**Job Description: Director of Public Health**

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| This generic job description is intended to assist employers in local authorities in establishing Director of Public Health posts in England. These are statutory Chief Officer appointments with executive responsibilities. These senior public health roles are for those who have completed higher specialist training in public health or equivalent and are on the GMC Specialist Register or GDC Specialist List in dental public health or the UK Public Health Register. Posts are normally open to appropriately qualified candidates from a variety of public health disciplines including medicine. Differences in the organisational details of how services are delivered in the UK should be reflected in the job description, but the criteria in the specimen person specification are the recommended minimum requirements for all posts. This provides a framework, but locality and post specific details should be added as indicated.The Faculty of Public Health (FPH) recommends that an outline job plan with indicated programmed activities should be attached to the job description and should include appropriate time for CPD, appraisal and revalidation and quality improvement including clinical governance. |
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| **Title:** | Director of Public Health |
| **Employing Organisation:** | Name of LA |
| **Accountable to:** | Professionally accountable to the Council (and the OHID/DHSC Regional Director of Public Health)Managerially to Chief Executive of [name of LA] |
| **Hours:** | Full time (normally 40 hours) |
| **Work base:** |  |
| **Salary:** |  |
| **Key Relationships:** | * Cabinet/Portfolio holder
* Senior Management Team
* Local NHS bodies
* UK Health Security Agency
* Office for Health Improvement and Disparities
* Health and Wellbeing Board
* Local Resilience Forum
* NHS England
* District/Borough Councils
* The public and the press
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1. **Job Summary**

The Director of Public Health is the system leader for improving the health and wellbeing of residents, reducing inequalities in health outcomes and protecting local communities from public health hazards (infectious diseases and environmental threats). As such, the Director of Public Health is a statutory chief officer of the authority and the principal adviser on all health matters to elected members, officers and partners, with a leadership role spanning health improvement, health protection and healthcare public health. Section 73A(1) of the NHS Act 2006, inserted by section 30 of the Health and Social Care Act 2012, gives the Director of Public Health responsibility for:

* all of their local authority’s duties to improve public health.
* any of the Secretary of State’s public health protection or health improvement functions that s/he delegates to local authorities, either by arrangement or under regulations – these include services mandated by regulations made under section 6C of the 2006 Act, inserted by section 18 of the 2012 Act.
* exercising their local authority’s functions in planning for, and responding to, emergencies that present a risk to public health.
* their local authority’s role in co-operating with the police, the probation service and the prison service to assess the risks posed by violent or sexual offenders.
* such other public health functions as the Secretary of State specifies in regulations.
* producing an independent annual report on the health of local communities.

In order to deliver their responsibilities on behalf of the residents of [LA name] the DPH will need to be a visible system leader in the health and wellbeing partnership arrangements. The DPH will be expected to use all the resources at their disposal to ensure that the local public health system is able to tackle the full range of determinants of health affecting communities in [LA name], to improve population and planetary health. Working with local communities, he/she should be able to inspire development of innovative solutions that support improvements in health and wellbeing and reduction in health inequalities whilst at the same time maintaining the confidence of Councillors and government.

1. **Description of the LA and the Public Health Department**

Insert description of local authority here.

1. **Job purpose and key responsibilities**

The fundamental purpose of the postholder is to provide the leadership to drive improvements in the health and wellbeing of the residents of [LA name] to reduce inequalities in health outcomes and working in collaboration with UKHSA to protect local communities from threats to their health through infectious diseases, environmental and other public health hazards. In delivering the key responsibilities described below, the postholder is expected to demonstrate a high level of expertise in the Faculty of Public Health Competencies (Appendix 1) and the person specifications (Appendix 2).

* Support the Chief Executive and Councillors in developing and delivering the Council’s strategic agenda.
* Be the chief officer and principal adviser on public health to the Council, local communities and local partners.
* Operate strategically as a member of the corporate management/executive board and across the Council influencing policy and practice.
* To deliver commission, and or deliver services which are effective, value for money and meet quality standards.
* To act as a leader across the local system of public services, influencing change and enabling a culture of continuous improvement in health and wellbeing, innovation and evaluation.
* Utilise the public health resources imaginatively and cost effectively across all domains of public health in order to improve health and wellbeing of local communities and reduce inequalities in health outcomes.
* Accountable for both the shaping and delivery of the Health and Wellbeing agenda taking account of the national agenda and benchmarking (using the national outcomes frameworks; public health, NHS and social care).
* Deliver an independent annual report on the health and wellbeing of local communities for publication by the [LA name], to stimulate debate and/or action by the Council and partners.

