



Department  
of Health



Public Health  
England

## **Providing Early Support to Local Authorities with Performance Challenges in Public Health and Managing the Risk of Under Performance**

### **Introduction:**

The Public Health function in local authorities sits within the context of councils' wider responsibilities to promote the economic, social and environmental well-being of their areas and the wider public health system, which includes services provided and/or commissioned by Public Health England and the NHS.

This paper describes arrangements for identifying councils that may be facing performance challenges in public health in order that the sector (in this paper the term "sector" means local government sector) can offer early support for improvement.

It is set within the overarching approach for sector led improvement set out in "Sector led improvement in local government" published by LGA and endorsed by ADASS, ADCS and SOLACE.

The paper is therefore limited in scope and only describes this key element of a larger programme for public health quality improvement led by PHE through the Public Health System group.

### **Background:**

The following key principles underpin the approach to sector-led improvement in local government:

- councils are responsible for their own performance and improvement and for leading the delivery of improved outcomes for local people in their area
- councils are primarily accountable to local communities (not government or the inspectorates) and stronger accountability through increased transparency helps local people drive further improvement
- councils have a collective responsibility for the performance of the sector as a whole (evidenced by sharing best practice, offering member and officer peers, etc)
- The role of the LGA is to maintain an overview of the performance of the sector in order to identify potential performance challenges and opportunities – and to provide tools and support to help councils take advantage of this new approach.

"Sector led improvement in local government" set out a comprehensive offer to help councils take advantage of this new approach.

How the LGA works with the sector (and others, including Government Departments and the Inspectorates) to identify the risk of poor performance and offer preventative support is a small but important part of the overall improvement offer.

The high level arrangements for identifying councils facing potential performance challenges are set out at Appendix 2, **attached**. These arrangements position the LGA's regionally based team of Principal Advisers as the focal point, within the sector, for gathering information and intelligence about councils in their areas, including identifying those which might be facing performance challenges across the range of council services and for coordinating the delivery of improvement support.

Principal Advisers' main focus is around leadership and corporate governance (because experience demonstrates that difficulties in these areas can often lead to wider service issues) but their remit spans the range of local government services and they work closely with our lead and regional member peers, existing sub-national sector owned improvement organisations, etc.

In addition to those identified above, the approach to managing risk is based on the following principles:

- the purpose of the arrangements is always and only to be in a position to offer improvement support at the earliest possible stage and so prevent poor performance and possible intervention. The arrangements are not for the purposes of making judgements;
- effective arrangements are not susceptible to linear approaches characterised by “ladders of intervention” or “tipping points” which were elements of the Government's previous approach to performance management;
- effective arrangements depend on clarity about the overall approach and, in particular, the quality of the relationships developed between key players, especially the ADPH regions, the LGA Principal Advisers and PHE Centre/Regional Directors.

The remainder of this paper therefore provides a high level description of key roles and responsibilities. It does not attempt to prescribe in detail what should be done – but instead to provide a broad framework and sufficient flexibility to enable trusted relationships to be developed as appropriate in each ADPH region.

The arrangements for managing risk will need to be kept under review by the LGA Improvement and Innovation Board working with the political and partnership structures in public health.

### **Brief role descriptions:**

#### **Lead Member:**

The lead member may be a member of the Council's Executive and/or chair of the Health and Wellbeing Board and have political responsibility for the leadership, strategy and effectiveness of local authority public health services.

He/she will have a key role in defining the local vision and setting political priorities for public health in the light of the needs of the area and in the context of the broader political context of the Council.

The lead member is responsible for ensuring high standards in delivery of the council's statutory public health functions. He/she will work closely with other local partners to improve outcomes and will regularly review performance in partnership with the Director of Public Health.

### **Chief Executives:**

As Head of the Council's paid service the Chief Executive works closely with local politicians to provide strong and visible leadership, ensure clarity about organizational objectives and the effective allocation and use of resources to achieve them. As such Chief Executives will expect to be kept informed of potential significant challenges in public health and will want to contribute to solving them.

SOLACE Statement on the Role of the Chief Executive October '11  
[http://www.solace.org.uk/library\\_documents/TheRoleOfCEX\\_111007.pdf](http://www.solace.org.uk/library_documents/TheRoleOfCEX_111007.pdf)

### **Directors of Public Health:**

The Department of Health guidance on the role of the Director of Public Health (DPH) was issued in 2013.

<https://www.gov.uk/government/publications/directors-of-public-health-role-in-local-authorities>

Within the specific context of sector led improvement in public health, individual Directors have the key managerial responsibility for the performance and improvement of public health services in their authority.

