

## HAMPSHIRE COUNTY COUNCIL

### REPORT

<b>Decision Maker</b>	Cabinet
<b>Date:</b>	7 December 2021
<b>Title:</b>	Review of the Public Health Partnership Function between Isle of Wight Council and Hampshire County Council.
<b>Report From:</b>	Director of Public Health

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#### **Purpose of this Report**

1. To provide an update on the Public Health Partnership with Isle of Wight Council, specifically on progress against the remaining recommendations from the 2018 review which had not been met at the time of the formal partnership.

#### **Recommendations**

Cabinet is asked to:

2. Support the continuation of the Partnership which will support the further improvement of public health outcomes for Isle of Wight residents which is at no detriment to Hampshire, therefore it is recommended that the Partnership continues with a review point in 3 years in line with the agreement.

#### **Executive Summary**

3. In September 2019 a Public Health partnership between Hampshire County Council (HCC) and Isle of Wight Council (IWC) was agreed to run for 5 years. This followed a period of 18 months of review and working together between both Councils. This was to be on the principle of no detriment to Hampshire.
4. A report that set out the key findings from an analysis of the Public Health function was completed in October 2019. Prior to the formal partnership 15 recommendations were made under the following themes and at the time of the formal partnership the majority of those critical to the IWC Public Health Function had been met. Progress against the remaining recommendations is reviewed here.
  - Public Health Grant and budget
  - Team Capacity and Capability
  - Public Health Intelligence

- Service Delivery

5. The Public Health senior leadership and IWC Corporate Management team worked together to address the key issues with further developments taking place after the formal partnership started. This relationship has continued, and its success is demonstrated by the strong partnership working between the Director of Public Health, Management Team with members of CMT, Cabinet and partners on the IOW highlighted during the pandemic.
6. As a result of the partnership, IWC is now delivering its mandated public health functions and has safe, high quality commissioned public health services in place for residents.
7. Although some public health outcomes still require improvement, the work undertaken through the Public Health Partnership to date has laid firm foundations that will enable and facilitate further work to enable this to happen.
8. Through the partnership the public health team has strengthened relationships with the ICS.
9. The partnership has brought benefits to Hampshire and the wider system due to more effective joint working with other agencies.

### **Public Health Grant and Budget**

10. The Public Health grant is allocated to Local Authorities (LA) to use to discharge their duty to improve and protect the health of the population and to reduce health inequalities. A Unitary Authority undertakes many activities and has wide reaching opportunities to shape their services in a way that will support delivery of these objectives which is why strong leadership for public health is key.
11. While it is recognised and accepted that in order to deliver this duty, the Public Health grant can be used for activity across the Council, Public Health England (PHE) formerly, and now DHSC, have a role in assuring that the Public Health local grant is used appropriately, are clear that the first call on the grant must be to deliver the mandated and prescribed Public Health services and services with prime function of public health.
12. The public health ringfenced grant for the IOW has been reviewed and most recently has been aligned to the key areas of public health with an increased budget for smoking cessation, weight management and public mental health. In 2020/21 a longer-term financial plan was developed putting the budget on a

stable foundation this includes resolving long term budget disputes and Agenda for Change Pay uplifts.

13. The DPH and the joint Management Team now have clear oversight of all commissioned public health services and robust processes are in place to support commissioning. The partnership has enabled mobilisation of a new Specialist Sexual and Reproductive Health service, procurement and mobilisation of Healthy Lifestyles Isle of Wight and mobilisation of the 0-19 Public Health Nursing Service ensuring that safe high quality mandated public health services which align with the conditions of the Public Health grant are now in place.
14. A robust Service Level Agreement to monitor public health outcomes against use of the Public Health Grant in other areas of the Council has now also been developed and implemented.

