FUNCTIONS OF THE LOCAL PUBLIC HEALTH SYSTEM

Introduction

This document sets out the local PH function in England. It was originally drafted by a working group led by Maggie Rae, FPH Local Board Member and Corporate Director of Public Health and Public Protection for Wiltshire Council, with help from Ruth Woolley, Frances Chinemana and many other Fellows of the Faculty. It has subsequently been reviewed by a working group comprising representatives from the different domains of PH practice and from Public Health England.

These functions are written with the public health system in England in mind. However we believe they are relevant to public health practice in other jurisdictions and we recognise further development will be required to ensure local compatibility in this regard.

Public health requires effective action by many different organisations and players. The balance of responsibility will vary from place to place, but the essential functions which must be assured in every locality remain constant. It is these functions which we have set out in this document,.

The local delivery of public health

The functions have been presented within the three domains of public health practice – health protection, health improvement and health services - plus the underpinning functions of public health intelligence, academic public health and workforce development that are integral to each of the three domains.

1. Health Protection

Action for clean air, water and food, infectious disease control, protection against environmental health hazards and emergency response

2. Health Improvement

Wide ranging action to improve health and wellbeing and to reduce health inequalities

3. Health Services

Action in service planning, commissioning and development, clinical effectiveness, clinical governance and efficiency (in support of the GP led Clinical Commissioning Groups)

4. Public Health Intelligence

Surveillance, monitoring and assessment of health and the determinants of health, plus the development of the public health evidence base and knowledge

5. Academic Public Health

Protect and promote evidence/knowledge base, evaluation, research

6. Workforce Development

Training and development for public health professionals, registrars and colleagues

1. HEALTH PROTECTION

Health Protection requires strong collaborative working between Public Health England (PHE), Local Authorities (LA), NHS England (NHSE)/Clinical Commissioning Groups (CCGs) as well as other external partners e.g. Animal Health, Health & Safety Executive etc. It is vital that partners work together to deliver the functions listed and make sure the system is safe.

Proa	Proactive prevention functions			Не	ealth Protection Functions
1.1	Outbreak prevention and control	•	Develop outbreak prevention and control plans	•	The development of plans and shared policies for the prevention and control of communicable disease, including disease-specific outbreak control plans including Tuberculosis and sexually transmitted infections. Analyse short and long-term risk in relation to actual or perceived major threats to health and wellbeing Establish close liaison with environmental health, microbiology and tropical diseases medicine Identify effective interventions and services to control major infections and diseases Provide expert advice and assistance to the NHS, Local Authorities and others on services to prevent and control communicable and environmental hazards
1.2	Emergency Planning	•	Ensure emergency and major incident preparedness	•	Prepare for emergencies including pandemic influenza Provide an active role in capability, contingency planning and resilience Be prepared for monitoring and responding to an increasing variety of infectious and environmental hazards and risk of deliberate harm to the public Co-ordinate and support planning, training and exercises across the NHS and other responding organisations Set standards for NHS preparedness Take a lead role in the local Health Resilience Partnership, supporting the development of comprehensive multi agency

					plans for the anticipated threats to public health
R	eactive acute function	S			
1.3	Risk management	•	Communicate advice on threats to health and act to reduce risks	•	Provide advice and challenge, especially advising on environmental threats including pollution, noise and contaminated land Communicate advice on risks (particularly with the public) on issues considered or perceived to be major threats to population health, wellbeing or safety Take on the role of Proper Officer within the local authority with a legal duty to remove health risks from the public Contribute to work on contact tracing Lead epidemiological investigations of priority problems affecting health, wellbeing and safety Provide answers to specific questions about health risks associated with exposure and the identification of causative agents of outbreaks and incidents
1.4	Outbreak	•	Local infection control work Outbreak and incident control	•	Plan, implement and review multi-agency or multi sectoral measures to prevent, ameliorate or control risks to population health, wellbeing and safety Local infection work including monitoring and providing advice on the containment of Health Care Acquired Infections (HCAI) Take an active role on the hospital infection control committee (HICC) Liaise closely with environmental health Provide an expert 24/7 public health response to incidents and outbreaks arising in the local area that place the health
	management			•	of the public at risk Chair the outbreak or incident control team
Both	proactive and reactive				
1.6	Monitoring	•	Monitor and advise on risks to	•	Provide advice on novel threats to health

