

**TO: EXECUTIVE**  
**DATE: 12 March 2019**

---

## **PUBLIC HEALTH ARRANGEMENTS**

### **Executive Director: People**

#### **1. PURPOSE OF REPORT**

- 1.1. To seek approval for Bracknell Forest Council to re-join the pan-Berkshire shared arrangements for Public Health.

#### **2. RECOMMENDATIONS**

**That the Executive agrees to:**

- 2.1. **From 1 April 2019 to enter into an agreement with the Public Health Shared Team to share the services of the Strategic Director of Public Health (SDPH) and receive support from the Public Health Shared Team for health intelligence, health protection and strategic leadership for health and wellbeing.**
- 2.2. **Recruit a Consultant in Public Health post to lead the Bracknell Local Public Health Team reporting to the Executive Director: People.**
- 2.3. **Continue to act as host for the Berkshire Shared Public Health Team and host the SDPH with all costs shared with the other five Berkshire Councils.**

#### **3. REASONS FOR RECOMMENDATIONS**

- 3.1. There are a number of statutory duties and mandated functions that Local Authorities are required to deliver to achieve the aim of improving the healthy life expectancy of their residents and reducing inequalities in health between different groups in our community. In 2013, Berkshire developed a unique hub and spoke type model across the six unitary authorities locally.
- 3.2. All upper tier local authorities have a duty to appoint a Director of Public Health. There is some local flexibility in the way in which the post can be designed although in all cases the agreement of Public Health England (PHE) is required. Appointments of DPH's are joint appointments between the host Council and PHE. The proposals in this report have been discussed by the Chief Executive and the Regional Director of PHE and PHE support them and the appointment of the existing Berkshire DPH as the DPH for Bracknell Forest.

- 3.3. In 2013, the Berkshire Shared Public Health Agreement created a SDPH post covering all six unitary authorities supported by a Shared Public Health Team. Each Authority employed a Consultant in Public Health to lead their Authorities work to improve the health of their residents. The Shared Public Health Team staff, including the Director, were hosted by Bracknell Forest Council.
- 3.4. In 2018, the decision was taken for Bracknell Forest to withdraw from the arrangements. The scope of Bracknell Forest's agreement with the Shared Public Health Team was reduced to continuing to use the Shared Team only for access to data and for health protection support<sup>1</sup>. A Bracknell Forest Director of Public Health was appointed with plans to support the post with a part time local Consultant in Public Health.
- 3.5. The Director of Public Health post holder has recently resigned and the post is currently vacant. The context for delivering improved health has also shifted with a supportive policy context and a new local set up. Interim arrangements have been made by the Chief Executive and Executive Director: People for the existing DPH for the other five Berkshire authorities to cover the Bracknell Forest role and this is working well. This presents an opportunity to forge a new partnership for public health across Berkshire with benefits to be gained for Bracknell Forest residents from a more networked approach.

#### **4. ALTERNATIVE OPTIONS CONSIDERED**

- 4.1. For Bracknell to retain its own Director of Public Health.
- 4.2. For the Shared Public Health Team to be hosted by a different authority.

#### **5. SUPPORTING INFORMATION**

- 5.1. The shared arrangements for Public Health have changed since the Council's 2018 decision to appoint its own DPH. There are new contractual arrangements between Councils and the Shared Public Health Team through a Memorandum of Understanding (MoU) and a new SDPH has been appointed.
- 5.2. Performance monitoring arrangements have been put in place. The Berkshire Chief Executives Group holds the SDPH to account and regularly monitors the delivery of the MoU. The SDPH also regularly meets with the relevant portfolio holder of each Council.

---

<sup>1</sup> Health Protection support included assurance of screening and immunisations services, local authority public health roles in the emergency planning, resilience and response to outbreaks and non-infectious environmental hazards, local policy development and emergency planning.

