ROTHERHAM BOROUGH COUNCIL - REPORT TO MEMBERS

1.	Meeting:	Cabinet
2.	Date:	9 March 2011
3.	Title:	Healthy Lives, Healthy People: Public Health White Paper Consultation
4.	Directorate:	Chief Executive's

5. Summary

This report outlines the key proposals and consultation questions which the Government are seeking views on in relation to the Public Health white paper.

The deadline for responses to the main white paper and two supporting documents which outline proposals for commissioning, funding and the new outcomes framework is 31 March 2011.

Following consultation with Elected Members and Directorates a draft response has been put together which Cabinet are being asked to consider and approve before the final response is submitted.

6. Recommendations

That Cabinet:

- Discuss and consider the questions and draft response
- Approve the response to be submitted

7. Proposals and details

The White Paper outlines some significant changes to the way public health is delivered and gives a brief overview of some of the Government's priorities for public health. The proposals include:-

- Establishing a new body Public Health England within the Department of Health to protect and improve the public's health.
- Responsibility for public health will transfer to local councils from 2013. Directors of Public Health will be jointly appointed by the local authority and
- Public Health England and work within the local authority.
- Establishing Health and Wellbeing Boards to decide upon local public health priorities.
- Using a 'ladder of interventions' to determine what action needs to be taken to address different public health needs. Some things will be tackled by central Government through Public Health England (such as serious threats and emergencies); others will need a combination of central Government and local action. In other situations enabling people to make healthier choices, including by providing information, promoting healthier behaviour and strengthening selfesteem and confidence will be key.
- Funding for public health work will be ring-fenced and areas with the poorest health will receive extra funding.
- Commissioning of public health activity will be the responsibility of Public Health England, through directly commissioning certain services directly (eg national purchasing of vaccines or national communications campaigns), asking the NHS Commissioning Board to commission public health services (eg national screening programmes), and the provision of the ring-fenced budgets for public health to local authorities. GP consortia may also be able to commission on behalf of Public Health England.
- GPs, community pharmacies and dentists will be expected to play a bigger role in preventing ill-health.
- A new outcomes framework will be produced against which progress on key public health issues will be measured. Local authorities will receive additional public health funding when progress on these outcomes is achieved.

7.1 Responding to the Consultation

The Government is seeking views on the proposals within the main White Paper and two supporting documents; Commissioning and Funding of Public Health Services and the new Outcomes Framework.

The deadline for responding to the consultation is 31 March 2011.

Cabinet is invited to consider and comment on the draft response following consultation across RMBC Directorates and with Elected Members through Scrutiny Panel and PSOC.

The draft response is attached as appendix A.

7.1.1 White Paper Consultation Questions

There are a number of questions within the main white paper, outlined below. The main points and issues raised in relation to these questions have been captured in the main text in appendix A.

Questions within main white paper:

Question a: Are there additional ways in which we can ensure that GPs and GP practices will continue to play a key role in areas for which Public Health England will take responsibility?

Question b: What are the best opportunities to develop and enhance the availability, accessibility and utility of public health information and intelligence?

Question c: How can Public Health England address current gaps such as using the insights of behavioural science, tackling wider determinants of health, achieving cost effectiveness and tackling inequalities?

Question d: What can wider partners nationally and locally contribute to improving the use of evidence in public health?

Question e: We would welcome views on Dr Gabriel Scally's report. If we were to pursue voluntary registration, which organisation would be best suited to provide a system of voluntary regulation for public health specialists?

The subsequent tables in appendix A set out the supporting document questions and their individual responses.

8. Finance

There are no direct financial implications to this report.

9 Risks and Uncertainties

Further clarity on the proposals will be provided following the consultation process, which ends 31 March 2011.

10 Policy and Performance Agenda Implications

Public health will transfer to local authority responsibility as of 2013, when the Director of Public Health will be employed by the council. RMBC will need to consider the future shape of the public health workforce and function during this transition period.

A joint Health and Wellbeing Strategy is currently being developed, which will form the over-arching strategy for the Health and Wellbeing Board once established. Work will continue to ensure this document is agreed and owned by all relevant partners.

Further consultation is taking place on the proposed public health outcomes framework which will inform performance criteria for this agenda. See appendix A for questions

11 Background Papers and Consultation

Healthy Lives, Healthy People: strategy for public health in England (2010)

Healthy Lives, Healthy People: Transparency in outcomes consultation document

Healthy Lives, Healthy People: consultation on the funding and commissioning routes for public health

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