

10 December 2014		ITEM: 6
General Services Committee		
Arrangements for the Recruitment of the Director of Public Health		
Wards and communities affected: None	Key Decision: Not applicable	
Report of: Roger Harris – Director of Adults, Health and Commissioning		
Accountable Head of Service: Not applicable		
Accountable Director: Roger Harris – Director of Adults, Health and Commissioning		
This report is public		

Executive Summary

This submission is to request that the Committee considers and agrees to the proposed arrangements for the recruitment to the post of Director of Public Health (DPH).

1. Recommendation(s)

- 1.1 To confirm the appointment process as set out in this report.**
- 1.2 To agree to the appointment of Penna to undertake an external assessment of shortlisted candidates.**
- 1.3 To agree that the General Services Committee be the appointment panel for the post of Director of Public Health (alongside any requirements of the Faculty of Public Health and Public Health England) with the final recommended candidate being endorsed at full Council on 25 February 2015.**

2. Introduction and Background

- 2.1 Public Health responsibilities were transferred over to local authorities from the NHS in April 2013. This included the establishment of a ring-fenced Public Health Grant (PHG), certain mandated duties and the responsibility to appoint a Director of Public Health.
- 2.2 The post of DPH for Thurrock was agreed by the Council in February 2013. At the point the responsibility was transferred over to the Council in April 2013

there was not a DPH in post within our local Primary Care Trust, so unlike other areas there were no candidates to TUPE over. As a result Thurrock Council entered into a shared arrangement with Southend on Sea and it was agreed that Dr. Andrea Atherton would be a shared post between Thurrock and Southend.

- 2.3 This arrangement was agreed for the year 2013/14 and renewed for a further year 2014/15. Alongside Southend Council we have reviewed the current situation. We have benefited from having an experienced DPH to oversee the transition of the new responsibilities from the NHS to the Council. However, we now feel that the time is right for Thurrock to appoint its own full-time DPH when the current arrangements end on 31 March next year.

3. Issues, Options and Analysis of Options

- 3.1 The Health and Social Care Act 2012 required local authorities to appoint a Director of Public Health to have responsibility for their new public health functions.

The Act expects that the Director of Public Health will:

- Be the champion for health within the local authority
 - Be responsible for all the new public health functions of local authorities (which cover all three domains of public health: health protection, health improvement and health care public health)
 - Produce an annual report on the health of the population
 - Be a statutory member of the Health & Wellbeing Board
 - Be a statutory chief officer, as set out in the Local Government and Housing Act 1989, as amended.
- 3.2 As stated above when the responsibilities were passed over to Thurrock Council there was no permanent DPH in post in the previous PCT and so no candidates who could be TUPEd over. As a result the Council considered sharing options for the post and reached an agreement with Southend to share the post for an initial 12 month period (which could be renewed if agreed by both parties).
- 3.3 The reason this arrangement was agreed was first of all to share the cost but also at the time there were numerous vacant DPH posts and it was felt our ability to recruit would be very difficult. Instead we benefitted from having an experienced DPH in Dr Atherton to oversee the transfer of responsibilities and ensure that the new duties were fully embedded within the Council.
- 3.4 The arrangements have worked well and we can point to a number of successes over the first 2 years of taking on these new responsibilities in particular all Directorates of the Council have been working alongside the Public Health team to re-assess their own work to see how it can promote a wider approach to health and well-being.

- 3.5 However, it is accepted that sharing with Southend has meant some areas have not had the depth of coverage that they should be receiving. In particular the “core offer” to the NHS has not had the level of support it should have – this problem has been compounded by the fact that we have not had a full-time, permanent consultant in post for most of the period since the transfer took place. As a result it is felt that the time is now right, when the current arrangement expires - 31.3.15 - for Thurrock to appoint its own full-time DPH.
- 3.6 We have considered whether there are any other viable sharing arrangements – Essex County Council, a London Borough: Havering or Barking & Dagenham, the Thurrock Clinical Commissioning Group or Public Health England. None of these appear to be viable options. These local authorities are either part of a separate health and social care system i.e. in London or there is no prospect of any joint funding i.e. from the CCG or PHE. As a result the most preferred option for Thurrock is to appoint its own full-time DPH. We will continue to be open to any shared arrangements if a viable option emerges which allows Thurrock to deliver its core PH duties.
- 3.7 It is proposed that the General Services Committee undertake the appointment process, as set out below, in accordance with the approved HR and other policies of the Council.
- To agree any arrangements for the appointment (today)
 - To undertake the final interview process supported by the Director of Adults, Health and Commissioning (who is the line manager for this post) and the Faculty of Public Health and Public Health England (who are required to be full partners to the recruitment process)
 - To recommend to full Council the appointment of the Director of Public Health in accordance with Council policies and procedures (see Employment Procedure Rules in Chapter 10 of the Constitution)
- 3.8 The funding of the DPH post is met by the ring-fenced Public Health Grant (PHG) and as such there is no call on the Council’s General Fund. The post has been recently job evaluated (November 2014) and graded at Director Grade 1 : £ 93,500 - £ 108,000. We have set aside £ 85k in our current PHG for the shared arrangements. So there will be an extra call on the PHG in 2015/16. We will not be appointing to the vacant consultant position until the Director post has been confirmed and so the saving from that post (or a consultant post at reduced hours) will cover the extra costs that we need for the Director post.
- 3.9 Timetable

The outline timetable for the appointments to both posts is set out in the table below. Shortlisting and interview dates will need to be confirmed once the final panel has been confirmed.

