Bath & North East Somerset Council		
Health and Wellbeing Board (Shadow)		
19 th September 2012		
Memorandum of Understanding between B&NES Clinical Commissioning Group and Public Health in B&NES Council		

AN OPEN PUBLIC ITEM

List of attachments to this report:

- 1. Memorandum of Understanding between B&NES Clinical Commissioning Group (CCG) and Public Health in B&NES Council.
- 2. Equality Impact Assessment.

1 THE ISSUE

1.1 The Health and Wellbeing Board is asked to approve the attached Memorandum of Understanding (MOU) between B&NES Clinical Commissioning Group (CCG) and Public Health. It is intended that the MOU will be in operation from October 2012, and sign-off is required to support the CCGs application for authorisation.

2 RECOMMENDATION

The Health and Wellbeing Board is asked to:

2.1 Approve the MOU so that it can be signed by the 4 key signatories (Jo Farrar, Ed MaCalister-Smith, Paul Scott, and Dr Ian Orpen).

3 FINANCIAL IMPLICATIONS

3.1 There are no new financial implications. All functions outlined within the MOU will be funded from the public health budget allocated to the Local Authority. (Any additional "enhanced" services provided by public health in the future would require funding by the CCG).

4 THE REPORT

Background:

- 4.1 Under the Health and Social Care Act, from April 2013 Clinical Commissioning Groups (CCGs) have a duty to access public health advice, information and expertise in relation to the healthcare services that they commission. At the same time, public health teams based in local authorities will have a responsibility to provide this specialist advice (often referred to as a "core offer") to clinical commissioning groups (CCGs).
- The Department of Health published guidance in February 2012 (updated in June 2012), encouraging CCGs and public health teams to develop an MOU, which will support CCGs in making best use of public health expertise.

Purpose and scope of the MOU:

- 5.1 The purpose of the Memorandum of Understanding (MOU) is to establish a framework for working relationships between B&NES CCG and the public health team, and to set out the scope of the specialist service (i.e. functions) that public health will provide to the CCG. It also outlines the reciprocal responsibilities of the CCG in receiving these services.
- 5.2 The services that public health will provide to the CCG, includes the domain of population healthcare, which is informed by "core offer" guidance by the Department of Health. The MOU also outlines those services that will be provided under the other domains of public health: health improvement and health protection, so that all public health services provided to the CCG are captured in one MOU.
- 5.3 The MOU will be underpinned by an annual work-programme between the CCG and Public Health, which will define the particular priorities, deliverables and outcomes for a 12 month period.

Review:

- 5.4 The MOU will cover the period from October 2012 until March 2014, with the initial six month period being in Shadow form, allowing for review and revision, subject to local needs and national guidance for the period April 2013- March 2014.
- 5.5 Hence, an initial review will take place in February 2013, and annual reviews will take place thereafter.

Recommendation:

5.6 The Health and Wellbeing Board approve the MOU so that it can be signed by the 4 key signatories (Jo Farrar, Ed MaCalister-Smith, Paul Scott, and Dr Ian Orpen) prior to 1st October 2012.

6 RISK MANAGEMENT

- 6.1 The key risk is that public health overcommits resources to the CCG if the MOU is not considered alongside public health's "offer" to B&NES Council and other bodies such as Public Health England and the NHS Commissioning Board. To mitigate this risk, public health is taking the following actions:
 - Developing an annual work programme with the CCG, which sets out the priority projects and outcomes to be delivered for the oncoming year, and attaches resource to this to ensure that public health does not over-commit. The work programme for the oncoming year is currently being developed.
 - Scoping the likely public health "offer" to all other parties, including B&NES Council, NHS Commissioning Board, and Public Health England.
 - Ensuring the above are considered within, and support, public health's Business Plan.

7 EQUALITIES

7.1 An Equality Impact Assessment has been completed and no adverse or other significant issues were found (see attached). On the contrary, the MOU provides an opportunity for public health to support the CCG in promoting equality and diversity through the provision of both public health intelligence and advice.

8 CONSULTATION

- 8.1 Prior to the MOU being submitted to the Health and Wellbeing Board for approval, it has been tabled, and subject to discussion and comment, at the following meetings:
 - PCT Board (July 2012)
 - Clinical Commissioning Committee (July 2012)
 - People and Communities Department Leadership Team (August 2012)
- 8.2 The following stakeholders have also been consulted: Simon Allen (Ward Councillor and Cabinet Member); Monitoring Officer (Amanda Brookes on behalf of Vernon Hitchman), Section 151 Finance Officer (Tim Richens), B&NES Council Chief Executive (was John Everitt), CCG representatives (as they have developed the MOU with the public health team).

9 ISSUES TO CONSIDER IN REACHING THE DECISION

9.1 There are no significant issues that require consideration. In terms of the legal status of the MOU, whilst it is not legally binding, it does reflect national guidance under which the Local Authority is mandated to provide public health advice and support to the CCG. The CCG as a statutory partner of the Health & Wellbeing Board also requires sound public health advice on which to base its recommendations.

10 ADVICE SOUGHT

10.1 The Council's Monitoring Officer (Divisional Director, Legal and Democratic Services) and Section 151 Officer (Divisional Director, Finance) have had the opportunity to input to this report and have cleared it for publication.

Contact person	Amy McCullough, Public Health Specialty Registrar.
	Paul Scott, Director of Public Health.
Background papers	Information used to inform the content of the MOU: • Department of Health. June 2012. Healthcare Public Health Advice to Clinical Commissioning Groups. http://www.dh.gov.uk/health/2012/06/public-health-advice-to-ccgs/ • Department of Health. September 2012. Health protection and local government. http://www.dh.gov.uk/health/2012/08/health-protection-guidance/ • Core offer work programme being undertaken by Bristol, North Somerset, South Gloucestershire and B&NES. • Example MOUs from various PCTs/CCGs. The development of an MOU is recommended by the Department of Health; Healthcare Public Health Advice to Clinical Commissioning Groups (June 2012). http://www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcircul ars/Dearcolleagueletters/DH_132760
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