

(APPENDIX 1)

PUBLIC HEALTH ACTION PLAN 2013/2014

Objective	Key Task	Lead	Subtasks	Deadline for Subtask	Progress Update
1. Integration of Public Health (Post Transfer)					
1.1 Ensure the delivery of mandatory and non-mandatory services is centred the Councils vision of putting residents first.	To deliver improved outcomes, including improved health	Jean Palmer Aileen Carlisle Matthew Kelly Sharon Daye/Nigel Dicker	<p>1.1a Apply Council's contract management framework, incorporating category management for commissioning activities.</p> <p>1.1b Undertake review of mandatory and non-mandatory services:</p> <p>Mandatory:</p> <ul style="list-style-type: none"> ▪ National Child Measurement Programme; ▪ NHS Health Checks; ▪ Core Offer to Clinical Commissioning Groups (CCGs); ▪ Public Health responsibilities for Health Protection; ▪ Sexual Health. <p>Non-mandatory</p> <ul style="list-style-type: none"> ▪ School nursing (i.e. Healthy Child Programme for school age children) ▪ Local health improvement programmes to improve diet / nutrition, to promote ▪ physical activity and prevent / address obesity; 	October 2013	<p>1.1a Category management approach in place and work ongoing.</p> <p>Tendering process under consideration.</p> <p>1.1b Full BID and category Reviews of services and service specifications, liabilities and commitments currently underway.</p>

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			<ul style="list-style-type: none"> ▪ Drug misuse and alcohol misuse services; ▪ Tobacco control including stop smoking services and prevention activity. <p>1.1c Recommendations to Cabinet for approval</p>	TBC	
<p>1.2 Integration of ring-fenced public health budget.</p> <p>(Note: Additional public health grant funding has been awarded over a 2 year period – 2013/14 & 2014/15)</p>	To apply Council's robust approach to medium term financial forecasting, including value for money	<p>Jean Palmer</p> <p>Aileen Carlisle</p> <p>Sharon Daye</p> <p>Nigel Dicker</p>	<p>1.2a To undertake an exercise to identify projects or schemes across Council's key service area that would support implementation of priorities identified in the JSNA across the 4 public health domains of:</p> <p>Domain 1: Improving the wider determinants of health;</p> <p>Domain 2: Health Improvement;</p> <p>Domain 3: Health Protection;</p> <p>Domain 4: Healthcare public health and preventing premature mortality.</p>	Early July 2013	Exercise Undertaken

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			1.2b To raise awareness of Council staff about new Public Health responsibilities in order to identify projects.	Early July 2013	Four workshop briefings undertaken in June /July. Schemes are now being reviewed.
2. BID Review of Public Health Team					
2.1 To review the work of the transferred Public Health Team, using BID principles.	To reshape the service to support the Council's operating model and focus on building capacity and resilience.	Aileen Carlisle Jean Palmer	2.1 a To place Public Health Team including the Specialist Health Promotion and Smoking Cessation Teams into Resident Services.		Completed

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3. Effective Partnerships Working					
<p>3.1 Agreement of Memorandum of Understanding (MOU) between the Council and Hillingdon Clinical Commissioning Group (CCG)</p> <p>(<u>Note:</u> The Health and Social Care Act 2012: Mandatory responsibility for local authorities)</p>	<p>Ensure local NHS commissioners receive the necessary public health advice so that they can discharge their statutory duties.</p> <p>Agreement of Action Plan to support implementation of the MOU between the Council and Hillingdon CCG</p>	<p>Sharon Daye/ Nigel Dicker</p>	<p>3.1a To develop MOU for 2013/14 that can be jointly agreed by both the Council and Hillingdon CCG.</p> <p>3.1b To develop action plan for 2013/14 that can be jointly agreed by both the Council and Hillingdon CCG</p>		<p>Draft under discussion with CCG.</p> <p>Draft under discussion with CCG.</p>