The person specifications for the post are set out in appendix 2. In delivering the responsibilities outlined above, the postholder and his/her team will undertake the following tasks:

1. **Strategic Leadership**
* Delivery of a system to support surveillance, monitoring and evaluation of health and wellbeing and inequalities in health outcomes of local communities (including an easily accessible Joint Strategic Needs Assessment System).
* Ensure all activity undertaken by the Council takes account of both, the need to reduce inequalities as well as the requirements of the Equality and Diversity Act.
* To ensure scientific principles are applied to assessing need, exploring interventions and assessing progress of the Council’s strategic agenda.
* Ensure as a core member of the Health and Wellbeing Board and in partnership with the wider [LA name], partners and the public, the development of plans to enable local communities become healthy, sustainable and cohesive.
* Ensure a programme of action (both within and outwith the Council) to impact on the wider determinants of health that will promote improvements in health and wellbeing of local communities and reduction in health inequalities.
* Provide assurance that the health protection system for local communities is fit for purpose.
* To work closely with Directors responsible for people (children, vulnerable communities and older people) to ensure to develop, implement and maintain a “fit for purpose” integrated strategy which meets the needs of local communities and is cogent with the national approach.
* Collaborate across organisational boundaries to ensure communities in [LA name] benefit from population health and care programmes (development of sustainable transformation plans 2016-20).
1. **Directorate Specific Accountabilities**
* To be an advocate for improving health and wellbeing and reducing health inequalities.
* Exercise the statutory responsibilities including the delivery of the mandated services.
* To advise [LA name] on its statutory and professional public health obligations.
* Work with the UKHSA Centre and NHS England to ensure local communities are protected from infectious disease threats (including food and water borne disease, pandemics, etc) and environmental hazards.
* Ensure the development and delivery of a credible plan to improve health and wellbeing of communities in [LA name] and reduce health inequalities.
* Ensure that the Council has implemented its EPRR responsibilities and through Co-chairing of the Local Health resilience Forum, that partner organisations (UKHSA, OHID, NHS England and the ICSs) have delivered their EPRR responsibilities.
* Work in partnership with ICSs and Directors of Social care to take responsibility for Population Health and Care; including oversight and promoting population coverage of immunisation and screening programmes
* Provide public health advice (the core offer) to ICSs supporting the commissioning of appropriate, effective (based on evidence), and equitable health services.
* Support the Health and Wellbeing Board to deliver its statutory duty to promote integration for the benefit of local communities
* Collaborate across local authority boundaries to ensure residents of [LA name] benefit from population health and care programmes (the Sustainable Transformation Plans which apply from 2016 to 2020).
1. **Resource Management**
* To be accountable for the budget including reporting on the use of the public health ring fenced grant.
* To manage Council resources (People, property, information and finance) imaginatively and efficiently.
* Manage public health staff and ensure that they are able to influence in such a way as to ensure health and wellbeing in its fullest sense is central to [LA name].
1. **Commissioning**
* Ensure services for improving health and wellbeing of local communities are commissioned within the Council policy for procurement and monitoring system and are responsive to the needs of the communities in [LA name] and over time.
* To set the framework for standards for commissioning and delivery; including the promotion of innovative approaches and appropriate risk management systems which are responsive to performance challenges.
* To ensure scientific principles of evaluation underpin all commissioning and delivery, of health and wellbeing services.
1. **Advocacy**
* Develop a constructive relationship with the media and the public, within the context of the Council Communications policy.
* To use the Faculty of Public Health, the LGA, the ADsPH, UKHSA and other channels to advocate for the public’s health.
1. **Management arrangements**

The Director of Public Health will be professionally accountable to the Council (and Secretary of State for Health through OHID/DHSC) and managerially accountable to the Chief Executive of the Local Authority. An initial job plan will be agreed with the successful candidate and reviewed annually.

The Director of Public Health will:

* Manage [insert number] staff (including trainees) (include details of line management duties, recruitment, appraisals, disciplinary and grievance responsibilities).
* Manage budgets [insert details].
* Be expected to take part in on call arrangements for communicable disease control/health protection as appropriate depending on local arrangements.
* Ensure appropriate management and support for Public Health Specialty Registrars.

