

27 February 2013		ITEM: 10
COUNCIL		
DIRECTOR OF PUBLIC HEALTH		
Report of: Graham Farrant, Chief Executive		
Wards and communities affected: All	Key Decision: Key decision	
Accountable Director: Jo Olsson, Director of People Services		
This report is Public		
Purpose of Report: To regularise the statutory position following changes.		

EXECUTIVE SUMMARY

At its meeting on 16 January 2013, Cabinet agreed in principle to share a Director of Public Health, Dr Andrea Atherton, with Southend Borough Council. Dr Atherton is currently a joint appointment between Southend Borough Council and South East Essex Primary Care Trust. From 1.4.2013, Dr Atherton will be employed by Southend Borough Council (PCTs are abolished under the Health and Social Care Act 2012 and public health responsibilities transfer principally to Local Government and Public Health England).

Southend Borough Council has agreed to second, on a part time basis, Dr Atherton to Thurrock Council to be Thurrock's Director of Public Health, to lead Thurrock's public health team and to ensure all of Thurrock's public health responsibilities are discharged effectively.

A sharing arrangement mirroring that proposed here has been operating successfully between Thurrock and Southend for six months. The post of Director of Public Health is a Chief Officer post and must be approved by full Council. Dr Atherton will fulfil the role as Director of Public Health for both authorities on a shared basis. The arrangement will commence on 1.4.13 and an appropriate agreement will be signed between the two authorities. The partnership agreement will be reviewed at least annually.

1. RECOMMENDATIONS:

- 1.1 That Dr Andrea Atherton be appointed as Director of Public Health for Thurrock Council from 1 April 2013 under a sharing arrangement with Southend on Sea Borough Council, as approved by the Secretary of State.**

- 1.2 **Council is asked to authorise the Chief Executive or his appointee to make any necessary contractual arrangements with Southend Council to give effect to the arrangement.**

2. INTRODUCTION AND BACKGROUND:

- 2.1 The council assumes new responsibilities for Public Health from 1.4.13. These responsibilities are transferring from the Primary Care Trust which is abolished in the Health and Social Care Act 2012 with their Public Health responsibilities being split between local government and Public Health England. The NHS architecture has been fundamentally re-shaped by the Government and it will take time for all the new arrangements to bed down and be optimally effective. Alongside the specific responsibilities for public health local government has a new, and much welcomed, system leadership responsibility for improving the health and well-being of the population in Thurrock.
- 2.2 We have been enacting our broader leadership responsibilities in shadow form for over twelve months and for Public Health for almost six months.

3. ISSUES, OPTIONS AND ANALYSIS OF OPTIONS:

3.1 Risk Management:

There is a risk that the shared role will impact on the needs of each authority in terms of Public Health leadership capacity. This has not proved to be problematic during the past 6 months but will be monitored and any impact redressed at annual review or sooner if necessary.

4. REASONS FOR RECOMMENDATION:

- 4.1 The council recognises the important role that sharing (services and leadership) can have in enabling the council to discharge its responsibilities efficiently and effectively. The council has successfully piloted, for the last six months, a shared Director of Public Health and is satisfied that any risks are outweighed by the gains to be derived from efficient use of resources and enhanced learning opportunities

5. CONSULTATION:

- 5.1 Staff, partners and political leaders have used the opportunity of the pilot to explore the impact of sharing. Dr Atherton has attended meetings of both political groups as relevant Overview and Scrutiny meetings. The proposal to share a Director of Public Health has been thoroughly explored and has been warmly endorsed by all stakeholders.

6. IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT:

- 6.1 The proposal to share is an effective use of resources in the delivery of the community strategy and Health and Well Being strategy, in particular the objective to improve the health and well being of people in Thurrock.

7. IMPLICATIONS:

7.1 Financial

Implications verified by: **Sean Clark**
 Telephone and email: **01375 652010**
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- 7.1.1 As reported to the Cabinet, the joint position will save on managerial costs during the pilot freeing up funding to provide necessary support.

7.2 Legal

Implications verified by: **David Lawson**
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- 7.2.1 The passing of the Health and Social Care Act 2012 has confirmed that from 1 April 2013 local government will take on responsibility for health improvement and with it many of the services currently delivered by public health teams based in PCTs. The board of the Primary Care Trust retains the statutory responsibility for public health functions and outcomes until April 2013.

- 7.2.2 As part of taking on health improvement duties and the responsibility for public health services, the legislation is clear that councils should appoint a Director of Public Health who will be added to the list of statutory chief officers in the Local Government and Housing Act 1989. Whilst each council by section 30 of the Act has to have a Director of Public Health, the post can be shared with other councils. There will be a need to consult with Public Health England, given the requirement in section 30 for the Secretary of State to be involved in the appointment.

- 7.2.3 The Director of Public Health will be required to prepare an annual report on the health of the people in the area of the Local Authority and the Local Authority will be required to publish that report.

- 7.2.4 The current proposal is for the Council to continue the PCT's transitional practice of shared employment of the Director of Public Health to undertake work for both ourselves and Southend Council after the current PCT post holder is transferred to Southend on 1 April 2013. This could be achieved by an extension of the previously agreed arrangements via Secondment and Service Level Agreements between the 2 authorities.

The Council has the power to enter into such secondment arrangements under section 113 of the Local Government Act 1972 - arrangements should be in place for appropriate sharing of liability, costs, indemnities between the authorities and compliance with the Council's Employment Rules for appointment of Chief Officers when the post of Director of Public Health becomes a local authority Chief Officer post from 1 April 2013. The Governance Guarantee as agreed by Council in November 2012 will ensure both councils are committed to continuing to represent the needs, priorities and ambitions of local people in their communities.

7.3 **Diversity and Equality**

Implications verified by: **Samson DeAlyn**
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7.3.1 Effective use of resources will not in itself impact upon groups with protected characteristics but public health is designed to reduce health inequalities and therefore using the ring-fenced grant wisely will have a positive equalities impact.

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