on results of intelligence research. The commissioning cycle is evidence-based; proposed interventions are designed to address the identified needs.	Public Health Committee receives reports on individual specification proposals for input and approval.
Providing facilities for the prevention or treatment of illness (such as smoking cessation clinics)	As above	Commissioned services in a number of policy areas contain clinical elements to prevent or treat illness. Examples are: <ul style="list-style-type: none"> • Substance misuse • Tobacco control • Obesity and weight management 	Performance reporting on commissioned services to Public Health Committee.
Provide assistance to help individuals minimise risk to health arising from accommodation or environment	As above	Healthy Housing contract; development of close working protocols with planners; Health Impact Assessments and input into planning process	Activity is delivered in partnership, with engagement of the Nottinghamshire HWB.

			Relevant elements are contained within the performance reporting on commissioned services to Public Health Committee
Mandated Functions			
Defined in part 2 of the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013			
Weighing and measurement of children at Reception (age 4-5) and Year 6 (age 10-11) Parental involvement – gaining consent to carry out the measurements Submission of data to Health and Social Care Information Centre	Regulation 3 within Part 2 of the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013	NCMP - forms part of the 0-19 Healthy Child Programme (children's public health services) contract. The specification includes all the requirements of the mandated function.	Performance reporting on commissioned services to Committee as described above.
NHS Health Checks: To provide, or secure the provision of, health checks to be offered to eligible persons in its area and ensure that all eligible persons are offered an NHS Health Check every 5 years and in accordance to the specified content detailed within the Regulations. LAs are required to make an offer to all eligible persons, but a proportionate universalism approach is supported. This means that local authorities are free to target a	Regulations 4 and 5 within Part 2 of the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013	Direct award to GPs for provision of Health Checks; IT support procured separately. The specifications include all the requirements of the mandated function. Annual budget 2016/17 £859K.	Performance reporting on commissioned services to Committee as described above. Committee has also received additional update presentations on performance, most recently on 17 March 2016.

<p>greater extent of their resource towards higher risk and vulnerable communities, whilst keeping a universal offer to all eligible persons.</p>			
<p>Open access sexual health services The mandated function requires each local authority to provide, or secure the provision of, open access sexual health services in its area including: preventing the spread of sexually transmitted infections (STIs); treating, testing and caring for people with STIs and partner notification.</p> <p>Local authorities should provide contraceptive services including advice on, and reasonable access to, a broad range of contraceptive substances and appliances; advice on preventing unintended pregnancy.</p> <p>Local authorities do not need to provide sterilisation or vasectomy services other than the giving of preliminary advice on availability and as an appropriate method of contraception for the person concerned.</p>	<p>Regulation 6 within Part 2 of the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013</p>	<p>Integrated Sexual Health Services Contract – specification includes open access services covering both contraceptive services and STI treatment in line with regulations. Approach to out-of-area GUM provision – payment for out of area provision on supply of backing data confirming home address postcode within Nottinghamshire; standard operating procedure in place. Annual budget 2016/17 £6.2m</p>	<p>Committee receives regular updates on the sexual health contract as part of the quarterly quality and performance in commissioned services report.</p> <p>On 14 July 2016, Committee received a report on quality assurance in commissioned services which gave examples related to the provision of sexual health services.</p>

<p>Local authorities are not required to offer services for treating or caring for people infected with Human Immunodeficiency Virus.</p>			
<p>Public health advice to CCGs There is a statutory duty on upper tier and unitary local authorities to give NHS commissioning a population focus to make maximum impact on population health. This is described in regulations as: “each local authority shall provide or shall make arrangements to secure provision of a public health advice service to any CCG whose area falls wholly or partly within the authority’s area and further, that the service consists of provision of such information and advice to a CCG as the LA considers necessary or appropriate with a view to protecting or improving the health of people in the LA’s area.”</p> <p>The local authority Public Health advice service is intended to support CCGs in carrying out their duty and it is specified that this service should be free of charge. The regulations also make it clear that the provision of the public health advice service</p>	<p>Regulation 7 of the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 in exercise of powers conferred in Sections 6C (1) to (3) of the NHS Act 2006 (as amended by the HSC Act 2012). These duties are further described in DH Guidance “Healthcare Public Health Advice Service to CCGs” issued in June 2012.</p> <p>In addition the Act gives each CCG a duty to obtain</p>	<p>Delivered through the Public Health staff team, including includes provision of intelligence and analysis through the Public Health information team, production of the JSNA, contributions to STP advice, representation on the CCG Boards which plan health service delivery.</p> <p>Public Health staff have assigned responsibilities – PH consultants each have one or more identified CCGs for which they provide Public Health leadership, advice and support.</p> <p>The Public Health intelligence function provides additional support through the provision of intelligence and research to support decision-making in the CCGs, to ensure that services are based on demographic need.</p> <p>There is a Memorandum of Understanding between the Council and the CCGs. This was originally agreed for 2013-2016 and then reviewed during 2016. The revised version sets out the</p>	<p>The most recent MoU with CCGs is being brought to Committee seeking approval in March 2017.</p>