*Insert organisation chart – detailing line manager, jobs on the same level and those jobs directly reporting to the post.*

The terms and conditions for the post are described in appendix 3 *(please note that there is no Appendix 3 attached to this specimen JD and it is for the local authority to include the appropriate terms and conditions)*.

1. **Professional obligations**

Professional responsibilities will be reflected in the job plan. The Director of Public Health will be expected to:

## Participate in the organisation’s staff and professional appraisal scheme and ensure participation of all staff members.

## Ensure quality improvement (and clinical governance) programmes are an integral component of the public health approach in the Council.

## Contribute actively to the training programme for Foundation Year Doctors/Specialty Registrars in Public Health as appropriate, and to the training of practitioners and primary care professionals within the locality. (<If the postholder designs and delivers core training, specify as applicable and give details of postholder’s involvement e.g. lead trainer, trainer on a module, develops training for others, etc>)

## Pursue a programme of CPD, in accordance with Faculty of Public Health requirements, or other recognised body, and undertake revalidation or other measures required to remain on the GMC/GDC Specialist Register with a license to practice or the UK Public Health (Specialist) Register or other specialist register as appropriate.

## Practise in accordance with all relevant sections of the General Medical Council’s Good Medical Practice (if medically qualified).

## Agree any external professional roles (Educational Supervisor, Appraiser, etc.) and the time required to deliver those roles with the Council.

**Wellbeing**

Effective local occupational health support (confidential, includes modalities of self-referral, promoted regularly at induction and when in post) e.g. The post holder should usually have access to the Occupational Health (OH) Department, (full address, telephone and email). The OH team should have access to a physiotherapist and psychologist, and the post holder may self-refer or be referred through their manager. The post holder should have access to counselling, including face-to-face, and well as legal and financial support and other wellbeing resources. Information about Occupational Health will be disseminated at the induction and regularly when in post to ensure the post holder has timely access to the details if help seeking is necessary.

Availability of local initiatives/resources that promote workforce wellbeing (for example, self- care, work-life balance, stress management, coaching/mentoring, peer group support).

**Work programme**

It is envisaged that the post holder will work XX programmed activities over XX days. Following appointment there will be a meeting at no later than three months with the line manager to review and revise the job plan and objectives of the post holder. The overall split of the programmed activities is 7.5 to be devoted to public health duties and 2.5 to supporting professional activities (as per the Academy of Medical Royal Colleges recommendation). The timetable is indicative only. A formal job plan will be agreed between the post holder and the line manager (usually the DPH) three months after commencing the post and at least annually thereafter.

These professional obligations should be reflected in the job plan. The post-holder may also have external professional responsibilities, e.g. in respect of training or work for the Faculty of Public Health. Time allocation for these additional responsibilities will need to be agreed with the line manager. A suggested draft timetable is below (delete if not required):

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Day** | **Time** | **Location** | **Work** | **Category** | **No. of PAs** |
| **Monday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Tuesday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Wednesday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Thursday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Friday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **On- call work** (if appropriate)  |  |  |  |  | XX |
| **Total PAs** | Public health duties  | XX |
| Supporting professional activities | XX |

**Appendix 1: Faculty of Public Health: competencies expected of all public health consultants / specialists**

**(Based on the 2022 PH Specialty Training Curriculum)**

All consultants irrespective of their background are expected to be proficient in the competencies set out below.

* 1. **Use of public health intelligence to survey and assess a population’s health and wellbeing**

*To be able to synthesise data from multiple sources on the surveillance or assessment of a population’s health and wellbeing and on the wider environment, so that the evidence can be communicated clearly and inform action planning to improve population health outcomes.*

* 1. **Assessing the evidence of effectiveness of interventions, programmes and services intended to improve the health or wellbeing of individuals or populations**

*To be able to use a range of resources to generate and communicate appropriately evidenced and informed recommendations for improving population health across operational and strategic health and care settings.*

* 1. **Policy and strategy development and implementation**

*To be able to influence and contribute to the development of policy and lead the development and implementation of a strategy.*

* 1. **Strategic leadership and collaborative working for health**

*To use a range of effective strategic leadership, organisational and management skills, in a variety of complex public health situations and contexts, dealing effectively with uncertainty and the unexpected to achieve public health goals.*

