

Leicester
City Council

WARDS AFFECTED
All Wards

FORWARD TIMETABLE OF CONSULTATION AND MEETINGS:

Cabinet

27th November 2006

The Creation of a Joint Post of Director of Public Health

Report of the Corporate Director of Adult and Housing

1. Purpose of Report

- 1.1 To inform Cabinet of the proposal to appoint a Joint Director of Public Health (DPH) who would work across the City Council and the new Leicester Primary Care Trust City. It identifies the benefits to the public and to the Council and PCT of a joint approach to Public Health.
- 1.2 The report informs Members of the Chief Executives involvement in the recruitment to the post
- 1.3 The report identifies possible areas of programme or operational management which the DPH would lead for members information. Detailed work programmes and performance monitoring will be managed through usual processes.

2. Summary

- 2.1 The recent Government White Paper 'Our Health, Our Care, Our Say' promotes the idea of a joint appointment of DPH to provide a focal point for public health leadership. The White Paper suggests that the DPH would play a key role in working with the Corporate Director of Adult Social Services (DASS) and the Corporate Director of Children's Services (DCS) to map need and develop strategies to promote the health and well being of communities.
- 2.2 More recently, as new PCTs have been established, the Department of Health along with Government Offices and Strategic Health Authorities have issued guidance on the creation of joint Directors.
- 2.3 The local government white paper also refers to this joint role.

3. Recommendations

- 3.1 That Cabinet welcomes the opportunity that a Joint DPH brings to the City and notes proposals to appoint a joint post.

3.2 That Public Health is incorporated into the portfolio of one of the Cabinet Members in order to ensure co-ordinated action across the city and across all portfolios.

4. FINANCIAL AND LEGAL IMPLICATIONS

4.1 Financial Implications

4.1.1 The PCT will be the employer and fund the salary of the Director of Public Health. There may be a very small level of accommodation costs to the Council. The Council will benefit from having another very senior manager and expert as part of the Chief Executive's Management Team and this should balance any costs for office space.

4.1.2 As the programme develops any additional priorities identified will be dealt with in the normal way within the Council and PCT's financial processes.
(Colin Sharpe, Head of Finance – ext 8800)

4.2 Legal Implications

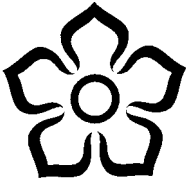
4.2.1 The absorption of this joint post into the Council's structures will require a review of the Council's Constitution to make any changes as a consequence of the new arrangement. The agreement made with the PCT mentioned in the Report will have to cover a range of HR issues including performance management, health and safety, insurance cover, powers and duties in respect of other officers and how the arrangement can be brought to an end (Guy Goodman, Head of Community Services Law - ext 7054)

5. Report Author/Officer to contact:

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DECISION STATUS

Key Decision	Yes
Reason	Significant effect on one or more wards
Appeared in Forward Plan	Yes
Executive or Council Decision	Executive (Cabinet)



Leicester
City Council

WARDS AFFECTED
All Wards

FORWARD TIMETABLE OF CONSULTATION AND MEETINGS:
Cabinet

30th October 2006

The Creation of a Joint Post of Director of Public Health

SUPPORTING INFORMATION

1. Background

- 1.1 Currently the PCT's Director of Public Health sits as an 'associate member' of the Corporate Directors Board. He has contributed to work across the Council and his team has made good links with all Divisions. The previous Corporate Director of Social Care and Health represented the Council on his interview panel.
- 1.2 Recent Department of Health guidance provides a blueprint for moving towards a joint post , including a proposed job description.
- 1.3 The Government Office of the East Midlands (GOEM) has set a process in motion to appoint to such posts.
- 1.4 The proposed post would be an NHS employee with salary and associated costs being met by the NHS. They would be accountable jointly to the Chief Executives of the PCT and of the City Council and would be a member of the Council's Corporate Board and an Executive Member of the PCT Board.
- 1.5 The Department of Health has set out a process for post holders to be recruited as part of the current round of appointments to PCT Director Posts.
- 1.6 This is an unusual position as the proposed joint DPH is not a City Council employee. Therefore, this post is not subject to the processes for appointing Corporate Directors. However he/she will contribute to and implement decisions made at the Corporate Directors Board. For this reason Cabinet are being informed of this post.
- 1.7 In addition, in order to emphasise the importance the Council attaches to both public health, and to recruitment of high calibre senior managers, the Chief Executive will take part in the interviews, alongside the Chief Executive of the PCT.

2. Scope of the Role

- 2.1 The public health challenges in Leicester are considerable. In terms of deprivation and poor health the City is in the worst 20% of areas in the Country. The City had been designated as a 'Spearhead Area', requiring the PCT and Council to collaborate to improve the health of the population. Life expectancy in the city is lower than national averages and there are also significant differences in life expectancy and long-term illness between different communities in the City.
- 2.2 Closing this health gap is one of the key floor targets for the City. The Leicester Partnership recognises that this requires action on a broad front from treating illness, improving lifestyles (issues such as smoking, diet, exercise, alcohol, sexual health etc) and tackling wider determinants of health such as housing, employment, educational attainment and environmental factors.
- 2.3 The PCT has a statutory responsibility to improve health and address health equalities and the Council has a duty to promote Social Inclusion and well-being. Clearly the best outcomes will be achieved if energy and resources are integrated to make the biggest impact.
- 2.4 The proposed joint DPH would be a member of the top management teams of the PCT and the Council. The post-holder would be accountable to the Chief Executives of both organisations and would undertake an agreed programme of work.
- 2.5 The joint DPH would manage specialist PCT staff and lead a wider team of staff from across Council departments whose role has an impact on health. It is proposed to create this 'matrix arrangement' so that as many staff and functions as possible can be linked into the health agenda and action can be taken across the whole range of council functions. In other words we will add value by making health improvement everyone's business.
- 2.6 The Council has had the opportunity to influence the job description and person specification. They cover the whole spectrum of 'traditional' public health skills. However as both the Council and the PCT work in an environment of tight financial management and increasingly challenging performance frameworks and increasing demand, both Chief Executives feel strongly that the post holder needs to demonstrate a strong track record and ability in linking health and financial outcomes and to show the ability to lead and manage complex areas of service across agencies.

3. What will be delivered?

- 3.1 Through membership of the Corporate Directors Board the DPH will influence strategies and performance management across all Directorates. In addition, the two Chief Executives will agree a priority programme of work which reflects the needs of the City and the priorities of the Leicester Partnership.

In addition, the DPH will work as an Executive Team member (PCT) and Corporate Director (City Council) and as such will take collective responsibility for the overall

financial, clinical and professional governance of both organizations and will work with both teams to set priorities and manage performance.

4. FINANCIAL, LEGAL AND OTHER IMPLICATIONS

4.1 Financial Implications

4.1.1 The PCT will be the employer and fund the salary of the Director of Public Health. At this stage there are no additional costs, except for office accommodation, to the Council. The Council will benefit from having another very senior manager and expert as part of the Chief Executive's Management Team.

4.1.2 As the programme develops any additional priorities identified will be dealt with in the normal way within the Council and PCT's financial processes.

4.2 Legal Implications

4.2.1 The absorption of this joint post into the Council's structures will require a review of the Council's Constitution to make any changes as a consequence of the new arrangement. The agreement made with the PCT mentioned in the Report will have to cover a range of HR issues including performance management, health and safety, insurance cover, powers and duties in respect of other officers and how the arrangement can be brought to an end (Guy Goodman, Head of Community Services Law - ext 7054)

5. Report Author

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