	threats	health	 Proactively interpret data and use information systems to monitor disease and disease trends Identify current and emerging disease risks in the UK population and the impact of this locally 	
1.7	Immunisation	Advise on immunisation and vaccination	 Implement and monitor immunisation and vaccination policies Provide evidence-based advice on immunisation and the benefit and risk of implementing new vaccine programmes 	:S

2. Health Improvement

Healt	Health Improvement Function		Qu	ality Function	
2.1	Needs assessment	•	Strategically assess the health and wellbeing needs of the local population	•	Advise the Health and Wellbeing Board on the development of the Health and Wellbeing Strategy based on the assessed needs of the population and proven interventions to improve health Lead the Joint Strategic Needs Assessment to set strategic direction; provide a vision for health and wellbeing; and communicate it effectively to a wide range of stakeholders including local communities Identify where new policies, strategies and initiatives are needed to improve the populations' health and wellbeing, and reduce health inequalities
2.2	Programme development	•	Commission appropriate and effective health and wellbeing initiatives	•	Lead on the development, implementation and evaluation of health improvement programmes across organisations, partnerships and communities to improve population health and wellbeing and reduce health inequalities Work closely with council colleagues, including planning departments to identify areas which need a public health input Lead work to tackle specific issues based on local needs assessment such as childhood obesity and smoking, Secure, prioritise and allocate resources to achieve optimal impact on population health and wellbeing outcomes Create and sustain infrastructure and cultures that enable strategic

			 direction and vision to be realised Lead the local implementation of national public health policy, making appropriate choices about the pace of implementation
2.3	Partnership working	Build strategic partnerships	 Develop healthy, sustainable and cohesive communities through the Health and Wellbeing Board, the wider Council and partners Build and sustain strategic alliances and partnerships within a political environment Develop good relationships with councillors, senior council staff, council colleagues, members of the CCG, members of the Local Area Team and Public Health England, and members of both the voluntary and private sectors Maximise leadership and partnership working skills to improve population health and wellbeing, balancing the interests of organisational, political and multi-agency agendas and priorities Effectively use Health Impact Assessments to shape policies affecting the wider determinants of health Effectively use the powers of the local authority by-laws in improving health
2.4	Community Development	Enable and support communities	 Ensure processes and infrastructure are in place to enable and support communities in the articulation of their views and concerns about health and wellbeing Utilise a range of community development approaches and techniques including surveys, focus groups, participatory appraisals and consultation processes to engage with communities on the health and wellbeing agenda
2.5	Advocacy	Act as advocates for health	 Use a full range of communication tools including the media to communicate risks to health and wellbeing from lifestyle, physical, social and environmental factors Lead local, targeted campaigns to improve health Assure continuity and quality of communication of the key health messages to both the public and professionals (health and nonhealth)
2.6	Sustainability	Build sustainable capacity and resources	 Lead on the sustainable development of capacity and capability to improve population health and wellbeing Plan and implement training programmes to build public health

				capacity across a wide range of professional groups and sectors
2.7	Evidence and	Develop the evidence and	•	Use and develop the evidence-base for health improvement
	Evaluation	evaluate the programmes		programmes
			•	Evaluate local health improvement programmes