* 1. **Health Improvement, Determinants of Health, and Health Communication**

*To influence and act on the broad determinants, behaviours and environmental factors influencing health at a system, community and individual level to improve and promote the health of current and future generations. To be proactive in addressing health inequalities and prioritising the most vulnerable or disadvantaged groups in the population.*

* 1. **Health Protection**

*To identify, assess and communicate risks associated with hazards relevant to health protection, and to lead and co-ordinate the appropriate public health response. To understand how those risks associated with hazards relevant to health protection may be influenced by climate change and environmental degradation currently and in the future.*

* 1. **Health and Care Public Health**

*To be able to improve the efficiency, effectiveness, safety, reliability, responsiveness, sustainability and equity of health and care services through applying insights from multiple sources including formal research, health surveillance, needs analysis, service monitoring and evaluation.*

* 1. **Academic public health**

*To add an academic perspective to all public health work undertaken. Specifically to be able to critically appraise evidence to inform policy and practice, identify evidence gaps with strategies to address these gaps, undertake research activities of a standard that is publishable in peer*

*reviewed journals, and demonstrate competence in teaching and learning across all areas of public health practice.*

* 1. **Professional, personal and ethical development**

*To be able to shape, pursue actively and evaluate your own personal and professional development, using insight into your own behaviours and attitudes and their impact to modify behaviour and to practise within the framework of the GMC's Good Medical Practice (as used for appraisal and revalidation for consultants in public health) and the UKPHR’s Code of Conduct.*

* 1. **10. Integration and application for consultant practice**

*To be able to demonstrate the consistent use of sound judgment to select from a range of advanced public health expertise and skills, and to use them effectively, working at senior organisational levels, to deliver improved population health in complex and unpredictable environments.*

The DPH as a public health leader is expected to have both the technical expertise as well as the ability to use those techniques to both, lead and support the development of complex solutions to improve the health and wellbeing of local communities. In addition, they are expected to have skills and the attitudes to be able to present the results of applying their technical expertise so that they are understandable and stimulate actions by a range of individuals and organisations.

