

# Shadow Dorset Council

Date of Meeting	12 November 2018
Officer	Sam Crowe, Acting Director of Public Health
<b>Subject of Report</b>	<b>Future of the public health partnership: Update and Key Issues under Local Government Reorganisation</b>
Executive Summary	<p>This report updates the Shadow Executive Committee on key issues to consider as the public health partnership prepares for Local Government Reorganisation. This includes the work of the task and finish group on the model of service, maintaining the contract and agreement in support of the partnership, and ensuring good governance on key decisions pre and post-LGR. Shadow Executive Committee is asked to support extending the public health partnership for a minimum 12 months post-LGR, along with a continuation of the Joint Public Health Board. This recommendation was supported by the September Joint Public Health Board, which functions as the Cabinet for the shared service delivering public health for the three Councils. The report also includes details of a key decision supported by the Board – to agree to procure a new pn-Dorset model of provision for NHS Healthchecks, with an agreed annual budget of £600,000.</p>
Impact Assessment:	<p>Equalities Impact Assessment:</p> <p>No direct impact, due to no proposed change in how public health currently operates.</p> <hr/> <p>Use of Evidence:</p> <p>(Note: Evidence within the body text to support the recommendations and, where relevant, include a description of how the outcomes of public consultations have influenced the recommendations.)</p> <hr/> <p>Budget:</p> <p>(Note: Have any VAT implications been identified?)</p> <hr/> <p>Risk Assessment:</p> <p>Having considered the risks associated with this decision using the LGR approved risk management methodology, the level of risk has been identified as:</p> <p>Current Risk: LOW Residual Risk LOW</p>

	<p>Other Implications:</p> <p>(Note: Please consider if any of the following issues apply: Sustainability; Property and Assets; Voluntary Organisations; Community Safety; Corporate Parenting; physical activity; or Safeguarding Children and Adults.)</p>
Recommendation	<p><b>That the Shadow Authority/Executive Committee:-</b></p> <ol style="list-style-type: none"> <li>1. Supports the Joint Public Health Board’s decision to extend the partnership for a minimum of 12 months after LGR;</li> <li>2. Notes the Board’s decision to approve a procurement for a new model to provide NHS Health Checks with a pan-Dorset budget of £600,000 per annum.</li> </ol>
Reason for Recommendation	To maintain the partnership agreement for public health pre and post-LGR, ensure good governance and clear decision making as LGR progresses, and the continued effective delivery of the statutory legal public health duties of local authorities.
Appendices	<ol style="list-style-type: none"> <li>1. Future of the public health partnership: update and key issues under Local Government Reorganisation (Report to Joint Public Health Board 24 September 2018)</li> <li>2. NHS Health Checks Service Model (Report to Joint Public Health Board 24 September 2018)</li> </ol>
Background Papers	<ol style="list-style-type: none"> <li>1. Future of the public health partnership: Update and Key Issues under Local Government Reorganisation</li> <li>2. NHS Health Checks service model.</li> </ol>
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### Background detail

1. Public Health functions have been delivered on behalf of the three Upper Tier Councils of Bournemouth, Poole and Dorset by a shared service model, known as Public Health Dorset. This partnership has been in place since 2013, and is supported by a legal agreement to pool the ring-fenced Public Health Grant for use in commissioning public health services and interventions. This ensures the Councils’ statutory duties to improve population health and wellbeing and reduce inequalities in health are met fully. In addition, developing a shared service at scale has led to efficiencies and savings, and increased effectiveness of public health services.
2. Governance and assurance over the effective use of the Public Health Grant, and delivery of services, is provided by a Member-led Joint Public Health Board, which functions as a Cabinet for the public health function, shared between the Councils.
3. As Local Government Re-organisation progresses, several pieces of work are underway to ensure that the partnership maintains its effectiveness and viability through and

beyond LGR. This includes a Member-led task and finish group to consider how public health might change to better support the two new Unitary Councils, a finance workstream ensuring the Grant received matches the change in population for the new Council footprints, and ensuring continued effective governance and decision making as the new Councils take shape.

4. The Joint Public Health Board (24 September 2018) agreed to support a recommendation that the Public Health Dorset partnership should continue beyond Vesting day for a minimum of 12 months. In addition, that the Joint Public Health Board should also continue for this period, as the main decision-making body. It also supported a recommendation to take all key decisions for information to both Shadow Executive Committees, particularly where budget implications ran beyond the formation of the new Councils.
5. Shadow Executive Committee members are asked to note the progress made on the work streams to continue the establishment of an effective public health partnership through LGR. In addition, Members are asked to support the Joint Public Health Board's recommendation to continue the partnership for a minimum of 12 months, and to note the key decision around the NHS Health Checks programme.

#### **Consultation**

6. Consultation has taken place via the Members of the Joint Public Health Board, senior officers from each of the three Councils, and with Dorset Clinical Commissioning Group.

#### **Summary of Finance and Resourcing Implications**

7. Continuing the partnership ensures the ring-fenced Public Health Grant (£28.5m) is managed and used effectively to improve health and wellbeing for residents, in accordance with the national mandate to deliver public health functions, and Department of Health criteria for use of the Grant by Councils.

#### **Summary of Legal Implications**

8. Advice from the Monitoring Officers for all 3 Councils states that recommending agreeing to continue the partnership ensures no separate new legal agreement is required for the partnership under LGR, as course of conduct will apply.

#### **Summary of Human Resources Implications**

9. None.

#### **Summary of Environmental Impact**

10. None.

#### **Summary of Equalities and Diversity Impact**

11. No direct impact, due to no proposed change in how public health currently operates.

#### **Summary of Risk Assessment**

12. Having considered the risks associated with this decision using Dorset County Council's approved risk management methodology, the level of risk has been identified as low.

**Background Papers**

13. Future of the public health partnership: Update and Key Issues under Local Government Reorganisation
14. NHS Health Checks service model.