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To: All local authority Chief Executives in England 18 September 2012

Public Health Transitional Support Funds for Local Authorities

Local government across England is making excellent progress in welcoming public health teams from the NHS, and in making plans to improve the health of their communities once their new responsibilities commence from April 2013.

The transition of thousands of staff and planning for these new functions inevitably requires additional capacity.

The Department of Health is able to make a significant contribution to these costs. We are making available financial support to each unitary and upper tier local authority. This will strengthen your capacity to manage the change by contributing towards the costs associated with managing a successful transition and minimising the diversion of staff and resources from day to day duties and delivery.

The allocation of transitional support to be issued to your local authority will be paid to you by your PCT. Colleagues at the PCT have been notified of the amount and associated process through a similar letter and resource limited adjustment. The distribution methodology used is that each area receives a share of £15m, based half on equal share and half on a fixed per capita amount. Further details are in the attached spreadsheet.

We expect this transitional support to contribute towards the costs of additional professional fees for moving from one organisational form to another, including:

 Additional HR capability; to ensure valuable public health staff are retained and supported during transition e.g. given tailored HR advice, induction programmes developed and delivered, 'welcome' sessions arranged ahead of transfer

- Legal advice; due diligences as required, legal and surveyor fees in relation to property issues, legal and procurement professional fees in relation to contracts, legal and set up costs for the new structures
- Estates; co-location of teams/staff and equipment will require additional estates capacity such as IM&T issues, office moves, and additional equipment
- Project Planning; additional capacity required to ensure a robust, safe move, in budget, on time, with minimum disruption to services.

This funding should make a significant contribution towards these and other transition costs, as we approach the final crucial phase of the transition. I am very grateful for all your work with the NHS in ensuring a smooth and robust transition of public health staff and services.

With best wishes

Duncan Selbie

Chief Executive Designate

Public Health England