- 5.3. The SDPH is currently employed by the Royal Borough of Windsor and Maidenhead whilst Bracknell Forest continues to host the Shared Public Health Team. Having the SDPH and team employed separately has created barriers for managing performance and costs. Moving the team would be more complex, disruptive and expensive than moving the SDPH role, not only in TUPE costs but also in moving the data access and storage licenses essential for the work of the team. The simplest solution to this may be for the SDPH to become a Bracknell Forest Council employee with the other five Councils paying 5/6ths of the salary. This is, in effect, the arrangement that existed from 2013 to 2017.
- 5.4. The model of providing public health support for health improvement across local authorities in Berkshire is also evolving. Councils and Health & Wellbeing Boards recognise that there are efficiencies to be made in sharing limited technical resources and developing expertise in specialist areas. An important element of the MoU is that one day a week of the local Consultant in Public Health is dedicated to collaborative work in support of the Strategic Director. This could take the form of developing expertise in a thematic area and/or feeding into work supporting the Frimley ICS. Working across Berkshire alongside the counterpart lead in the Berkshire West ICS area, the thematic leadership role is:
- To be a point of contact for enquiries
  - To provide PH expertise to sub-regional theme meetings
  - To coordinate programmes of work eg to CCG or ICS
  - To keep SDPH and colleagues fully informed of progress
  - To proactively horizon scan for upcoming issues
  - To develop specialist knowledge and skill in the theme area
  - To share and disseminate knowledge and practice.
- 5.5. This set up means that local authorities in the shared arrangements have a mechanism to efficiently deliver the statutory duty to support NHS commissioning and was a key component of the original 2013 shared agreement. It enables influence over a wider range of NHS services than would be possible without sharing the task.
- 5.6. However, whilst there are opportunities in collaboration, the differences between the local authorities and their populations across Berkshire also require bespoke interventions. The arrangements are designed to support both collaborative and bespoke interventions with the decision on the type of approach made by the Local Authority with support from their local public health teams.
- 5.7. The context in which public health operates is also changing at pace. There is increasing local interest in potential economies of scale from contracting at a multi borough level. In this respect a major contract for sexual health services has recently been let in partnership with two other Berkshire authorities.

- 5.8. The national policy agenda is also supportive of more integrated and collaborative approaches across the health and care system. The NHS Long Term Plan outlines the further development of Integrated Care Systems (ICS) and stresses the importance of prevention work.
- 5.9. Bracknell Forest Council Public Health has been a key player in forming the prevention strand of the Frimley ICS and demonstrating its potential across the system. The prevention approach is now evolving further. There is a plan to deliver the work in a more networked manner led by the Strategic Director of Public Health for Berkshire in collaboration with the Royal Borough of Windsor & Maidenhead, Slough Borough Council, Surrey and Hampshire County Councils. This will add value to our local work and ensure that local prevention work is backed up in local hospitals and care settings which serve Bracknell Forest residents but are located outside the Borough.

## **6. ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS**

### **Borough Solicitor**

6.1

### **Borough Treasurer**

- 6.2 The detailed financial implications are still to be fully quantified, however the proposal is expected to be cost neutral. All funding for public health is provided through a ringfenced grant.

### **Equalities Impact Assessment**

- 6.3 A formal EIA is not required for this decision as there is no change proposed to local policy. Taking forward the recommendations is likely to have a positive impact on work to tackle health inequalities through enhanced collaboration and wider influence on partners.

### **Strategic Risk Management Issues**

- 6.4 This decision is unlikely to have material impact on strategic risks.

## **7 CONSULTATION**

### Principal Groups Consulted

- 7.1 The proposals within this report have been discussed with the Chief Executive's of the other five Unitary Councils in Berkshire and with the East Berkshire CCG. Each of those organisations supports the proposal. Also consulted were Bracknell & Ascot CCG & Thames Valley Police.

### Method of Consultation

7.2 Letter inviting comments on the proposed policy, plus discussions at Berkshire Chief Executive's and East Berkshire System Leaders Group.

Representations Received

7.3 None received.

Background Papers

None.

Contact for further information

Nikki Edwards, Executive Director: People

Tel: 01344 354182

E-mail address: [Nikki.edwards@bracknell-forest.gov.uk](mailto:Nikki.edwards@bracknell-forest.gov.uk)