### **Contextual Information**

15. One of the key concerns on development of the partnership was the IOW Council not fulfilling all the statutory and mandatory public health functions. Of particular concern are the requirements to provide public health advice to the NHS and planning for, and responding to, emergencies that present a risk to public health.
16. During the COVID-19 Pandemic we have seen the benefit of working together and the ability of the IOW Council to provide public health leadership in a public health emergency. The strength of the joint senior team was essential to manage the complexity of the response to this global pandemic. Whilst the pandemic stretched the senior team the joint working was of benefit to both Councils through increased efficiencies and more focused roles e.g., testing and tracing. During the pandemic the Public Health team led on the rollout of the first COVID-19 App on the Isle of Wight bringing learning to both Councils. The Partnership has provided the senior public health leadership to IWC Public Health team members to enable them to contribute productively and safely to the pandemic response including ensuring public health services were able to operate safely, providing robust epidemiological information to partners, supporting the social care and education response to prevention and management of outbreaks, and contributing to impactful communication campaigns.
17. Continued improvement of public health outcomes is very much dependent upon a strong public health function. Since the development of the Public Health Strategy, NHS partners other and partner agencies working on the Isle of Wight

have begun to demonstrate that they are working together on the key outcomes to address the priorities.

18. Further developments in the use of digital technology fast-tracked during the Covid-19 pandemic have facilitated improved remote working across both Councils, improving efficiency by reducing travel. There is however still a need for DPH / Associate DPH to participate in certain meetings face to face and to maintain visibility across IWC in order to maintain relationships and to build on new ones especially relevant in light of the new IWC administration.
19. During the pandemic it became apparent an embedded senior role in the senior management team with more focus on the IOW as a locality with some leadership responsibilities across both authorities would be of benefit to the partnership.

### **Team Capacity and Capability**

20. The partnership has delivered effective senior leadership as set out above which enables the Isle of Wight Council to fulfil its public health duties. In addition, it has benefited positively both councils with the increased capacity of senior staff who are able to focus on key areas of work and embed strongly in the ICS. This has met the technical and leadership capability within the public health function which wasn't present at all levels. This ensured the IWC Public Health team has permanent professionally qualified public health consultant resource.
21. The development of the IOW public health Strategy has enabled clear team and personal objectives to be developed and has resulted in good progress across a number of domains of public health including development of Early Help, development and publication of the Physical Activity strategy with Energise Me and a resumed focus on partnership working to take forward other important work including smoking cessation in pregnancy, Partnership Education Attainment and Children's Health (PEACH) programme and work to support people challenged by co-occurring mental health conditions and substance misuse. There has been a renewed focus on Mental Health which will be increasingly important to maintain in the recovery from Covid-19.
22. The Island Public Health team has stabilised since the staff restructure which took place in August 2019 with morale improving. The team restructure reduced the number of staff based on the island and enabled some joint Hampshire and IOW posts to be established in areas where this adds value to both teams. There is still a need to further develop the team to fully realise the appropriate skill set, this is ongoing and will be contributed to through the involvement of Isle of Wight staff members in joint workforce development programme aligned to the refresh

of the Isle of Wight Public Health Strategy and development of a new Hampshire Public Health strategy in early 2022.

23. Due to the challenge of recruitment to specialist posts on the IOW some of the staff have been based in Hampshire for example specialist health protection practitioners and consultants in public health. During the COVID-19 pandemic, remote working has facilitated the way that staff based in different geographical locations work together effectively.
24. Further work has been undertaken to upskill the team to ensure robust technical and public health leadership skills to ensure delivery of the public health agenda. This includes additional study and continuing professional development in line with skills expected from public health professionals.
25. Risk management and business processes have improved with an effective public health risk register now in place and monitored by the Joint Management Team. The Isle of Wight Public Health Strategy was published in 2020 and progress against objectives is monitored through monthly team meetings and reported to Public Health SMT on a quarterly basis.
26. Through the partnership investment from Health Education England, we have been able to increase the hours of the Workforce Development manager to cover both Hampshire and Isle of Wight. This is enabling the team to be supported to develop and progress professionally in line with public health need and IWC corporate needs.