The underlying principle for ADPH is that each DPH is self-aware of the performance of public health in their council. In achieving this we expect Directors will wish to consider how they can utilise:

- Local performance information (including that provided by PHE) and sector owned tools such as LG Inform to facilitate the comparison of performance with other areas;
- regular self-assessment and the opportunity to report to and engage local people;
- challenge and support from sector peers.

This activity provides the basis for improvement, which is best achieved when the council's approach to delivering good outcomes in public health is supplemented by taking collective responsibility for improvement, through sharing good practice and peer challenge led through ADPH regions.

## **ADPH regional network:**

The ADPH regional networks are a key mechanism for delivering the model of sector led improvement in public health. It is the mechanism through which Directors voluntarily work together as peers to support each other's improvement.

Each region is expected to deliver their locally developed sector led improvement plan. This work will be led by the ADPH regional network.

Some regions have already developed a strong sector led improvement programme whereas others are just beginning to develop an approach. LGA, ADPH and PHE will work with regions to support their development.

Where there appears to be the potential risk of underperformance within public health then offers of support will be arranged through the ADPH regions and LGA subject to available resources.

If there is evidence of a continuing and significant risk to performance, this will be shared with the council concerned and with the LGA Principal Adviser so that linkages can be made to any wider improvement activity.

## **ADPH Board:**

Where the risk of underperformance involves complex or sensitive issues it may be appropriate for the ADPH Board to take the lead for ADPH, following consultation with the ADPH Council members for the region and LGA Principle Advisers.

The ADPH Board will treat any and each circumstance on a case by case basis.

## **Principal Advisers (PAs):**

PAs are the focal point, within the sector, for gathering information and intelligence about councils in their areas, including identifying those which might be facing performance challenges across the range of council services and for coordinating the delivery of improvement support. (The intention, in positioning PAs as the focal point for discussions, is to enable connections to be made between performance challenges in public health and any wider challenges an individual council might be facing and to ensure that councils experience a "single conversation" about performance and support from the sector).

They do this through:

- analysis of published quantitative performance data
- receiving and utilising feedback from the wider engagement with councils, for example the results of a Peer Challenge
- receiving intelligence gathered from others as appropriate (eg government departments, service specific inspectorates).
- gathering qualitative information about the performance of councils in their areas.

Where a Principal Adviser becomes aware of a council facing performance challenges in public health he/she will liaise with the ADPH Council members for the region to verify the nature of the concern and explore any support already being provided, the prospects for improvement and any potential future support needs.

## **LGA Community Wellbeing and Improvement and Innovation Boards:**

The LGA Community Wellbeing Board provides political oversight of public health issues, and the provision of support. It does so in the context of the strategic oversight of all the LGA's improvement activity provided by the LGA Improvement and Innovation Board.

## **Public Health England:**

One of the functions of PHE is to enable the public health system to maintain the capability and capacity to tackle today's public health challenges and so PHE has an important role in nurturing and supporting the local public health system; maintaining an overview of the whole system's progress in implementing the Public Health Outcomes Framework and a special responsibility for developing the wider public health workforce. PHE has a number of statutory duties to fulfil in its work on supporting the local public health system including its role in the appointment of DsPH and in professional revalidation of consultants.

Directors of Public Health are the principal advisers on health to their local authorities, and PHE provide essential specialist support to DsPH and local government more generally. The role of professional public health advice for local public health systems is a shared responsibility between PHE and DsPH and therefore necessitates strong and close working arrangements between the two to maximise benefits for local communities.

PHE supports the regional ADPH networks in providing the necessary data and intelligence for gauging performance against PH Outcomes Framework and other relevant outcomes. In addition, PHE can support Local Authorities in accessing the evidence of what works, why it works and how it can be applied locally through identification of good practice, its dissemination and evaluation of actions and interventions undertaken locally. PHE can also support Local authorities by providing benchmark data on spend across the various categories of public health activities.

## **DH Deputy Directors (DD) in Regions:**

Deputy Directors in the regions are civil servants in the Department of Health and as such have responsibility to Ministers. While not part of the sector they have key relationships with sector partners especially DPH and contribute to sector led improvement. It will be important that there is close liaison between DDs, Principal Advisers (PAs) and ADPH Regional Leads. If Deputy Directors have concerns about the performance of particular councils within their region then they should, as a minimum, share those concerns with the appropriate ADPH Regional Leads and the appropriate Principal Advisor. It is important that PA's, ADPH Regional Leads and DH DDs have a shared understanding of the nature of any challenges and the improvement support being provided.

Ultimately Ministers retain the right and statutory powers to intervene however, it is important that the sector should be provided with an opportunity to address any concerns about a particular council before any form of intervention is invoked, however, there may be circumstances where intervention is determined as urgent and necessary.

