

Decision Maker: Executive

Date: 28th November 2012

Decision Type: Non-Urgent Executive Key

Title: PUBLIC HEALTH TRANSITION FUNDING

Contact Officer: Harriet Martyn, Public Health Transition Manager
Tel: 020 8461 7772 E-mail: harriet.martyn@bromley.gov.uk

Chief Officer: Nada Lemic, Director of Public Health

Ward: All Wards

1. Reason for report

Public Health is transferring from the PCT to the Local Authority on 1st April 2013. In order to ensure that this transition is as smooth as possible, a number of workstreams have been set up to support the move, led by both Local Authority and Public Health professionals.

Funding to support the cost of transition has been allocated to PCTs by Department of Health as well as South East London Cluster and Bromley PCT will be responsible for transferring the funds to the Council.

This report sets out the activities on which the funding is proposed to be spent and is a request to Executive to draw down the funds for these purposes.

2. **RECOMMENDATION(S)**

That the Executive:

- **Confirm their agreement for the drawing down of funds to support Public Health Transition.**
- **Agree the process for managing and monitoring the allocation of funding for each workstream.**

Corporate Policy

1. Policy Status: New policy.
 2. BBB Priority: Excellent Council.
-

Financial

1. Cost of proposal: Estimated cost Department of Health has allocated Bromley £95,000 and SEL Cluster PCT has allocated Bromley £115,000 totalling £210,000 to support the cost of Public Health transition.
 2. Ongoing costs: Non-recurring cost. This is a one-off grant from DH and SEL Cluster to support the cost of Public Health transition. Any ongoing costs required by the workstreams will need to be picked up through general support recharges to Public Health from April 2013.
 3. Budget head/performance centre: Public Health
 4. Total current budget for this head: £11 million
 5. Source of funding: One-off funding from Department of Health and South East London Cluster PCT
-

Staff

1. Number of staff (current and additional): 23FTE in Public Health; Approximately 15 officers leading on public health transition workstreams
 2. If from existing staff resources, number of staff hours: Part of approximately 15 officers' time leading on public health transition workstreams (11 LBB officers and 4 Public Health officers)
-

Legal

1. Legal Requirement: Statutory requirement. Transition of Public Health to Local Authorities is required as set out in the Health & Social Care Bill 2012. Funding of transition is non-statutory.
 2. Call-in: Call-in is applicable
-

Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Safe transition of Public Health to Local Authority will ensure risks are mitigated for Council and that service provision is maintained for service users borough-wide.
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No.
2. Summary of Ward Councillors comments: none

3. COMMENTARY

National Legislation

- 3.1 The Health and Social Care Act 2012 sets out the future for how health and social care is provided in England. Within the Act, it states that the responsibility for Public Health (PH) will transfer from Primary Care Trusts (PCT) to Local Authorities (LA) from 1 April 2013, with PCTs ceasing to exist and the remainder of their functions being picked up by locally established GP Clinical Commissioning Groups (CCGs) or by newly established regional and national bodies such as Commissioning Support Units, Public Health England and the National Commissioning Board.

Local structure

- 3.2 The Public Health team in Bromley consists of 37 posts, 3 of which are vacant (23FTEs), led by the Director of Public Health. The team has been co-located with the Council since February 2012.
- 3.3 The Public Health team is responsible for commissioning, delivering and providing strategic advice around a number of services covering health improvement, health protection and improvement in Public Health services. This includes services such as smoking cessation; maternal health; sexual health screening and weight management. The team also leads on health intelligence, for example production of the JSNA and Health & Wellbeing Strategy, jointly with the Council and local partners.

Bromley Public Health Transition

- 3.4 In response to the Health and Social Care Act 2012, Bromley has set up a local Public Health Transition Board to manage and oversee the transition of Public Health. The Board is chaired by the Director of Public Health, Nada Lemic. It has met every two months since February 2012 and will meet monthly from January in preparation for formal transfer.
- 3.5 The transition group has produced a Public Health transition plan and risk register which is reported by exception to Bromley's Health & Wellbeing Board and Corporate Management Team periodically.
- 3.6 Workstreams include: HR; information governance and IT; legal; contracts and commissioning; communications and finance. Each workstream has a Public Health lead as well as a LBB lead and these workstreams meet more regularly to progress activity outside of the transition board.