### **Public Health Intelligence**

27. Many of the challenges regarding the IOW public health intelligence function have been resolved including skills development. Matrix working with Hampshire analysts has improved the productivity of the Public Health Intelligence function on the Island. The two Isle of Wight Council Public Health Intelligence analysts continue to need close supervision and guidance with their work.
28. The IOW Council Head of Organisational Intelligence was very engaged in developing a new approach and the team is now working jointly with the Hampshire analyst which is resulting in a strong and agile team under the joint Head of Public Health Intelligence whilst maintaining the Island resource. This arrangement provides a strong and resilient partnership for the benefit of the public health's and both Councils and our working with the ICS and partners including Police and Fire.
29. By working together within the partnership, access to insight work has supported the IOW public health team. Increased use of targeted social media to reach specific communities on the Island presents a further opportunity to deliver impactful public health behaviour change campaigns.

- 30.** At the outset of the Partnership the importance of a strong administration function to the smooth running of a continued partnership was recognised. The alignment of business processes are in place for efficiency and effectiveness. As with other areas of the team, improved access to digital technology for both Councils during the Covid-19 pandemic has also benefited Public Health administration staff within both Councils.
- 31.** Gaps or insufficient capacity within support services were also recognised as a challenge to the success of the Partnership. These have largely been overcome, for example, there is now senior finance professional support in place from IWC. Good progress has been made with the relationship with the IWC Communications team with a strengthened approach from the public health team led by a public health communication expert and the development of a communications plan.

### **Services**

- 32.** Since the inception of the partnership there has been a focus on ensuring safe, high quality public health services. These are complex and challenging areas with clinical risk and the need for strong partnerships with other services. All mandated services are now in place as described below.

### **System benefits**

- 33.** The Partnership between Hampshire County Council and Isle of Wight Council has brought a wider benefit to Hampshire and the system. With the majority of the Pan Hampshire area being led by one Director of Public Health and his team has meant an increased influence with partners and for issues of importance to Hampshire and Isle of Wight.
- 34.** When considering the work required with NHS England and UKHSA (successor body to PHE) and the ICS with regard to public health matters including Health Protection, Screening and Immunisations and population health management there have been considerable benefits to leading this at scale for the benefit of the population in line with the Council's responsibilities.
- 35.** When commissioning public health services as a partnership we have been able to align services and bring cost efficiencies for areas with the same service provider. This has improved outcomes for the whole population.

### **Conclusion**

- 36.** The time and commitment needed to turnaround the public health function on the Isle of Wight cannot be underestimated. However, we are now in a position of stabilisation and continuous improvement

37. The public health function on the Isle of Wight is in a markedly stronger position in 2021 than in October 2018 and has continued to improve following the inception of the formal Public Health Partnership. Public Health mandated functions are being effectively delivered through a range of commissioned services with robust monitoring of activity, outcomes and risks. The public health budget is being used appropriately and the team have good support from IWC finance colleagues

38. The public health team has stabilised and whilst morale has improved there remains a need to support staff to develop and plans are in place to enable this through the work of the Partnership and Health Education England.

### **Consultation and Equalities**

39. The decision relates to a programme and is strategic/administrative in nature; therefore, there is no anticipated negative impact on inequalities.

### **Climate Change Impact Assessment**

40. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience impacts of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.

### **Climate Change Adaptation**

41. The decision relates to a programme and is strategic/administrative in nature.

### **Carbon Mitigation**

42. The decision relates to a programme and is strategic/administrative in nature.

**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	yes
<b>People in Hampshire live safe, healthy and independent lives:</b>	yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	yes
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	yes

*NB: If the 'Other significant links' section below is not applicable, please delete it.*

**Other Significant Links**

<b>Links to previous Member decisions:</b>	
<u>Title</u>	<u>Date</u>
<b>Direct links to specific legislation or Government Directives</b>	
<u>Title</u>	<u>Date</u>

## **EQUALITIES IMPACT ASSESSMENT:**

### **1. Equality Duty**

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

### **2. Equalities Impact Assessment:**

The decision relates to a programme and is strategic/administrative in nature; therefore, there is no anticipated negative impact on inequalities.