3. Health Services

Healt	h Services Public Heal	th Function	Quality Function
3.1	Health service commissioning	Effective and cost effective health services commissioning	 Support commissioning groups in their work with the Health and Wellbeing Board, NHS Commissioning Board and Local Authority Ensure that commissioning groups are able to contribute to the Joint Strategic Needs Assessment and to the agreement of overall priorities for health, health services, health improvement and social care Provide specialist public heath advice to commissioners on priorities for health and social care spending and the appropriate configuration of services within and between local authorities Develop care pathways, policies and guidelines to improve health outcomes Assess health and social care need, utilisation, demand and outcomes Influence political and partnership decision-making to maximise the application and use of evidence to improve health outcomes Promote a population health prevention approach within health and social care services
3.2	Health and social care service prioritisation	Prioritisation of health and social care services	 Provide Public Health strategic leadership to the integration of health and social care services Provide explicit, evidence-based advice to ensure commissioning groups are well informed Objectively balance needs and resources to ensure that the whole population gets the best value for money Evaluate clinical and cost effectiveness of health and social care interventions to inform decisions Produce high quality evidence summaries for exceptional treatment

3.3	Equity	Ensure equity of service provision	 requests using ethical and legal principles Critically appraise business cases of proposals for new service developments or configurations. Support the commissioning of appropriate, effective and equitable health care from the NHS locally Monitor access and use of health and social care services Undertake health equity audits and equity impact assessments of services Plan services for vulnerable groups using the appropriate evidence
			 base Address access issues and their impact on population health, wellbeing and inequalities
3.4	Quality	Ensure clinical governance and quality improvement	 Set and maintain a culture of continuous evidence-based improvement Agree specifications and standards for services which clearly identify the clinical, quality and productivity outcomes Monitor and audit services to ensure delivery and to improve outcomes Monitor performance, identify underperforming providers and make recommendations Generate information to support quality assurance Benchmark variations in referrals and surgical procedures against NICE guidance Communicate and disseminate information that improves practices or services Provide impartial interpretation and advice on the performance of primary care and support commissioning groups to improve quality of primary care
3.5	Evaluation	Provide healthcare audit, evaluation and research	 Provide independent evaluation of services against NICE and other guidance and utilising relevant process and outcome data, in collaboration with local higher educational institutions Based on the evaluation of evidence, recommend any changes including the discontinuation of services shown not to be costeffective

3.6	Safety	Ensure patient safety in any health-related services provided by the local authority	 Address access issues and their impact on population health, wellbeing and inequalities Promote research where there are gaps in evidence or knowledge Share best practice through publication and dissemination Ensure patient safety in commissioned services Participate in risk analysis and interpretation of data in incidents and serious untoward events Identify failures and implement procedures to address them Provide input into the management of incidents to reduce risks to the public Learn from events and improve systems to prevent them from occurring in future
3.7	Healthcare development	Contribute to healthcare development and planning	 Lead the development of population healthcare, influencing local systems to increase uptake of screening and immunisation programmes and integrate prevention in to healthcare pathways Review new healthcare developments for effectiveness and affordability
			 Analyse costs, benefits and risks of new services, technology and processes Engage relevant communities in the development of services Contribute to service frameworks, specifications and models of care with reference to need and evidence, including treatment thresholds Plan and develop services across programme areas and specialities Provide input into the planning of services for vulnerable groups, ensuring fair access and addressing inequalities
3.8	Leadership	Leadership for healthcare	 Lead through the development of pro-active and collaborative relationships with clinicians, social services, local authority colleagues, the voluntary sector and the private sector Provide input to the development of solutions and innovations to address challenges faced by the local health economy Provide input to commissioning, prescribing, ad hoc enquiries and working groups on health care Provide a strategic view of future development in health care Lead and facilitate changes in services

	•	Lead across organisations, ensuring that they work together to take
		on the challenge of priorities, applying and sharing good practice

