

# Joint Public Health Board Business plan update 16 February 2022

## For Recommendation to Council

**Portfolio Holder:** Cllr P Wharf, Adult Social Care and Health, Dorset Council  
Cllr M Iyengar, Tourism and Active Health, Bournemouth,  
Christchurch and Poole (BCP) Council

**Local Councillor(s):** All

**Executive Director:** Sam Crowe, Director of Public Health

Report Author: Sam Crowe, Sarah Longdon  
Title: Director of Public Health, Head of Service Planning  
Tel: 01305 224400  
Email: [sam.crowe@dorsetcouncil.gov.uk](mailto:sam.crowe@dorsetcouncil.gov.uk);  
[sarah.longdon@dorsetcouncil.gov.uk](mailto:sarah.longdon@dorsetcouncil.gov.uk)

**Report Status:** Public

**Recommendations:** The Joint Public Health Board is asked to support the following recommendations:

- 1) Support giving further time to developing a detailed monitoring plan for the high level business plan agreed with the board in May 2021, recognising that there is still considerable uncertainty about current responsibilities in relation to COVID-19 local outbreak response, and the delay to the Integrated Care System.
- 2) Continue to endorse the organisation of our work into the four categories of:
  - a) COVID-19 outbreak management and response;
  - b) Wider System working (prevention and inequalities – with Integrated Care System);
  - c) Public health programmes;
  - d) Our organisation.

- 3) Support the high level emerging priorities for 22-23 that are starting to emerge as we start to recover from the pandemic and prepare for the ICS going live in July 2022.

**Reason for Recommendation:** Since the last Board in November 2021 the public health team has been going through it's busiest time in response to the Omicron wave of the COVID-19 pandemic. The volume of incidents and outbreaks that have required input from the team has been higher than at any time previously. This is due to a combination of ongoing high infection rates in the community, increased volume of supporting work on vaccination and inequalities, plus picking up more responsibility for local health protection and leading incident management team meetings as UK Health Security Agency has come under more and more pressure.

## 1. **Executive Summary**

The Joint Public Health Board approved a high-level business plan in May 2021. This set out four high level areas of work coming to the team:

- a) COVID-19 outbreak management and response;
- b) Wider System working (prevention and inequalities – with Integrated Care System);
- c) Public health programmes – our services and delivery;
- d) Our organisation including supporting functions.

At the time a commitment was made to produce a regular monitoring report on programmes with the next level of detail. Since that time, COVID-19 and especially the recent omicron wave has impacted our ability to return to routine public health work. In addition – one of our largest areas of business – the prevention and inequalities work in the wider system, has been delayed because of the national timescales for the ICS launch being put back to July 2022.

We are seeking an extension to developing a detailed monitoring plan, recognising that we have not had the capacity to undertake the necessary work.

There are some clear areas where we would expect to be developing new programmes for 22-23, and these are set out in Appendix 1 for the board. These will form a substantial part of the plan for 22-23, subject to agreement following confirmation of the budget, prioritisation and allocation of team capacity.

## 2. **Financial Implications**

No direct financial implications arise from this report.

## 3. **Climate implications**

N/A

**4. Other Implications**

N/A

**5. Risk Assessment**

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: LOW

Residual Risk: LOW

**6. Equalities Impact Assessment**

EQIA Assessments form part of commissioning for all public health services and are published in accordance with Dorset Council guidance.

**7. Appendices**

None.

**8. Background Papers**

High level business plan for 21-22 reported to JPHB in May 2021.

**1 Background**

- 1.1. This short report provides an update on the development of the 22-23 business plan and monitoring report, and some of the programmes and key pieces of work that will need to be delivered next year.
- 1.2. The JPHB received a high-level business plan for 2021-22 at the May meeting which set out the main programmes of work:
  - COVID-19 outbreak management and response;
  - Wider System working (prevention and inequalities – with Integrated Care System);
  - Public health programmes
  - Our organisation.
- 1.3. The report highlighted a number of risks and challenges to developing the plan, not least that the majority of the public health team were still deployed in responding to the pandemic, making it difficult to get back to business as usual activities. We asked for a pause in the process.

- 1.4. Since November, the team has again been extremely busy responding to the COVID-19 pandemic, and the omicron wave in particular. Because the ICS start has also been delayed until July 2022, it has made defining and agreeing the priority work areas difficult.

## **2 Development of the 2022-2023 business plan**

- 2.1. The senior team are actively considering current priorities, and the likely priorities arising from the national system reform, including the development of the local integrated care system. Appendix A sets out some specific examples of activities we know will need to be delivered in 22-23, alongside existing business.
- 2.2. In addition, we have introduced new processes into the team to better understand and manage capacity, including regularly reviewing and ensuring the right level of resource to priority programmes. This has helped identify areas where there are gaps, as well as supporting discussions about future priorities.

## **3 Risks and challenges - update**

- 3.1. The previous risk reported around recruitment and retention of the public health team has been mitigated through ongoing recruitment, and redeployment within the team to cover key roles. The turnover of team members in the past year was 27 per cent – outside of tolerance. This is being managed through regular review, exit interviews and ensuring line managers are supporting and managing wellbeing to prevent burnout as much as possible. There have been no recent resignations – hopefully a sign that the team is stabilising after a turbulent couple of years.
- 3.2. There remains uncertainty about the future requirement for local authority public health teams to continue to provide a health protection response. While this is unclear, we are continuing to provide a day response team to the local system to support outbreak management. A national review is currently ongoing about living with COVID-19 which we hope will provide further clarity shortly about responsibilities. The business plan may have to be reviewed if there are significant ongoing responsibilities coming to Councils.

#### **4 Conclusion and recommendations**

- 4.1. This short paper provides an update on the development of business planning for Public Health Dorset. Board members are asked to note the ongoing challenges with returning to business as usual activities, and the emerging work activities as set out in Appendix A.

Sam Crowe  
Director of Public Health