

# From transition to transformation in public health

## Updated case study: Salford – August 2012

“Returning the public health function to the council puts it right at the centre of public service. This is so important for us in Salford as we understand the impact health and wellbeing has on every area of our residents’ lives. The transition of public health into the council was made so much easier because of the joined-up culture we had already established in the city. We have made sure we have integrated public health into our core strategy for the city and make sure it is embedded into every area of our work. We know only too well that a healthy city is a happy city, so our commitment to improving public health remains at the heart of everything we do.”

**Councillor Margaret Morris, Assistant Mayor, Health and Wellbeing, Salford Council**

“The introduction of the Health and Social Care Act has changed who is responsible for the health of the people of Salford and increased the emphasis on working in partnership. Central to this is the recognition that making appropriate lifestyle choices will reduce the chances of people becoming ill. The long-established partnership between Salford City Council and NHS Salford will be developed further by the introduction of the Health and Wellbeing Board and the joint commissioning hub. By working together we will be aiming to reduce health inequalities across the city, improve the health and wellbeing of the population of Salford and increase the average life expectancy in Salford to at least the UK average. Salford Clinical Commissioning Group (CCG) has an important role to play in delivering the vision and aims of the Health and Wellbeing Board and ensuring that the highest quality healthcare is available to the Salford population.”

**Hamish Stedman, Salford GP and Chair of NHS Salford CCG**

## Embedding public health in the local authority

Salford is developing a new business model for public health that involves the public health team being integrated into the intelligence, research, policy and strategy function of an Integrated Commissioning Hub which supports commissioning across the council and the clinical commissioning group (CCG). The Hub is progressing well, developing 'proof of concept' workstreams which support actions to tackle family poverty and integrated services for young people. The Hub's role and operating procedures will be tested as part of this process to identify how it can work most effectively.

A priority for public health has been to refocus the portfolios of team members from highly specialist topics (eg focusing solely on stop smoking or obesity) to a model built on public health competencies covering skills such as needs assessment, equity audit and evidence building. The aim is that public health consultants will work in a responsive way across a range of complex agendas, able to flex their work programmes to where their knowledge and skills are needed for priority work eg the troubled families programme. They will retain specialist responsibilities but these will not define their roles, except for a few highly complex areas of work. Public health team members will have a portfolio of responsibilities based on work programmes, public health outcomes and some specialist topics.

There has been a change of political arrangements in Salford with a new elected mayor and mayoral team. There is now an assistant mayor – responsible for health and wellbeing, public health and the Integrated Commissioning Hub – who has been working within the new mayoral team and the wider city council to develop a shared understanding of public health development.

## Public health in partnerships for commissioning and delivery

Salford is harnessing collective leadership to improve health and wellbeing. Underpinning the Health and Wellbeing Board there are two programmes of work that support integration. One work programme sits with an Integrated Commissioning Board for Health and Wellbeing, which brings together the city council and GPs from the CCG. This board will shape a programme of integrated commissioning based on the joint strategic needs assessment (JSNA) that covers public health and social care across adults and children. It also has responsibility for overseeing the delivery of a number of current Section 75 agreements.

A further workstream under the Integrated Commissioning Board for Older People is developing an 'integrated care system' for older people encompassing:

- prevention and early intervention
- community health care
- social care
- acute care.

This programme is based on a holistic, individual approach rather than on conditions or services. In other words, a person-centred perspective, not focusing for example on diabetes or dementia or the aim of reducing hospital beds. This reflects the reality that people generally have a range of health and care needs rather than fitting neatly into any particular box.

Modelling the new way of working, public health specialists work closely with adult social care commissioning, NHS Salford CCG and Salford Royal Foundation Trust to integrate support to the programme through activity such as:

- refining trend data
- needs analysis
- building the evidence base
- consulting with older people on the outcomes that are important to them.

Facilitation and brokerage activity from public health, and the role of Director of Public Health (DPH) – which spans the council and CCGs – also contribute to the process of working on integration across a complex partnership structure.

Pilots on integrated care for older people are planned for year one (2013/14) to test out delivery options in two neighbourhoods, with agreed key outcomes and based on evidence about what works. Improvement measures for the programme have been selected from the three national outcome frameworks and are grouped under the headings:

- value for money
- user and carer experience
- clinical and social outcomes.

Roll-out across the borough would take place subject to an evaluation.

Salford operates a strong neighbourhood approach, with neighbourhood partnership boards that include GPs, councillors and public health. The JSNA now includes detailed local profiles for each of the eight neighbourhoods, providing an understanding of local needs within the context of borough-wide planning. The profiles have some straightforward recommendations to influence and support commissioning decisions at a very local level.

One integrated commissioning piece of work for the Hub is supporting delivery of the family poverty strategy, which was informed by the JSNA. One element of the strategy is to tackle the factors that result in poor health and economic outcomes for the poorest young people in Salford by piloting neighbourhood interventions. The work will use pooled budget principles to focus provision on a set of outcomes.

Salford is committed to developing a plurality of health and wellbeing providers. Recently a voluntary organisation – the Big Life Company – has been commissioned to deliver a range of level two health improvement services (structured brief interventions).

The operating model it proposes will develop capacity within the voluntary and community sector to support provision.

A web portal for health support is being developed to enable people to manage their own online account. This will support individuals and communities to self care/treat and access services more efficiently. It will enable services to engage with their clients virtually and reduce the need for face-to-face contact. Initial services to test the concept will be the lifestyle services for smoking, weight management and alcohol but these will be followed by other services including welfare rights, housing and children and early years. The portal will be driven by social marketing intelligence including a 'people like me' aspect which will point people to other relevant services once they have input sufficient basic demographic data

Salford also has a large scale change project to introduce brief frontline interventions 'making every contact count' (MECC). This is a major investment in training for frontline staff to enable them to make effective brief interventions and advise or refer on to the relevant services. All staff will complete an online self-assessment tool which will point them to the right training and ensure that all frontline staff meet an agreed set of competencies.

In the first six months several hundred staff have completed the assessment and gone on to complete the relevant training course. The MECC programme is also linked to work to ensure its sustainability through inclusion of brief intervention updates in mandatory training or induction and to incorporate the competencies into all job descriptions and specifications, so that they are routinely assessed as part of the job description review process.

Salford public health is continuing to work with the Greater Manchester Public Health Network on collaborative work across Greater Manchester – see Resource Sheet 7 'Deeper into the DNA'.

## Next steps

As well as safely managing the transfer of public health, important steps up to April 2013 and in the months beyond include:

- progressing integrated commissioning through proof of concept by supporting the family poverty delivery programme
- launching the web portal
- continued roll out of making every contact count.

## Contact

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## Website

JSNA neighbourhood profiles <http://www.partnersinsalford.org/healththeme-salford.htm>

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