Directors of Public Health and the New Public Health System for Children, Young People and Families

Directors of Public Health in Local Authorities are crucial to ensuring that children and young people have the best possible health and well-being outcomes and reducing health inequalities

- Have a wide and up to date knowledge of C&YP issues nationally and locally to provide strong leadership and advocacy
- Able to lead and champion the ‘life-course’ approach to tackling inequalities that start in childhood and emphasise the importance of managing transitions for C&YP
- Close working and joint commissioning with the local Directors of Children’s Services and the Chair of the Children’s Safeguarding Board to build strategic insights into local plans that will deliver improved outcomes for C&YP across the system
- Seek and maximise opportunities in the wider children’s system (schools, police) for improving outcomes for C&YP
- Engage, influence and hold to account key organisation outside the LA who have to work effectively at local level to improve outcomes for C&YP e.g. Clinical Commissioning Groups (CCGs), NHS providers, NHS Commissioning Board Local Area Teams (NHS CB LAT)
- Support the sharing and utilisation of relevant performance information and ensure there are no data gaps

Support you can expect from Public Health England

- Work with and support partnerships locally to improve PH outcomes
- Deliver health protection services
- Employ and immunisation and screening teams to support NHSCB LATs commission these PH programmes
- Provide specialist support to dental and specialised commissioning
- Oversee delivery of drug and alcohol services

Forum Recommendations for Directors of Public Health

In their new role in local government, DsPH will be the principle adviser on health to elected members and officials. We suggest that DsPH:

- As statutory members of HWBs, demonstrate that they have comprehensive data for all children and young people within their JSNA including those requiring tailored provision such as those who are looked after, those with disabilities or long-term conditions and those in contact with the criminal justice system
- Work together with their Clinical Commissioning Groups (CCGs) and with maternity and child health services to identify and meet the needs of their local populations
- Ensure that C&YP who are vulnerable to poor outcomes such as low birth weight infants, those in care and those with long-term conditions or disabilities are clearly represented in local priorities
- Ensure that C&YP are involved in commissioning of PH services aimed at C&YP
- Ensure that PH services and programmes contribute to local Safeguarding Children plans and interventions

What children and young people tell us about their health and well-being

- They understand that peer pressure and advertising can work against healthy choices
- They connect being healthy with ‘things to do’ in their area and access to public transport and sports facilities
- They believe that too many public health campaigns are aimed at adults
- They need more information and advice about healthy lifestyles that is written and communicated in ways that resonate for them
- They want to be involved in the design, development and evaluation of child friendly campaigns and services
- They recognise and value the role of the school in encouraging healthy behaviour
- They recognise there is a place for social media and want a trusted internet source of accurate health information

Support you can expect from Public Health England

- Deliver national health promotion and prevention campaigns
- Takes national overview of infectious diseases
- Child and Maternal Health Observatory (ChiMat) provide benchmarking information and information on evidence-based interventions
- Informs regional strategic commissioning with NHS CB
- Support workforce development
### Commissioning / Funding for Children and Young People’s Public Health Services

*In their advocacy role for C&YP, DsPH can ensure that these elements work together cohesively*

**Local Authority Public Health Responsibilities (Mandated)**

- **Commissioning:**
  - The National Child Measurement Programme
  - Comprehensive sexual health services including prevention and promotion, advice, testing and treatment of sexually transmitted infections
  - Protecting the health of the population, in particular by ensuring there are plans in place to protect the health of the population
  - Giving PH advice to CCGs commissioning health care services for C&YP

- **Key NHS CB Commissioning Responsibilities in Public Health**
  - Public health services for children from pregnancy to age 5
    - The Healthy Child Programme (HCP), Pregnancy – 5, including health visiting, the Family Nurse Partnership (due to transfer to LA responsibility in 2015)
    - Responsibility for Child Health Information Systems
    - National screening programmes / Immunization programme
    - Public health services for those in prison of places of detention
    - Sexual assault referral services

- **Local Authorities Early Intervention Grant**
  - Sure Start children’s centres
  - Targeted mental health in schools
  - Free early education places for disadvantaged two-year-olds
  - Short breaks for disabled children
  - Targeted support for vulnerable young people
  - Targeted support for families with multiple problems

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**Example of Commissioning Model for Children’s Public Health, Health Child Programme (0-5)**

- Secretary of State for Health delegates commissioning responsibilities for HCP (0-5) for children and transfers funds to cover full programme costs (other than monies for primary care) and commissioning overheads via the Section 7a Agreement
- Health and Wellbeing Boards (HWBs) to establish a children’s group which will include representation of all statutory organisations that hold a budget for commissioning services to children for the territory of the relevant HWB. Most local areas have functioning Children’s Partnerships / Children’s Trust successor bodies.
- The HWB Children’s Group to lead on the production of the children’s section of the Joint Strategic Needs Assessment and the Joint Health and Wellbeing Strategy
- Each of the commissioning organisations of the HWB Children’s Group to share information about the commissioning budget for children. This Transparency creates a ‘virtual children’s budget’ for the HWB territory
- Small multi-agency group of commissioners work to ensure effective coordination of commissioning with the monies each of the commissioning agencies have allocated for commissioning services for children. There is no requirement or expectation that commissioners budgets are pooled, although this would be an option for local decision
- This model allows direct line of sight from needs assessment to strategy to budget and commissioning plans.

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**Further Resources**


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[3] Excludes contraception services within the GP contract, abortion which will be commissioned by Clinical Commissioning Groups, and sexual assault referral centres, HIV treatment and specialist services for Female Genital Mutilation which will be commissioned by the NHS Commissioning Board

[4] Information on the Early Intervention Grant is provided for reference as some of the services it funds can be said to serve public health functions, however, the Grant comes from the Department for Education rather than the Department for Health. Government has not on the detailed relationship between the two funding streams.