**Appendix 2: Person specification (Director of Public Health, LA name)**

**Competencies and other requirements**

|  |  |
| --- | --- |
| **Behaviours** | **Recruitment and selection** |
| **Leadership**Establishing and promoting a clear public health vision which is coherent with the business strategy and the political vision for the and consistent with Government policy and takes account of social and economic trends. This is about role modelling through their own actions the types of behaviours expected of others in creating a high performing public health culture.* Developing an effective PH team with appropriate skill mix to enable the Authority to deliver its full range of PH responsibilities.
* Developing effective relationships with elected members to ensure a coherent PH vision and operational plan.
* Work with fellow directors to enable/ensure public health perspective/principles underpin all aspects of LA delivery.
* Work with communities and media to ensure needs of local communities are made explicit and addressed by the H&WB.
* Deliver the independent report of the DPH in such a way as to compel all members of the H&WB to take action.
 | CV and Interview |
| **Community and population focus**It means working together to a common agenda and objectives with a shared purpose and common values, always looking for ways to improve access to services by communities and individuals. This is seen by:* Actively seeking to understand the communities that are served and promoting and demonstrating an active commitment to meet their needs.
* Setting new standards for innovation in commissioning and delivery of services that anticipate and exceed expectations.
* Engaging with a wide range of stakeholders and partners to gather and evaluate information and make collaborative judgements and decisions.
* Making timely and where needed, difficult decisions for the benefit of the people of [LA name].
 | Application formInterview |
| **Results Focus**Co-development of a model of health with local stakeholders (including local communities) and the metrics to support; taking account of Public Health Outcomes Framework, the NHS Outcomes Framework and the Social Care Outcomes Framework.This is seen by:* Acknowledging and working with ambiguity and complexity, making significant decisions where no precedents exist.
* Ensuring a best practice performance culture is developed and sustained.
* Setting, communicating and monitoring stretching organisational objectives and objectives.
* Pro-actively identifying corporate, directorate and service risks, and ensuring action is taken to mitigate them.
* Formulating risk management plans and creating a positive health and safety culture.
 | Interview |
| **Improvement and Change**Developing and sustaining a culture of innovation and creativity underpinned by evaluation, where employees are engaged and have the desire to do things better, more efficiently and effectively to improve performance. This is seen by:* Taking risks and moving into unchartered territory while taking accountability for results and failures.
* Welcoming the inevitable mistakes as part of the creative process.
* Suggesting the unthinkable to stimulate alternate ways of thinking.
* Focusing team performance on the achievement of outcomes that will maximise the resources available.
* Finding new ways of securing or deploying significant amounts of financial resource to meet new objectives.
* Advocating and role modelling the use of evaluation techniques to support innovation.
 | Interview |
| **People Development**Knowing and managing the strategic talent requirements for the organisation. It is about promoting and encouraging a culture where people focus on developing themselves and others to deliver improvement while developing careers. This is seen by:* Holding direct reports accountable for people development generally and specifically for releasing high performers for personal development.
* Articulating the many long-term benefits of talent management and developing the talent pools required for succession.
* Ensuring comprehensive workforce plans are in place.
 | Application form Interview |
| **Functional competencies*** Demonstrates detailed knowledge of methods of developing clinical quality assurance, quality improvement and evidence based clinical and/or public health practice.
* Full and high level of understanding of epidemiology and statistics, public health practice, health promotion, health economics and health care evaluation. Develops service practices and ensures appropriate application. Provides advice on the more complex instances.
 | Application formInterview |
| * Detailed knowledge and experience in driving and assisting in the management of change in a variety of settings, proactively seeking opportunities to create and implement improved service effectiveness.
 | Application formInterview |
| * Detailed knowledge of personnel management. Carries out effective performance management of staff and demonstrates understanding of policies related to pay, capability, disciplinary matters and grievances. Plans department activities and use of staff resources effectively. Participates in workforce planning and training needs assessments
 | Application formInterview |
| * Demonstrates knowledge of project management tools and techniques. Sufficient skill to develop and implement large scale projects, utilising and leading multi-skilled project teams.
 | Application form |
| **Qualifications**[The National Health Service (Appointment of Consultants) Regulations 1996 (legislation.gov.uk)](https://www.legislation.gov.uk/uksi/1996/701/regulation/4/made)* In line with legislation, inclusion in the GMC Full and Specialist Register with a license to practice/GDC Specialist List **or** inclusion in the UK Public Health Register (UKPHR) for Public Health Specialists **at the point of application.**
* *If included in the GMC Specialist Register/GDC Specialist List in a specialty other than public health medicine/dental public health, candidates must have equivalent training and/or appropriate experience of public health practice*
* Public health **specialty registrar applicants** who are currently on the UK public health training program and not yet on the GMC Specialist Register, GDC Specialist List in dental public health or UKPHR **mus**t provide verifiable signed documentary evidence that they are within 6 months of gaining entry to a register at the date of interview.\*
* If an applicant is UK trained in Public Health, they must ALSO be a holder of a Certificate of Completion of Training (CCT), or be within six months of award of CCT by date of interview
* If an applicant is non-UK trained, they will be required to show evidence of equivalence to the UK CCT
* MFPH by examination, by exemption or by assessment, or equivalent
 | **Recruitment and selection**Application form |
| * Must meet minimum CPD requirements (i.e. be up to date) in accordance with the Faculty of Public Health requirements or other recognised body
 | Application form |
| **Knowledge, experience and skills** |  |
| * Understanding of NHS and local government cultures, structures and policies
 | Interview |
| * Understanding of social and political environment
 | Interview |
| * Excellent oral and written communication skills (including dealing with the media) including to present to mixed audiences and the media
 | Application formInterview |
| * Practical experience in facilitating change
 | Application formInterview |
| * Budget management skills
 | Application form |
| * Understanding of the public sector duty and the inequality duty and their application to public health practice
 | Application formInterview |
| * The normal duties of the role may involve travel on a regular or occasional basis. It is a condition of employment that the role holder can exercise satisfactory travel mobility in order to fulfil the obligations of the role. For those journeys where an alternative form of transport is unavailable or impracticable the role holder will be required to provide a suitable vehicle
 | Application form |
| * This position is subject to a criminal records disclosure check
 | **YES** |
| * This is a politically restrictive position
 | **YES** |

\****\*Applicants going through the portfolio registration routes (GMC or UKPHR) are not eligible to be shortlisted for interview until they are included on the register. The six-month rule does not apply to these portfolio route applicants.***