In the same way that the LGA has committed to and is meeting regularly with DCLG to enable DCLG to share any concerns they have about particular councils and for the sector to provide an opportunity to address those concerns, we envisage similar mechanisms being established with DH about public health.

## **Appendix 1**

### **The ADPH Model for sector led improvement**

As leaders for public health ADPH is fully committed to sector led improvement as the model for improving health outcomes for all citizens. Sector-led improvement is not inspection or regulation. Its methods are collaboration, peer support and challenge and not judgement or performance management.

- ADPH supports the principles set out in LGA's "Taking the Lead":
- Councils are responsible for their own performance and improvement and for leading the delivery of improved outcomes for local people in their areas.
- Councils are primarily accountable to local communities (not government or inspectorates) and stronger accountability through increased transparency helps local people drive further improvement.
- Councils have a collective responsibility for the performance of the sector as a whole.
- The role of the LGA is to maintain an overview of the performance of the sector in order to identify potential performance challenges and opportunities and to provide tools and support to help councils take advantage of this new approach.

The underlying principle for ADPH is that each DPH should be fully aware of the performance of public health in their area. This provides a baseline for improvement, which is best achieved when a council's approach to delivering good public health outcomes is supplemented by collective responsibility for improvement, through sharing good practice and peer challenge, through ADPH regional networks.

DsPH will work collaboratively as peers to support each other's improvement. They will bring together local and national support where this is necessary and available. They will make full use of published information and use an evidence based approach. Transparency will be encouraged.

ADPH is committed to respond when significant underperformance of public health functions within councils is identified. Within available resources, ADPH will arrange offers of support for improvement through the relevant ADPH regional network.

1. If concerns about a council public health function are identified through SLI, ADPH will share these with the relevant DPH.
2. If there is evidence of continuing significant performance risk, ADPH, through the regional lead for SLI, will share this with the regional LGA Principal Adviser, to provide context and ensure any council wide issues are identified.
3. Where the risk of significant underperformance involves complex or sensitive matters, the ADPH Board will take the lead for ADPH.

4. ADPH will not make judgements about council (or DPH) performance. ADPH may contribute information towards a judgement through engagement in peer challenge or where there is evidence that individuals in vulnerable situations are at risk. ADPH will advise the LGA Principal Adviser in exceptional circumstances where performance risks could lead to review by the regulator.

Through close working with the LGA, PHE and DH, ADPH will develop ground rules for sharing information and intelligence, based on the following principles:

- The individual council and DPH will be aware that information is being shared.
- Any concerns will be specific and evidence based.
- Information is treated in confidence and not shared more widely than necessary to address any issues.

## **Appendix 2**

### **Managing the risk of significant underperformance:**

Significant underperformance at a service or corporate level is likely to have a detrimental impact on local people and localities, the reputation of a council and for local government as a whole.

The sector wants councils to feel able to voluntarily signal their need of support and to seek it from sector controlled improvement activities and bodies at national and where appropriate, regional level so that improvement support can be put in place and as a result, help prevent specific incidences of significant service or corporate underperformance and in extreme cases, avoid government intervention.

We have worked with councils to develop an agreed and effective way of understanding where councils are facing significant underperformance challenges and have taken advice on this from a variety of interested independent bodies (including CIPFA, the Audit Commission, National Audit Office, SOLACE, ADCS, ADASS and ADPH).

In summary our approach, is as follows:

- Our team of principal and senior advisers gather qualitative information about the performance of councils in their areas and act as the key point of contact between councils and the LGA. They work with and are supplemented by our lead and regional member peers, who are drawn from local councils and make use of political networks.
- The principal advisers are supported with feedback from our wider engagement with councils, for example the results of a Peer Challenge, analysis of published quantitative performance data and intelligence gathered from others as appropriate (eg government departments, service specific inspectorates).
- Where information and intelligence is shared about performance challenges, the purpose will, in all cases, be to enable timely, appropriate and effective support to be offered, in accordance with the following general principles:
  - the individual council will be aware information is being shared;
  - any concerns should be specific and evidence-based;
  - information is treated in confidence.
- Where the information and intelligence gathered appears to identify councils facing significant performance challenges and a potential serious concern, the principal adviser will make contact at the earliest opportunity with the authority involved. How he/she approaches the council and the level of contact will depend on the circumstances and relationships in each case, but would normally be at leader/chief executive level.
- Emerging best practice suggests that where the level, type and extent of support warrants it, (typically signalled by the need to establish a formal Improvement Board) codifying the approach to be taken, is essential. Whilst a number of common characteristics can be identified as being associated with significant underperformance, few such situations are identical. Therefore a bespoke 'Terms of Engagement' will be created on a case-by-case basis, setting out the approach to be taken.