

<p>Service Level Agreement for Joint City and Hackney Public Health service</p> <p>Key Decision No - AHI S006</p>	
<p>CABINET MEETING DATE (2019/20)</p> <p>19th July 2021</p>	<p>CLASSIFICATION:</p> <p>Open</p>
<p>WARD(S) AFFECTED</p> <p>All wards</p>	
<p>CABINET MEMBER Cllr Christopher Kennedy, Lead Member for Health, Adult Social Care and Leisure</p>	
<p>KEY DECISION</p> <p>Yes</p> <p>REASON Affects two or more wards</p>	
<p>GROUP DIRECTOR</p> <p>Helen Woodland- Group Director Adults, Health and Integration</p> <p>Sandra Husbands- Director of Public Health</p>	

1. CABINET MEMBER'S INTRODUCTION

- 1.1. The need to work collaboratively with neighbouring local authorities, and the benefits from doing so, have been reinforced throughout the last 18months of the COVID pandemic. This proposal to enter into a 3-year service level agreement with further extension options will enable greater long-term planning of the joint service and so benefit local residents of both Hackney and the City of London.

2. GROUP DIRECTOR'S INTRODUCTION

- 2.1. *Submitted for approval to Helen Woodland* [The City of London Corporation and Hackney Council have worked in close partnership since 2013 when many aspects of the public health functions were transferred from the NHS as part of the Health and Social Care Act reforms. Hackney Council hosts the joint public health team and undertakes commissioning of services from the public health grant across both local authorities. A key decision is sought to enter into a service level agreement to cover all aspects of the joint service for the next 3 years with an option to extend for additional years.
- 2.2. Annual reviews of the service level agreement have been built into the service level agreement and the facility to vary, by mutual consent, the terms of the agreement to reflect any changes that may be required by changes in national legislation or funding.]

3. RECOMMENDATIONS

- 3.1. **To delegate authority to enter into the joint service level agreement with the City of London Corporation to the Group Director Adults, Health and Integration.**
- 3.2. **To request that an annual review of the service level agreement is undertaken jointly by Hackney Council and the City of London. The review aims to ensure the joint service agreement continues to meet the needs of both authorities.**

4. REASONS FOR DECISION

- 4.1. Hackney Council and the City of London Corporation are legally required to:-
 - a) ensure provision of mandated public health services
 - b) improve the health and wellbeing of their local population and
 - c) to have appointed a Director of Public Health. These requirements can be met individually by an authority or jointly in partnership with another authority.
- 4.2. A joint public health service provides advantages to both Hackney Council and the City of London Corporation in efficiently and effectively discharging the requirements to improve the health and wellbeing of their local residents.
- 4.3. The costs of providing this service are met from a ring-fenced public health provided by the Department of Health and Social Care and there are no additional budgetary implications of this proposal.
- 4.4. The Council has the legal power to promote well-being under the power of the general competence of the Localism Act 2011¹ and may: -
 - a) Enter into arrangements or agreements with any person or body.

¹ <https://www.legislation.gov.uk/ukpga/2011/20/contents/enacted>

- b) Co-operate with, or facilitate or co-ordinate the activities of, any person or body.
- c) Exercise on behalf of that person or body any functions of that person or body.

5. DETAILS OF ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

- 5.1. Hackney Council and/or the City of London Corporation could choose to operate their own separate public health service- however this would result in additional costs and loss of efficiency of a joint service.
- 5.2. Hackney Council and/or the City of London Corporation could choose to partner with a different authority- however given the long history of working collaboratively as an integrated health system this would result in unnecessary duplication and limit the ability of joint service provision to work efficiently.

6. BACKGROUND

- 6.1. City of London Corporation and Hackney Council have previously agreed joint service agreements for the public health service which have now expired.
- 6.2. **Policy Context**
- 6.3. Since April 2013, when many of the responsibilities for public health were transferred from the NHS to local authorities²³, Hackney Council and the Corporation of London have worked in close partnership to deliver a joint public health service.
- 6.4. The Director of Public Health is a required statutory appointment⁴ and both authorities have agreed for this position to be jointly appointed and shared across City and Hackney.
- 6.5. The Health and Social Care Act, along with statutory guidance from the Department of Health and Social Care (DHSC), requires local authorities to commission or make available a range of services to improve health and wellbeing of their local population⁵. These mandated services are complemented by other services that address local health improvement needs as identified by the Joint Strategy Needs Assessment and Health and Wellbeing Strategy.

