PUBLIC HEALTH ACTION PLAN 2013/2014

Objective	Key Task	Lead	Subtasks	Deadline	Progress Update
				for	
				Subtask	
1. Integration of	Public Health	(Post Transfer,			
1. Integration of 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	 1.1a Apply Council's contract management framework, incorporating category management for commissioning activities. 1.1b Undertake review of mandatory and non-mandatory services: Mandatory: National Child Measurement Programme; NHS Health Checks; Core Offer to Clinical Commissioning Groups (CCGs); Public Health responsibilities for Health Protection; Sexual Health. Non-mandatory 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 / 	October 2013	1.1a Category management approach in place and work ongoing. 1.1b Full BID and category reviews of services and service specifications, liabilities and commitments currently underway.

APPENDIX 1

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			 Drug misuse and alcohol misuse services; Tobacco control including stop smoking services and prevention activity. 1.1c Recommendations to Cabinet for approval 	TBC	
1.2 Integration of ring-fenced public health budget. (Note: Additional public health grant funding has been awarded over a 2 year period – 2013/14 & 2014/15)	To apply Council's robust approach to medium term financial forecasting, including value for money	Jean Palmer Aileen Carlisle Sharon Daye Nigel Dicker	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: Domain 1: Improving the wider determinants of health; Domain 2: Health Improvement; Domain 3: Health Protection; Domain 4: Healthcare public health and preventing premature mortality.	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 o	f 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 the Public Health Team including the Specialist Health Promotion and Smoking Cessation Teams into Residents Services. 2.1b Restructure of Public Health and Specialist Health Promotion Teams as part of the integration of the Team into the Council.		Revised structure, job descriptions and person specifications currently being evaluated by Human Resources. (Note: Job descriptions for the Statutory Director of Public Health and Consultant in Public Health are also being evaluated.

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	To test the new service delivery model, through prototype working.		 2.1b Public Health Consultants to continue providing analysis and advisory support to delivery teams. 2.1c Broaden the remit of Public Health Consultants to include developing the strategic relationship with the local health economy including the CCG, local providers, and the hospital Trusts 2.1d Operational Public Health officers to: Build local capacity and resilience; Support people to employment Support the Family Information Service Support Education and training provision for young people 2.1e Build a broader delivery (ie. 'Community Public Health Service') providing and facilitating a greater array of services to support residents to make positive, well informed decisions. 	Ongoing	Ongoing.))))) Restructure of Public Health and Health) Promotion Team currently under way.))))))) BID Transformation Review Process underway

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3. Effective Pa	artnerships Wor	king			
3.1 Agreement of Memorandum of Understanding (MOU) between the Council and Hillingdon Clinical Commissioning Group (CCG) (Note: The Health and Social Care Act	Ensure local NHS commissioners receive the necessary public health advice so that they can discharge their statutory duties.	Sharon Daye/ Nigel Dicker	3.1a To develop MOU for 2013/14 that can be jointly agreed by both the Council and Hillingdon CCG.		MOU Agreed at September 2013 meeting of the Health and Wellbeing Board.
2012: Mandatory responsibility for local authorities)	Agreement of Action Plan to support implementation of the MOU between the Council and Hillingdon CCG		3.1b To develop action plan for 2013/14 that can be jointly agreed by both the Council and Hillingdon CCG		Action Plan agreed.