

TITLE	Public Health Transition – Progress Report
FOR CONSIDERATION BY	Health Overview and Scrutiny Committee on 22 January 2013.
WARD	None Specific

PUBLIC HEALTH TRANSITION PROGRAMME

Progress report for HOSC on 22 January 2013

Introduction

HOSC reviewed the progress of the Public Health Transition Programme at its September meeting. At that time while the programme was on target overall, there were a couple of areas identified as potentially high risk. These related to progress within the Information Management and Technology workstream and to Finance and Contracting. Both of these issues will be addressed in the appropriate section of this progress report.

The programme is on target in all areas, with a high level of confidence in achieving a safe transfer of the Public Health function from the NHS to local government by April 2013. The Unitary Authorities are sufficiently well prepared to realise the benefits which will come from having public health teams located within the local authority.

Transition Programme

The Berkshire Transition Programme Board established a number of workstreams to lead on the planning and implementation of the transfer. The Board has met monthly in order to oversee and coordinate the programme.

The workstreams covered:

- Governance and structure of the public health function
- Human Resource and Staff Development
- Finance and contracting
- Information Management and Technology
- Communications

The Berkshire led programme has been mirrored in Wokingham through a Public Health Transition Programme Steering Group which has led on implementation within the Council.

The transition programme is now coming to an end. The Transition Programme Board is now working on handing over to a Berkshire Public Health Partnership Board which will take on coordination of public health functions across Berkshire at which time the Transition Programme Board will be closed.

Progress Summary

Governance, Structure and Workforce

- The model agreed was for a Berkshire wide public health function with a team of dedicated public health staff located in each UA. There would be a single Strategic Director of Public Health (SDPH). A core team of public health staff would provide an information service and some specialist public health functions to all of the unitary authorities. The SDPH and core team would be hosted in one UA, this being Bracknell Forest.
- Recruitment to the public health posts has been successfully completed and public health staff have been appointed to the core team and to UA teams. Staff will begin to transfer into their new workplace on a rolling basis commencing January 2013, according to the readiness of the UAs to host them. A welcome and initial induction event has been arranged in January for staff coming to Wokingham.

- The SDPH is in post and has begun to take a lead with her leadership team in implementing the transfer of staff and in ensuring that the public health function is securely established within the local authorities.
- There are some vacancies within most of the public health teams. In Wokingham the post of Consultant in Public Health will be vacant when the present post holder leaves. Arrangements have been made to recruit to this important post and an appointment is expected to be made by the end of January. There will also be a vacancy for a programme officer post but it is proposed to defer recruitment to this post until the public health team is established within the Council and can develop a clearer understanding of skill gaps and opportunities for this post.
- It is worth noting that this has been a difficult time for public health staff as they have faced a lot of uncertainty about the future and what their role would be in local government. Given the nature of the transition programme which has evolved over time it was often not possible to answer the questions which staff were asking until the process of consultation and evaluation of options had run its course. It is a positive reflection of the staff and their commitment that the transition is progressing smoothly and that the integration of public health teams into local authorities is progressing well.

Public Health Resource Transfer

- Government announced the Public Health funding allocations to local authorities on 10th January. The allocation for Wokingham in 2013/14 is £3839.2m rising to £4222.8m in 2014/15. We consider that this will be sufficient to cover Wokingham's public health commitments.
- A further positive indication in the announcement is that funding allocations are moving towards a fairer distribution nationally, which will be of benefit to Wokingham if this continues as the level of public health funding by the outgoing PCT is well below national spend.

Finance and Contracts

- One of the risks reported to the last HOSC was the need to undertake a 'due diligence' review of the calculation of PCT spend on public health, in case there was a discrepancy between our calculation of commitments and the resource allocated to meet the costs. The 'due diligence review' was intended to be an independent cross check against the calculations made by the Finance and Contracting workstream. A 'due diligence' review was commissioned but did not complete as the interim report was below expectation so the contract was terminated. It was decided to hold back on this action until the announcement of resource allocation has been made. If it is lower than required the independent financial review of PCT costs can be commissioned. If the transfer is adequate to meet commitments the action will lapse.
- The Berkshire UAs have agreed a model of commissioning and contract administration in which the commissioning lead is held by the UAs which hold the budget for the public health contract. As most of these contracts are joint and cover more than one UA there will be a formal partnership to manage the contracts through an Aligned Budget arrangement. This will need to be in place for a minimum of one and probably two years until there is sufficiently reliable information about activity and cost to start to disaggregate budget responsibilities and to start to recommission services.
- Contract administration and the technical process of procurement will be centrally located in Bracknell Forest, with this function being carried out on behalf of all of the

UAs subject to a service level agreement, again probably for a period of two years during which time it will be reviewed.

- Any contracts and contract administration which relate to a single UA, of which there are only a couple, will be the responsibility of that UA.

Information Management and Technology

- In the previous progress report to HOSC a risk had been identified that extracting necessary detail from the PCT about public health data and recording systems had stalled. Without this information it was proving impossible to move onto the next stage of planning a safe transfer of the information function.
- The mitigating action was to bring in an additional resource to work with the PCT to break the log jam. This was successful and the implementation programme was able to get back on track and recover time.
- In terms of providing ITC capacity for public health staff coming to the UAs and those located in the core team this is all on track and is in place for when staff relocate.
- The requirements for data transfer and for access to NHS sources of data to enable the core team to continue to provide public health information analysis and intelligence is being progressed according to plan. Detailed joint work is in progress between the IM&T workstream and appropriate NHS information service providers.

Summary

The transition programme is coming to a close. The programme has successfully steered through planning and implementation of the transfer.

Leadership of the programme is in the process of being taken over from a transition process to standard business. The SDPH and public health leadership team and local authority management teams are now taking on the role and responsibility to embed the public health function within local government.

The Transition Programme Board will wind down and hand over responsibility to a Berkshire Public Health Partnership Board with effect from April 2013.