Funding

- 3.7 To date the workstreams have been funded out of existing budgets from Public Health and the Local Authority.
- 3.8 Local Authorities together with Public Health teams were asked to submit a joint application for funding to support the costs of transition to Department of Health and, separately, to SEL Cluster in June 2012.
- 3.9 Whilst there was no maximum bid that could be made to Department of Health, a limit of £120,000 was made available by Cluster for Bromley to bid for.
- 3.10 In September 2012, it was confirmed that Department of Health were allocating a total of £15m to local authorities across England. This equates to £95,000 for Bromley. At the same time, SEL Cluster confirmed that Bromley had been successful in securing £115,000. This totals £210,000 for Bromley to access to support the costs of public health transition.

- 3.11 The funds will be paid to Bromley PCT and the Finance Director at the PCT is responsible for transferring the funding to LBB. This report serves as a request to Executive to draw down the funds to support the activity of individual workstreams.
- 3.12 Although an estimate of costs has been given for each of the workstreams, it is acknowledged that many of these costs have not yet been spent and that depending on needs and priorities throughout the transition of Public Health, these figures may vary across workstreams.
- 3.13 A significant proportion of transition costs are likely to occur in 2012/13. However, much activity relating to transition will continue post April 2013, for example legal support around contracts. An estimate of how the total costs relating to Public Health transition will be split across 12/13 and 13/14 is set out in a table in section 5.2.

Proposed activity for public health transition workstreams

Finance

- 3.14 It is proposed that an accountant be allocated for 1 year commencing November 2012 to support the transition of Public Health budgets across to the council from the 1st April 2013. It is proposed that an existing finance officer is seconded into this role so that this work can be undertaken immediately, and that the funding available is used to pay for an Acting Up allowance and backfilling of that post.
- 3.15 The cost of accountancy support will be around £33k for one year.

Contracts/Commissioning

- 3.16 The aim of this workstream is to support Public Health strategically to manage the hand over of their contracts from the PCT to LBB through the support of senior officers in the ECS commissioning team. This process is the subject of a separate report to Executive on the agenda.
- 3.17 Specifically, the commissioning lead from LBB will help to establish a process for contract management post-April 2013 that meets LBB contract procedures and financial regulations. The Public Health contracts lead will work with relevant people in the PCT and CCG to establish an accurate contracts register for transfer to the LA. In addition, support with drafting any legal agreements required between PH and the newly formed CCG, in terms of public health commissioning arrangements, will be provided. Ad hoc support will be offered where necessary around drafting reports to Members on the proposed process for contracts and commissioning and any related risks and issues.
- 3.18 The work is likely to total in the region of £30k.

HR

- 3.19 Due to a number of workstreams in the Council currently impacting on the LBB HR team, additional resources are required to deal with employee relations issues, statutory consultation and transactional processes involved with the transfer of public health. Alongside that, there will be a significant amount of background work that will be required to set up Public Health staff on Resourcelink with unique pay frameworks and terms and conditions. Finally, there will be one-off costs to Liberata for the set up of payroll and pensions.

- 3.20 It will necessary to buy in training for LBB staff regarding the NHS terms and conditions and NHS pensions to ensure TUPE obligations are met and a seamless transfer. However, it may be pertinent to ask NHS experts to deliver this training for Public Health staff and a cost analysis will be undertaken before training is bought in.
- 3.19 Public Health managers have been asked to identify their teams' training needs relating to anything specific during the transition that cannot be provided in house, including culture and framework, coaching and mentoring.
- 3.20 Total costs of this workstream have been estimated at up to £38k.

Legal

- 3.21 Costs have not yet been absorbed by the LBB legal team as the position on contract novation and mapping to LA terms and conditions has only recently been clarified. Department of Health guidance has outlined a transfer scheme document which will ensure that contracts transfer to the LA. This will act as the novation of the contracts from the PCT to the Council. The funding for this workstream is likely to be used to support the HR and Contracts and commissioning workstreams.
- 3.22 Though it is still too early to say, specialist legal opinion may be required on some contractual aspects or HR matters in which case existing framework agreements would be used to purchase that advice from Counsel or a private practice solicitor with relevant expertise.
- 3.23 An estimate of the costs of this workstream has been given of £29k.

