

Committee: Merton Health and Wellbeing Board

Date: 23 April 2013

Agenda item: 11

Wards: All

Subject: Transition of Public Health to the London Borough of Merton

Lead officer: Simon Williams Director of Housing and Communities / Kay Eilbert
Director of Public Health

Lead member: Cllr Linda Kirby

Forward Plan reference number:

Contact officer: Julia Groom Consultant in Public Health / Anne Reeder Public
Health Transition Project Manager

Recommendations:

- A. To note the progress of the transition of Public Health to the London Borough of Merton and delivery of the Transition Plan.
 - B. To note the Project End Report which captures the achievements, challenges and residual activities of the project.
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1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This report updates the Board with the progress made since the last report on 5 February 2013, to implement the Public Health Transition Plan for Merton, which was approved by the Board on 10th April 2012.
- 1.2 This report summarises the position of the transition on April 1st 2013 when Public Health transferred to the London Borough of Merton and identifies the residual activities to be taken forward. The latest draft of the Project End Report is attached as Appendix 1 to this report.

2. DETAILS

Context

Under the Health and Social Care Act 2012, on 1st April 2013 responsibility for public health functions transferred from NHS Primary Care Trusts to Local Authorities. This marks a major change in the leadership and commissioning arrangements for public health and is a significant opportunity to improve public health outcomes and reduce health inequalities for residents of Merton.

This is the final report that focuses on arrangements for the transition of public health functions to Merton. During the transition all existing public health functions continued to be delivered. The focus of future reports will be on the development and delivery of public health functions and programmes in Merton.

Future Operating Model and Public Health Team Structure

- 2.1 The Director of Public Health, Dr Kay Eilbert, started on March 19th.
- 2.2 The Public Health Team moved into the Merton Civic Offices between January and the beginning of March.
- 2.3 There are a number of vacancies in the current Team structure which will be recruited to. Interim staff are currently covering these posts.
- 2.4 The Future Operating Model work stream action plan has been completed with the exception of the production of the Merton Public Health business plan. It was agreed that it was more appropriate for this to be developed by the new DPH and team. This will be informed by the Merton Health and Wellbeing Strategy and Joint Strategic Needs Assessment.
- 2.5 The DPH is reviewing current and future functions and programmes and will report to the Board at a future meeting.

Finance

- 2.6 The Public Health Grant has been analysed and rationalised against the public health commitments. The Public Health Grant is sufficient to meet all the existing commitments.
- 2.7 The results of the analysis have been shared and discussed with the Council's lead commissioning, financial and legal officers.
- 2.8 New budgets have been set up for Merton Public Health and cost centres are being created.

Workforce

- 2.9 The Public Health Team have been welcomed to the London Borough of Merton and are taking part in induction training.
- 2.10 Merton is taking Public Health trainees and is due to be accredited as an official training site.

Governance and Legal Framework

Transfer Scheme and Order

- 2.11 Transfer Scheme Instructions for the Public Health assets and liabilities transferring to the London Borough of Merton were completed in line with national guidance and submitted with the NHS Sutton and Merton Transfer Scheme Instructions.
- 2.12 The Department of Health was unable to return the final Transfer Scheme for some PCTs, including Sutton and Merton, before March 31st so PCT Boards were asked to sign off latest the submitted version of the Transfer Scheme Instructions. The Department of Health is now reverting to a contingency scheme for affected PCTs. These schemes will be updated with the final schedules as soon as they are completed post 31st March, under the post transfer modifications provisions, in accordance with section 302 of the Health and Social Care Act 2012.

Shared Contracts

- 2.13 A number of Public Health contracts that have transferred to the London Borough of Merton are shared with other local authorities and NHS organisations. Section 101 and Section 75 agreements have been drawn up by Legal Services to formalise these arrangements. These contracts will be monitored by a Merton and Sutton Governance Board.

Governance

Public Health will be subject to the same corporate governance requirements as other parts of the Local Authority. The DPH has a range of mandatory and other responsibilities, including responsibility for all of the Council's duties to improve public health, any of the Secretary of State's public health protection or health improvement functions and responsibility for exercising the Council's functions in planning for, and responding to, emergencies that present a risk to public health. The DPH is a statutory Chief Officer of the Council and has delegated authority which will be set out in the Council's Scheme of Delegation.

Commissioning

- 2.14 The new provider for the integrated LiveWell/Stop Smoking service has been confirmed as Hounslow and Richmond NHS Community Services.
- 2.15 Sexual Health HIV services which are commissioned across South London and Pan London have transferred to the London Boroughs of Croydon and Lambeth respectively, and are due to be reviewed during 2013/14.

Information Technology

- 2.16 Connecting Merton Public Health Team to the N3 to allow them to access NHS data has proved challenging. However, this is nearly completed. Work to address the issue of the Public Health Team Patient receiving Patient Identifiable Data (PID) is still being discussed nationally by the Caldicott Review Teams and until this is resolved, no PID will be transferred or accessed by the Public Health Team.

Project Management

- 2.17 The Public Health Transition project was delivered in four stages, diagnose, plan, implement and review. The first three stages have been successfully completed and the final review stage will be completed by the end of April when any outstanding activities will be handed over to the Public Health Team.

3. ALTERNATIVE OPTIONS

- 3.1 The transition of public health functions from the NHS to Local Authorities was not an option under the Health and Social Care Act 2012.

4. CONSULTATION UNDERTAKEN OR PROPOSED

- 4.1 The consultation on the new Public Health team for Merton has been completed. The consultation on the transition of all Sutton and Merton staff to successor organisations was completed in February.

5. TIMETABLE

- 5.1 The Public Health Transition Project ran for approximately a year. The deadline for transferring the staff and functions to the local authority was April 1st 2013. This was achieved.

6. FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

- 6.1 The ring fenced funding for Public Health is made directly to the London Borough of Merton through the Public Health Budget. It will be managed by the Director of Public Health.
- 6.2 Under the Transfer Scheme, Public Health Assets and Liabilities have been transferred to the Council from NHS Sutton and Merton. These include staff, clinical and non clinical contracts and intellectual property. No estates have transferred.

7. LEGAL AND STATUTORY IMPLICATIONS

- 7.1 The Council now have a range of statutory duties for public health, as set out in the Health and Social Care Act 2012.

8. HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

- 8.1 The statutory duty on the Council for public health will include the reduction of health inequalities

9. CRIME AND DISORDER IMPLICATIONS

- 9.1 The Director of Public Health has a responsibility on behalf of the Council to cooperate with the local police, the probation service and the prison service to assess the risks posed by violent or sexual offenders.

10. RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

- 10.1 The transition risks were logged and monitored by the Merton Public Health Steering Group at its monthly meeting. All the risks have now been closed.

11. APPENDICES - THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

**Appendix 1: Merton Public Health Transition Project End Report
(NB: This is to follow)**

12 BACKGROUND PAPERS

None.

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