² <https://www.legislation.gov.uk/ukpga/2012/7/contents/enacted>

³ <https://www.legislation.gov.uk/uksi/2013/351/contents/made>

⁴

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/249810/DPH_Guidance_Final_v6.pdf

⁵

<http://www.adph.org.uk/wp-content/uploads/2016/09/Interpreting-the-ringfenced-grant-conditions-and-mandateGATEWAY.pdf>

- 6.6. An annual ring-fenced public health grant is provided to local authorities from the DHSC in order to discharge these responsibilities and an annual assurance letter is required to confirm that funds have been spent in accordance with national directions.⁶
- 6.7. The staff of the joint public health service and the commissioning of services funded from the public health grant are hosted by Hackney Council but operate across both authorities as a joint service.
- 6.8. Each authority retains their statutory functions, but these are discharged through the operation of the joint public health services.
- 6.9. The provision of a joint public health service along with joint commissioning is in line with the council strategy and policies as outlined in a) the Community Strategy⁷ specifically promoting a good quality of life and healthy active independent residents and b) the Corporate Plan⁸ including supporting children and young people to thrive, enabling community wellbeing and tackling health inequalities.
- 6.10. Equality Impact Assessment**
- 6.11. An equalities impact assessment is not required for this key decision as this proposal will not impact on equalities.
- 6.12. All staff covered by the joint service are employed by Hackney Council in accordance with human resources policies and the Single Equality Scheme which include promoting equality, cohesion, diversity, inclusivity, tackling poverty and reducing socio- economic disadvantage.
- 6.13. Commissioned services covered by this service level agreement have been procured in accordance with Hackney Council's policies and procedures. This includes the requirements to promote equality and reduce disadvantage across all of the protected characteristics.
- 6.14. Sustainability**
- 6.15. This proposal does not have any impact on sustainability.
- 6.16. Consultations**
- 6.17. A staff consultation in 2019 on establishing a joint service was undertaken prior to a restructure in 2019. There are no implications on staff or the provision of services from this proposal.

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<https://www.gov.uk/government/publications/public-health-grants-to-local-authorities-2021-to-2022/public-health-ring-fenced-grant-2021-to-2022-local-authority-circular>

⁷ <https://hackney.gov.uk/community-strategy>

⁸ <https://hackney.gov.uk/corporate-plan>

6.18. Risk Assessment

- 6.19. All staff and commissioned services of the joint Public Health Service are currently hosted by Hackney Council. Without a service level agreement, the financial risk of providing these services is held solely by Hackney Council. By entering into a service level agreement with the City of London the financial risk is mitigated by confirming the basis of which services are jointly funded by each authority.
- 6.20. If either party wished to exit the joint service then there would be a financial risk to Hackney Council of maintaining or exiting joint services. A service level agreement mitigates the risk by detailing how any exit arrangement would be enacted and liabilities met.
- 6.21. A poorly performing joint public health service would present a reputational risk to either or both local authorities. An annual review of the service level agreement enables any deficits to be identified and addressed in good time.

7. COMMENTS OF THE GROUP DIRECTOR OF FINANCE AND CORPORATE RESOURCES

- 7.1. The recommendation of this report is to seek approval to enter into a three year service level agreement for a joint City and Hackney Public Health Service, with an option to extend for additional years. This will enable greater long term planning and benefit local residents of both Hackney and the City of London by providing an effective and efficient joined-up public health service provision.
- 7.2. The report seeks approval to delegate authority to the Group Director of Adults, Health and Integration to enter into a joint service level agreement with the City of London Corporation, and that an annual review of the service level agreement is undertaken jointly by both parties. This is to ensure the joint service agreement continues to meet the needs of both organisations and its residents.
- 7.3. Any costs arising from this arrangement will continue to be met from the ring-fenced Public Health Grant and will not result in a budget pressure for the local authority. Funding arrangements will be reviewed annually to ensure any changes to either annual grant funding allocations or national legislation are reflected.

8. VAT Implications on Land & Property Transactions

- 8.1. Not applicable.

9. COMMENTS OF THE DIRECTOR, LEGAL & GOVERNANCE SERVICES

- 9.1. The decision in this Report is a key decision under Regulation 8 of the Local Authorities (Executive Arrangements) (Meetings and Access to Information)

(England) Regulations 2012 as it is an executive decision, which is likely (a) to result in the relevant local authority incurring expenditure which is, or the making of savings which are, significant having regard to the relevant local authority's budget for the service or function to which the decision relates; or (b) to be significant in terms of its effects on communities living or working in an area comprising two or more wards or electoral divisions in the area of the relevant local authority. Key decisions can be made by Cabinet under Article 13.6 of the Constitution and therefore this Report is being presented to Cabinet for approval.

- 9.2. The Council will need to enter into a Service Level Agreement with the City of London Corporation to formalise the arrangements in this Report. The Service Level Agreement will define the responsibilities of the parties and detail the financial payments necessary to ensure delivery of the public health services

APPENDICES

None

EXEMPT

N/A

BACKGROUND PAPERS

In accordance with The Local Authorities (Executive Arrangements) (Meetings and Access to Information) England Regulations 2012 publication of Background Papers used in the preparation of reports is required

None

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