

**Local Government North Yorkshire and York
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Update on Public Health Reforms

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1. Outline

This update provides a brief summary of the Government's response to the public health white paper Healthy Lives, Healthy People. Details on how public health transition is being taking forward locally are described together with the key current issues.

2. Brief Summary of Healthy Lives; healthy people: Update and way forward.

The Government published Healthy Lives, Healthy People: Update and way forward www.dh.gov.uk , on 14th July 2011, a policy statement to the public health white paper Healthy Lives, Healthy People. The paper confirms the Governments commitment to improving public health across the life course and tackling health inequalities and sets out detail on the following:

- local authorities to take on new responsibilities for public health and mandated to provide selected services supported by a ring-fenced budget, led by a Director of Public Health;
- proposals on who will be responsible for commissioning different public health services;
- local authorities to be supported by a new integrated public health service, Public Health England. This will be established as an executive agency to provide greater operational independence;
- the Secretary of State to provide national strategic leadership on public health with the Department of Health (DH) to support him in the delivery of his functions;
- reaffirms the role of the Health and Wellbeing Board as the key structure for local government to work in partnership with clinical commissioning groups;
- provides clear principles for emergency preparedness, resilience and response;
- recognises that there are issues that need further development with a series of Public Health System Reform Updates to follow to complete the operational design of the public health system including:
 - the public health outcomes framework to detail how public health outcomes are improvements will be tracked;
 - the Public Health England Operating Model to describe how Public Health England will work, is relationships and how it can support public health outcomes;
 - public health in local government and Director of Public Health, final detailed operational design;

- public Health funding, to establish baseline public health spend and details of the allocation methodology, health premium and shadow allocations;
- a workforce strategy to address the concerns related to terms of conditions and regulations of public health professionals.

3. Update on Public Health Transition into Local Authorities in North Yorkshire and York

In both North Yorkshire and York, the transfer of public health responsibilities from NHS North Yorkshire and York into NYCC and CoY Council is being overseen by Public Health Groups that report to their Transition Boards. The timescale for transfer of public health responsibilities and full ownership of budget is April 2013.

The key issues that are being worked through by both the Public Health Groups are around the following key themes:

1. Gaining a shared understanding of three domains of public health (health improvement, health protection and healthcare) including a high level mapping of current public health activities in local authorities and PCT how it may relate to and support future delivery of public health outcomes.
2. Considering policy proposals and their implications in particular the scope of the responsibilities of the Director of Public Health and how these functions might be best delivered within both Councils. The substantive post which covered North Yorkshire and York is currently vacant and being covered on an interim basis by Dr Phil Kirby. Rachel Johns continues as Associate DPH and Locality Director for York.
3. Understanding local current public health funding and current contracts. The DH is committed to publishing shadow allocations for local authorities before the end of the year. PCTs were required to identify all spend for 2010 – 2011 against public health programmes to the DH by 16th September and to have worked with Local Authority colleagues to ensure transparency. This will enable the DH to identify baseline spend and inform future resource allocation. How funding is subsequently apportioned between NYCC and City of York and whether this done at a national or local level is not yet known. The PCT public health team are working through each of the contracts that will transfer in preparation to sharing with both local authorities with options for future arrangements.
4. Considering workforce issues and preparation for transfer. Different functions of public health are either destined for Local Authorities, NHS Commissioning Board or Public Health England. Public health staff, dependant on their existing roles will be assigned to different organisations. At the moment where some functions will sit is still not clear, meaning that for some

staff it is unknown whether their role will be assigned to Local Authorities or elsewhere. Further HR guidance is expected which will assist planning for future transfer. In the meantime the Public Health Groups in York and North Yorkshire are developing ways to pilot or shadow future arrangements.