<p>should:</p> <ul style="list-style-type: none"> • have regard to the CCG's needs • be agreed between the LA and the CCG; and • be kept under review 	<p>advice appropriate for enabling it effectively to discharge its functions from persons who (taken together) have a broad range of professional expertise in:</p> <p>a) the prevention, diagnosis and treatment of illness; and</p> <p>b) the protection or improvement of public health</p>	<p>service to be provided up to 31 December 2020. This meets the requirement for the provision of public health advice to have regard to the CCGs' needs, be agreed between the LA and CCG(s), and be kept under review.</p> <p>Initial guidance stated that the provision of advice to CCGs was expected to account for 40% of staff time. Further guidance (citation needed) proposes 'a rough coverage' of 1 whole time equivalent accredited <u>specialist</u> (i.e. Consultant) per 270,000 people. Within Nottinghamshire, this would equate to 3 FTE Consultants.</p>	
<p>Protecting the health of the local population Covers the provision of information and advice to relevant parties within the area in order to promote the preparation of, or participation in, health protection arrangements against threats to the health of the local population</p>	<p>Regulation 8 within Part 2 of the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013</p>	<p>CIPC service through Section 75 agreement with CCGs. Small contract £81K with NHS for community infection and prevention control service until March 2017, after which the activity will become the responsibility of the NHS. Public Health staff assignment as health protection policy lead. PH staff time and engagement with partnership arrangements, links to emergency planning.</p>	<p>PH Committee approved the S75 arrangement on 26 November 2014.</p> <p>Responsibility is linked into the Council's risk and emergency management reporting structures and through this, to Policy Committee.</p>
<p>Oral health Local authorities are statutorily</p>	<p>Amendment to Water Industry Act</p>	<p>Water fluoridation Oral health promotion programmes</p>	<p>Committee receives regular updates on</p>

required to provide or commission oral health promotion programmes to improve the health of the local population, to an extent that they consider appropriate in their areas. They are also required to provide or commission oral health surveys. The oral health surveys are carried out as part of the Public Health England (PHE) dental public health intelligence programme (formerly known as the national dental epidemiology programme).	1991 by the Health and Social Care Act 2012	through contract Assess or secure the provision of oral health surveys to assess and monitor oral health needs: funding for this activity is still with NHS England and so since 2014, NHS England have been undertaking this work. Discussions are underway about the future.	contract performance as part of the quarterly quality and performance in commissioned services report.
Non mandated “conditions of public health grant”			
Have regard to need to improve take up and outcomes of drug and alcohol misuse treatment services	Health and Social Care Act 2012. New condition in 2015/16 public health grant announcement. Core expectation of the government’s Drug Strategy	Substance Misuse Contract – recovery focus. Performance monitoring of contract takes into account requirements.	Committee receives regular updates as part of the quarterly quality and performance in commissioned services report.
Children and Young People’s 0-19 services	Transfer of 0-5 Health Child Programme commissioning responsibility from NHS England on 1 October 2015	Children’s public health nursing and Healthy Child Programme contract	As above.
Requirement to commission 5 universal health visitor reviews to at least the level provided at point of	Transfer of 0-5 Healthy Child Programme	Contained in specification for recommissioned 0-19 Healthy Child Programme	As above.

transfer – for 18 months following 1 Oct 2015	commissioning responsibility from NHS England on 1 October 2015		
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