4. Public Health Intelligence

Public	: Health Intelligence F	unction	Quality Function
4.1	Health needs	Assess the health and health needs of the local population	 Assess and disseminate the health needs of the local population by carrying out Health Needs Assessments Identify the causes and distribution of ill health and interpret the results, reporting on their implications Produce a Joint Strategic Needs Assessment that provides a comprehensive analysis of the local area, drawing on a wide range of data sources, including qualitative information Produce the DPH Annual Report, an independent report on the health of the population, progress on improving health and reducing inequalities, with recommendations Map health needs against health indicators
4.2	Health outcomes	Interpret intelligence about health outcomes	Provide robust, quality assured intelligence about outcomes using both quantitative and qualitative data
4.3	Analysis	Carry out Health Equity Audit s and Health Impact Assessments	 Translate the findings of health needs assessments into appropriate: recommendations for action policy decisions and service commissioning and delivery Draw valid inferences from HIAs to influence the setting of policy and priorities, and the performance of health systems Develop and apply robust prioritisation frameworks
4.4	Information sharing	Ensure access to health intelligence	 Ensure a document library that includes both national and local sources of policy, is made accessible across the public sector Ensure best evidence and evidence of effectiveness are made available to all decision makers Develop tools and frameworks to help people analyse information robustly and consistently
4.5	Quality	Improve quality of health data	Ensure intelligence gathering is based on quality standards and clinical governance

	•	Continually review the health data and intelligence systems to ensure	
		fitness for purpose	

5. Academic Public Health

Academic Public Health Function			Quality Function
5.1	Advocacy	Advocacy to uphold evidence- based public health programmes	 Advocacy/ speaking out to protect evidence-base when actions are being taken that are counter to the evidence base. Making sure that decision makers are aware of the (health related) evidence base Research advocacy role outside "health" to other professionals in local authorities (for eg in social care and education)
5.2	Research	Collaborate on public health research and development with local higher educational institutions	 Identify priorities for public health research Identify new areas for research into innovative solutions to health problems in collaboration with local higher educational institutions Make recommendations on how the evidence base can be improved through research and development Work with local higher educational institutions to create possibilities for relevant high quality research
5.3	Application of public health evidence	Application/translation of public health information and research (evidence-base)	 Translate complex contemporary research results into local information and knowledge that can improve population health and wellbeing Draw appropriate conclusions and make recommendations from research findings
5.4	Evaluation	Evaluate health services and public health interventions	 To seek rigorous and independent evaluation when new approaches are being implemented Apply a population perspective to evidence so that issues can be set in a context of incidence, prevalence and marginal utility Use one or more research methods to support work undertaken in a service or research setting, disseminating findings appropriately Identify research needs based on patient or population needs and in collaboration with relevant partners (such as local higher

			educational institutions)
5.5	Teaching	Promote public health teaching and training	 Ensure all members of the public health team are able to critically appraise evidence, apply research findings to the local population and evaluate local public health interventions Contribute to the education and training of other staff, medical students and colleagues Close working with relevant local higher education institutions Supervise junior colleagues in a one-to-one project mentorship Conduct group tutorials on research and academic topics Develop teaching materials and contribute to the development of the public health curriculum

6. Workforce Development

Workforce Development Function			Quality Function
6.1	Leadership	Provide leadership for the professional development of the public health team	 Realise the full potential of the cross council leadership role of the Director of Public Health Provide strategic leadership for improving health and tackling health inequalities Maximise potential of staff to use their skills and knowledge to best effect Ensure that those who work in the field develop and maintain the necessary knowledge, skills and attributes to practise effectively and work towards improving the health of the population
6.2	Capacity building	Ensure access to learning opportunities for all public health staff	 Ensure access to training and education opportunities in various public health settings Provide opportunities for learning outcomes in key areas of public health Support the revalidation of public health professionals, meeting the minimum requirements of the statutory regulators Support all public health staff in the completion of their continuing professional development Ensure comprehensive processes are in place for the professional appraisal of all public health professionals

6.3	Specialty Training	Support the training of specialty	•	Ensure that the local authority has achieved and maintains
		registrars		accreditation as a training location
			•	Ensure that the organisation meets the standards required for
				specialty training as sought through the annual reporting
				mechanism and Quality Panels
			•	Provide a rich and diverse training experience for registrars