

Agenda Item No.7 (n)

DERBYSHIRE COUNTY COUNCIL

CABINET

1st October 2013

Report of the Director of Public Health

MANAGING THE TRANSITION OF PUBLIC HEALTH SERVICES IN GLOSSOPDALE FROM TAMESIDE TO DERBYSHIRE

Purpose of the Report

To inform Cabinet of the process for transferring the commissioning of public health services from Tameside Metropolitan Borough Council to the County Council.

Information and Analysis

Until April 2013, responsibility for the commissioning and provision of public health services for the population of Glossopdale was held by Tameside and Glossop Primary Care Trust. Since 1st April 2013 that responsibility has transferred to the County Council.

To ensure a smooth transition and sufficient time to re-procure services, Tameside Metropolitan Borough Council ('Tameside MBC') agreed to continue commissioning public health services for Glossopdale for an additional year through to end of March 2014. Tameside MBC is commissioning the same services for Glossopdale as were delivered during 2012/13. The public health budget for Glossopdale of £1.684 million has transferred to the County Council and the County Council pays Tameside MBC on a quarterly basis for the services Tameside MBC commission on the County Council's behalf.

Commissioning of public health services from April 2014

Re-procurement of public health services for Glossopdale from April 2014 is being incorporated into the re-procurement of public health services across Derbyshire, as described in the Public Health report approved by Cabinet on 30th July 2013. Tameside MBC has agreed to work with the County Council to ensure that the residents of Glossopdale continue to receive public health services during the transition period. Details of the services and timescales for their re-procurement are summarised below.

Health improvement services

These include: tobacco control and stop smoking services; physical activity programmes; weight management programmes; the health trainer programme; and community development.

The County Council is currently reviewing its health improvement services and recommendations to the Cabinet Member for future provision will be made by the end of September 2013. The current provider of these services in Derbyshire requires a notice of termination period of one year; this will be given in September 2013. The new service will be re-procured to start from October 2014. Tameside MBC has agreed to continue to commission health improvement services for Glossopdale until September 2014; thereafter Glossopdale will be incorporated into the Derbyshire-wide service.

Citizens Advice in GP Surgeries

There is a weekly Citizens Advice Bureau service in four of the six practices in Glossop. Until March 2013 this was funded jointly by Tameside and Glossop Primary Care Trust and the County Council. From April 2013 this service has been funded from the County Council's Public Health budget in line with funding CAB in other GP practices in Derbyshire.

Children's services

The County Council is reviewing its breastfeeding peer support service and will be in a position to re-procure this service together with a breastfeeding coordinator and a Baby Friendly initiative from April 2014. It is intended to continue the Five 60 Healthy Lifestyle programme delivery in Glossop and an options appraisal will be undertaken to determine the best procurement model for future delivery from September 2014 onwards.

All other children's public health services are being reviewed over a longer timescale with new services to be in place by April 2015. These include the School Nursing service, the National Child Measurement Programme, Children's Nutrition and Dietetics, Health Mentors child/family, the Healthy School Programme, Early Attachment, Dental Health Promotion, Young People's Substance Misuse services and Vision Screening.

Older people's services

These include health checks for people aged 40-74 and falls prevention/bone health which Tameside MBC has agreed to continue to commission a programme for Glossopdale until April 2015 to complement the service previously available in primary care. This approach reflects the County Council's intentions and will therefore help to ensure a seamless transition of this service in April 2015.

Cabinet has agreed additional investment in bone health and falls prevention for older people across the rest of Derbyshire to be made available from April 2014 and it is proposed that this service is made available to residents in

Glossopdale as well at the same time. Falls prevention in Tameside and Glossop is part of the Tameside and Glossop Clinical Commissioning Group's (T&G CCG) approach to integrated care and T&G CCG is leading on this programme. The County Council's falls prevention lead will liaise with the T&G CCG to ascertain the best way to take this forward in Glossopdale. This may result in either the T&G CCG or the County Council commissioning falls prevention with the decision taking into account the best outcome for residents whilst also being mindful of relationships with colleagues at Tameside MBC and T&G CCG

The County Council is also investing in other services for older people, including reducing social isolation and fuel poverty. Glossopdale residents will be included in this provision from April 2014.

Sexual health services

These include genito-urinary medicine services, community and sexual health clinics, chlamydia screening and sexual health promotion.

The County Council is reviewing all these services with an intention to re-procure a fully integrated sexual health service across Derbyshire from April 2015. Tameside MBC has agreed to continue to commission the current sexual health provision for Glossopdale until then.

Substance misuse services

These include alcohol services at tiers 2, 3 and 4, support to families and carers of alcohol misusers, and adult drug service provision.

The County Council has reviewed its drug and alcohol services and is ready to begin the re-procurement process. It is expected that the new services will be in place from between April and September 2014. Tameside MBC's intentions on drug and alcohol services should be confirmed in September 2013. Some flexibility may be necessary to align each Council's re-procurement of these services; however it is important that continuity of services in Glossopdale is maintained throughout the process.

Locally Enhanced Services (LEs)

Locally enhanced services are provided by GPs and pharmacists. These services include stop smoking support and a range of other clinical services such as drug and sexual health services. LEs are being included in programme reviews and decision on the future of these services will be taken (or not) on an individual programme basis.

Locality public health work

The current human resource going into locality work in the High Peak includes one day a week of a public health specialist, three days a week of a community health development worker for Gamesley (Glossop) and a

contribution to a health-related post at High Peak Borough Council. The cash resource for locality work in High Peak is administered through the locality partnership funding originally established by Derbyshire County Primary Care Trust. This is currently £32,275 a year. The Public Health report approved by Cabinet on 30th July recommended a more equitable distribution of locality resources including additional investment to increase the localities that currently have less resource than others to the same level. The outcome of this review gives High Peak locality an additional three days of health improvement worker time and an additional £67,636 funding (total £99,911).

Process

A small working group with representatives from Public Health and Tameside MBC has been established to ensure that there is strong liaison on this transition programme and all representatives are committed to ensuring that public health services are maintained for the population of Glossopdale throughout this transition.

Elected members from the County Council and High Peak Borough Council for the Glossopdale area will be kept informed of the process.

Financial Considerations

The costs will be met from the 2013/14 Public Health budget. As and when individual services are re-commissioned by the County Council, it will be necessary to extract the relevant budget lines from the Tameside quarterly payment. Finance leads from the County Council and Tameside MBC will work on this together.

Legal Considerations

The Director of Legal Services will work with Public Health and Tameside MBC colleagues to support the transition of the commissioning responsibilities set out in this report.

Human Resource Considerations

The Gamesley community development post is the only post that is specific to Glossopdale. The provider of this service and employer of the post is Pennine Care NHS Foundation Trust. It has been agreed that this post will TUPE over to the County Council in October 2014 in line with the re-provision of the other health improvement services.

There may also be TUPE implications for substance misuse services. At present Tameside MBC is unable to confirm if any of the staff delivering substance misuse services are eligible under the TUPE Regulations. Further work is therefore required to ascertain whether there are any TUPE implications in re-procuring the substance misuse services in Glossopdale.

Equality of Opportunity Considerations

An equality impact assessment will be carried out.

Other Considerations

In preparing this report the relevance of the following factors has been considered: environmental, health, property and transport considerations.

Key Decision

No.

Call – In

Is it required that call-in be waived in respect of the decisions proposed in the report? No.

Background Papers

Cabinet Report 30 July 2013

OFFICER'S RECOMMENDATION

To approve the process of transition for the commissioning of public health services from Tameside MBC to the County Council.

Elaine Michel
Director of Public Health