Communications

- 3.24 The communications workstream is being led by an LBB corporate comms officer in conjunction with relevant officers in LBB, Public Health and the CCG/PCT. Funding for this workstream would be used to deliver the Communications Strategy and Communications Plan that have been agreed by Bromley's Health and Wellbeing Board to support the run-up to public health transition and beyond in order to integrate into the existing Council's corporate communications. This resource would be for the design and production of supporting materials such as e-bulletins, flyers and presentations.
- 3.25 The total cost of this proposal is likely to be around £6k.

Information Governance and IT

- 3.26 New hardware will need to be purchased by LBB to ensure that the Public Health team's PCs are built to the same standard as the Council's. Additional licence costs will also need to be factored in, together with any LBB project management support and potentially external expert support for delivery and implementation of these.
- 3.27 A key issue for this workstream is around data pseudonymisation to enable Public Health staff to safely send and receive Patient Identifiable Data (PID) and other sensitive data from GPs, clinics, hospitals etc. As a means of overcoming this potential obstacle, a data pseudonymisation and encryption solution has already been purchased by the Public Health team at a cost of £5k.
- 3.28 The total cost of this workstream is likely to total approximately £30k.

Other

- 3.29 A project manager has been seconded from LBB to Public Health to work across the PCT and the Council to oversee the transition of Public Health into the Council and manage the workstreams listed above, including any associated risks. The role will also entail support to the Public Health team including drafting reports to Members and other forums, including the Health & Wellbeing Board.
- 3.30 The cost for this additional support over the period of transition equates to approximately £39k.

Recharges

- 3.31 Ongoing work to support Public Health can be picked up within the general recharge placed on Public Health for support services and will become business as usual from April 2013. This will include functions such as running full contract tenders, procurement support, HR and legal support and budget monitoring.

Governance process

- 3.32 The Public Health Transition Board has agreed to maintain oversight of the transition funding and appoint the Public Health Transition Manager as the budget holder with re-charges made to each workstream as necessary.
- 3.33 Each workstream lead will keep track of their expenditure and planned expenses relating to Public Health transition which they will report the Public Health Transition manager on a monthly basis.
- 3.34 An update on transition funding and how it is being spent will be presented to the Health & Wellbeing Board on a quarterly basis.

4. POLICY IMPLICATIONS

- 4.1 This work is in relation to the wider reforms set out in the Health and Social Care Act 2012. From April 2013, the statutory responsibility and accountability for Public Health will pass to the Council and the PCT will cease to exist.

5. FINANCIAL IMPLICATIONS

- 5.1 The Public Health budget for 2012/13 is approximately £11m. Any costs that have been incurred this year relating to the Public Health transition have so far come out of existing budgets in the Council and from Public Health / PCT.
- 5.2 The one-off funding of £210,000 allocated by Department of Health and SEL Cluster PCT will enable the transition of Public Health to be completed in a comprehensive way in order to mitigate any risks to the Council as a 'receiver' organisation and to the public in terms of continuity of service delivery. It is proposed that this money is allocated as follows:-

| WORKSTREAM | 2012/13 spend Estimate £'000 | 2013/14 spend Estimate £'000 | Total £'000 |
|--------------------------------|---|---|------------------------|
| Finance | 12 | 21 | 33 |
| Contracts/ commissioning | 20 | 10 | 30 |
| HR | 23 | 15 | 38 |
| Legal | 9 | 20 | 29 |
| Communications | 2 | 4 | 6 |
| Information Governance & IT | 25 | 10 | 35 |
| Other | 13 | 26 | 39 |
| TOTAL | 104 | 106 | 210 |

6. LEGAL IMPLICATIONS

- 6.1 In order to ensure a safe transition of Public Health into the Local Authority, a risk register is continually updated. This ensures that all risks and liabilities are being tracked. In addition to this, for certain workstreams such as Contracts & Commissioning, assets and liabilities guidance has been produced by the Department of Health to ensure that all issues are picked up.

7. PERSONNEL IMPLICATIONS

- 7.1 All Public Health staff are proposed to transfer to the Local Authority without any changes being made to the structure and therefore no personnel implications are anticipated.
- 7.2 The funding stream to support Public Health transition will provide additional short term resources and capacity to ensure a smooth transition to the Local Authority.

| | |
|---|-------------------------------------|
| Non-Applicable Sections: | [List non-applicable sections here] |
| Background Documents: (Access via Contact Officer) | [Title of document and date] |