

ANGUS COUNCIL
PUBLIC HEALTH CAPACITY BUILDING
POLICY & RESOURCES COMMITTEE

TUESDAY 25 JUNE 2002

Report by the Chief Executive

ABSTRACT

This report outlines the work that has taken place jointly between public service organisations across Angus in progressing the health improvement agenda and the long-term vision within the Angus Community Plan. This agenda is seen as a priority for joint working, and only through close collaboration between the public service agencies in Angus, can the vision of healthy, safe and caring communities be achieved. It recognises that in achieving this long-term goal, there is also a need to support the development of Angus Council as a Public Health organisation.

1. RECOMMENDATIONS

It is recommended that the Policy & Resources Committee agree to contribute to the funding of a Capacity Building Post in Angus Council, on a 3-year fixed term contract or secondment basis, to facilitate the progression of the health improvement agenda and the development of Angus Council as a Public Health Organisation.

2. INTRODUCTION

Angus Council and its partners believe that public health issues impact upon, and are intrinsically related to other wellbeing issues, e.g. community safety and the environment. The partners in this development are therefore representative of the broad functions that relate to public health and well being.

These are:-

- Angus Council
- NHS Tayside
- Tayside Police
- Tayside Fire Brigade
- Communities Scotland, and
- Angus Association of Voluntary Organisations

Within Angus, public service organisations have put a great deal of effort into raising the profile of the health improvement agenda, through the recognition that no single agency can effect the necessary changes in lifestyles and life circumstances needed to reverse the health status of the population of Angus.

The agenda for achieving these changes has already been debated between NHS Tayside and Angus Council, and a great deal of preparatory work has been undertaken in order to translate the rhetoric into action. Organisational structures have been refined to take account of the overarching Community Planning process, ensuring that accountability for taking forward action at an organisational level is built in to the process.

Progressing the health improvement agenda in Angus is seen as a priority for joint working, and only through close collaboration between the public service agencies in Angus, can the vision of healthy, safe and caring communities be achieved.

In pursuing an improvement in the health of the population of Angus, it is recognised that for each of the agencies involved, there are also internal developments that require to be supported to progress this agenda.

CoSLA as part of their role in developing Local Authorities as Public Health Organisations have, after extensive discussions with Local Authorities across Scotland, managed to secure central funding to support building capacity into Local Authorities to develop their role as Public Health Organisations.

3. CONSIDERATION

The Public Health Capacity Building post is seen as a vital component in the development of the wider public health agenda in Angus. In taking forward the development of this agenda, several other components are already in place to assist in improving the health of the population of Angus, and this post is seen as complementary to these developments.

Health Development Officer – this post is responsible for the co-ordination of activities within the health alliance in Angus, and is seen as important component in co-ordinating the health improvement agenda across NHS Tayside and Angus Council. The post is based within the Chief Executives Department within Angus Council, and works between the Public Health Department in NHS Tayside, and the Policy and Performance Unit in Angus Council.

Public Health Practitioners – these are newly created posts based within Angus L.H.C.C., and are responsible for developing the public health agenda within the L.H.C.C. Many changes are taking place within the NHS in Tayside, and these posts are seen as an essential component to creating a health improvement focus, which is equally as important as the care and treatment role traditionally seen to be that of the NHS.

As well as the human resources, which are being directed towards developing the public health agenda, there is also the financial resource, which has been committed to assisting implementation.

Health Improvement Fund (HIF) – the promotion of public health and health improvement are at the heart of the Scottish Executives commitment to meeting the challenge of changing the patterns of ill health across Scotland. The creation of the HIF was seen as a demonstrable commitment to this challenge, and in 2000 monies were allocated to Health Boards across

Scotland to specifically meet this objective. NHS Tayside Board agreed, with partners, that in allocating this resource, the most effective way of tackling health inequalities was to allocate the resource as locally as possible to allow more effective targeting. The monies were subsequently allocated through the 3 health alliances across Tayside to allow not only a partnership approach, but appropriate targeting given the variations that exist in health status across Tayside. The Angus allocation of this resource was:

2001/02 - £120,400

2002/03 - £112,900

2003/04 - £112,400

New Opportunity Fund (NOF) – a substantial new investment in Scotland's commitment to tackling ill health was announced in May 2002.

£32 million has been committed to assisting in the reduction of deaths from Coronary Heart Disease (CHD), Stroke and Cancer through the National Lottery New Opportunities Fund.

Of the £32 million, £16.6million has been ring-fenced for projects aiming to reduce the burden of CHD and stroke, with £10 million being allocated for cancer projects, and £5.4 million being allocated for palliative care. Tayside's indicative allocation is:

CHD/Stroke - £1.13 million

Palliative Care - £365,000

In addition, the North of Scotland cancer allocation is £1.87 million

Within the wider context of the public health agenda, the Capacity Building post will provide an additional strand to delivering a more co-ordinated approach to health improvement across Angus, through an interactive and effective liaison between Angus Council and NHS Tayside. The postholder will have a close involvement in supporting and developing joint working across Angus, and will have a specific role to play in the development, implementation, monitoring and evaluation of agreed action within the Angus Council.

Other specific responsibilities will include ensuring that a health dimension is reflected in policy and decision making within Angus Council, and that this is viewed as a natural component of the planning process within the organisation.

Angus Council and NHS Tayside have numerous joint working arrangements and initiatives in place. These areas of joint work are central to the delivery of many aspects of the Angus Community Plan.

4. FINANCIAL IMPLICATIONS

The total costs of the post will be contained within a £30,000 per annum threshold figure. The breakdown of funding contributions is:-

Scottish Executive	£15,000
Angus Council	£ 7,500
NHS Tayside	£ 7,500

The above figures are annual, and it is intended to fund the post on the basis set out above for a full three-year period.

The Angus Council contribution will be met from the Corporate Initiatives budget.

The future arrangements for the continuation of the post will therefore be considered in that context. NHS Tayside are currently considering their future strategies and one element of that is the devolution of planning and joint working resources to the constituent parts of Tayside.

5. HUMAN RIGHTS ISSUES

There are no human rights issues arising from this report.

6. CONSULTATION

Extensive discussions and consultation have taken place between Angus Council and NHS Tayside in the development of this post, and as outlined above this is reflected in their financial commitment to the post. The Directors of Finance and Law & Administration have been consulted during the preparation of this report.

A B Watson
Chief Executive

Note: No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any containing confidential or exempt information), were relied on to any material extent in preparing this paper.