Activity	Responsibility	Date
External Advert	HR	11 December 2014
Closing Date	HR	Monday 5 January 2015
External Assessments	Penna	TBC
Shortlisting	HR	TBC
Final Interview	GSC alongside Faculty of Public Health and Public Health England	TBC
Full Council confirms appointment	Full Council	25 February 2015

3.10 The Officer Employment Rules contained within Chapter 10 of the Council's Constitution provide for the following:

- 1.1 *The final decision on the appointment or dismissal of the Head of Paid Service / Chief Executive or on the appointment of any Statutory Chief Officers/Directors shall be by resolution of Council on the recommendation of the General Services Committee insofar as this does not fall within the remit of the Joint Appointments Committee.*
- 1.2 *The appointment and dismissal of, and taking disciplinary action against, any Chief Officer/Director shall, except where required to be by resolution of Council under Rule 1.1 above, be conducted by the General Services Committee insofar as this does not fall within the remit of the Joint Appointments Committee.*
- 1.3 *The General Services Committee may arrange for the discharge of any of its functions under Rule 1.2 above by a Sub-Committee or (with the exception of making a recommendation to Council as set out in Rule 1.1 above or the final decision on the appointment or dismissal of a Chief Officer/Director) an Officer.*
- 1.4 *Any Committee or Sub-Committee discharging functions under Rules 1.1 to 1.3 above must include at least one Member of the Cabinet.*
- 1.5 *The function of appointment and dismissal of, and taking disciplinary action against, any Officer of the Authority other than those listed at Rule 1.6 below shall be discharged, on behalf of the Authority, by the Chief Executive or by an Officer nominated by him/her.*
- 1.6 *Rule 1.5 above shall not apply to the appointment or dismissal of, or disciplinary action against:*

(a) the Head of the Paid Service / Chief Executive

(b) a Statutory Chief Officer/Director

(c) a non-statutory Chief Officer/Director

(d) a political assistant.

The terms of reference of the General Services Committee provide for the committee to appoint or dismiss or make arrangements for the appointment or dismissal of Directors.

4. Reasons for Recommendation

4.1 The General Services Committee is recommended to consider and agree to the recommendations contained within this report to enable an efficient process to be conducted, in accordance with the provisions of the Constitution, for the recruitment of the Director of Public Health.

5. Consultation (including Overview and Scrutiny, if applicable)

5.1 The recruitment process will need to meet the requirements of the Faculty of Public Health and Public Health England.

6. Impact on corporate policies, priorities, performance and community impact

6.1 The permanent recruitment to the post of Director of Public Health will better enable the Council to deliver the following corporate priorities:

- Create a great place for learning and opportunity
- Improve health and well-being

7. Implications

7.1 Financial

Implications verified by: **Sean Clark**
Head of Corporate Finance

As stated in the report, there will be an increased cost to Thurrock Council for a full time post but this will be met from the ring fenced Public Health Grant. As such, there is no further pressure on the general fund.

7.2 Legal

Implications verified by: **Fiona Taylor**
Head of Legal & Democratic Services

A Director of Public Health is a statutory Chief Officer so the appointment would be at Full Council as the final decision maker upon a recommendation of the General Services Committee and compliance with Rule 3.1 of the Officer Employment Procedure Rules designating a post for a statutory purpose.

7.3 Diversity and Equality

Implications verified by: Roger Harris
Director of Adults, Health and Commissioning

The post of Director of Public Health is a statutory post. The functions of the Public Health team are set down in various guidance and circulars issued by the Department of Health and Public Health England. This includes a range of mandated duties aimed at improving the health and well-being of the local community. The DPH is a statutory member of the HWB Board and produces an Annual Health Report to the full Council on the state of health of the Borough. This specifically picks up those areas of inequality and diversity that are impacting on individuals and communities health and well-being.

7.4 **Other implications** (where significant) – i.e. Staff, Health, Sustainability, Crime and Disorder)

None

8. **Background papers used in preparing the report** (including their location on the Council's website or identification whether any are exempt or protected by copyright):

- Thurrock Council Constitution – Chapter 10 (to be found on the Council's website at <https://www.thurrock.gov.uk/constitution-of-council/thurrock-council-constitution>)

9. **Appendices to the report**

- Appendix 1 - Job Profile for the post

Report Author:

Roger Harris
Director of Adults, Health and Commissioning
Adults, Health and Commissioning