

# WIRRAL COUNCIL

## THE EMPLOYMENT AND APPOINTMENTS COMMITTEE

27 MARCH 2013

<b>SUBJECT:</b>	<b>PUBLIC HEALTH TRANSFER</b>
<b>WARD/S AFFECTED:</b>	<b>ALL</b>
<b>REPORT OF:</b>	<b>CHIEF EXECUTIVE</b>
<b>KEY DECISION?</b> <i>(Defined in paragraph 13.3 of Article 13 'Decision Making' in the Council's Constitution.)</i>	<b>NO</b>

### 1.0 EXECUTIVE SUMMARY

- 1.1 This report provides an update for on the transfer of employees from Public Health to the Council on 1 April 2013. Under the agreement of the transfer order there is a requirement to formally confirm the transfer of the Public Health staff to the Council. This also has to be completed via a completed assurance statement to the People Transition team in the Department of Health, who will sign of the Transfer Scheme on behalf of the Secretary of State.
- 1.2 This report asks Members to confirm their agreement to transfer the relevant NHS staff into the Council.

### 2.0 BACKGROUND AND KEY ISSUES

- 2.1 The Health and Social Care Act 2012 provides the Secretary of State with the power to transfer staff from and to bodies listed on Schedule 23 – including from NHS bodies to Local Authorities. The schemes contain “core” clauses effecting transfer of staff on existing terms and conditions, plus pensions provisions.
- 2.2 Cabinet on 21 June 2012 agreed that the Director of Public Health took responsibility for Performance Management across the Council, including the line management arrangements for employees. It was also agreed that that Director of Public Health took responsibility for a consistent approach to commissioning and procurement.
- 2.3 Following the Cabinet resolutions secondment arrangements were put in place for the Director of Public Health and the Head of Commissioning and Performance to enable them to directly manage Council employees.
- 2.4 Cabinet and Employment and Appointments Committee on 20 December agreed that the Director of Public Health would in the new management structure be the Director of Public Health and Head of Policy and performance.
- 2.5 Public Health employees have been working in shadow form from October 2012, under a memorandum of agreement, so that the Council had the opportunity to understand the responsibilities in more depth, and also so that Public Health staff could develop a good understanding of how the Council worked.

### **3.0 CURRENT POSITION**

- 3.1 A Public Health Transition Steering Group was established, in December 2011, and had representatives of both the sending and receiving organizations within the group. Membership consists of staff representatives, finance staff, human resources and trade union representatives. The Transition Steering Group are responsible for ensuring a robust transfer of systems and services and delivering Public Health responsibilities during transition and preparing for 2013/14. There were a number of workstreams developed which included:
- HR
  - Finance
  - Commissioning
  - Facilities and IT
  - Communication and engagement
- 3.2 On 17 May 2012, the Department of Health and Local Government Association confirmed that the staff performing public health functions who had access to the NHS Pension scheme on 31 March 2013, would retain access to the pension scheme, on transfer from the primary care trust to the Local Authorities.
- 3.3 From April 2013, the budget for Public Health moves to the Local Authority with a 2 year budget provision confirmed. The budget has been discussed with the Head of Policy and Performance and Director of Public Health and the Director of Finance.
- 3.4 Briefing sessions for employees have been held with Human Resources and Organisational Development to introduce the support and training offer available for employees. Additionally, welcome sessions for Public Health colleagues who were moving over to the Council were held in October 2012. The sessions were 1 hour long and were opened by the Chief Executive and the Leader of the Council. The sessions provided knowledge of the Council's constitution and history, and also gave an introduction to the Council, with a tour of the Town hall included.
- 3.5 A total of 55 people will transfer to the Council on 1 April 2013; the employees also include the 2 secondment arrangements in place. The grades for these employees range from NHS Pay Band 3 (£12,044) to Pay Band 8 Range D (£86,240) which is the Director grade.

### **4.0 POST TRANSFER ARRANGEMENTS**

- 4.1 All transferring staff will retain access to the NHS pension Scheme (NHSPS) unless they voluntarily choose to move posts, in which they will then be transferred to the Local Government Pension scheme (LGPS).
- 4.2 A detailed Training and Induction plan has been developed in conjunction with the Head of Policy and Performance and Director of Public Health and the Deputy Director

of Public Health. The training programme includes; Information on the structure of the Council, Governance arrangements (Understanding of Council's Committee and reporting cycle including deadlines for submitting papers, Role of the Improvement Board), workshops on "Working in a Political Environment", personal and Managerial development and practical issues.

## **5.0 RELEVANT RISKS**

- 5.1 There is some uncertainty around the budget provision after the initial 2 year period, which may lead to implications for staff and the Council. It is not possible at this time to speculate as to what those implications may be.

## **6.0 OTHER OPTIONS CONSIDERED**

- 6.1 None

## **7.0 CONSULTATION**

- 7.1 Full consultation with staff reps and Trade Unions has taken place throughout the transition process with group meetings, staff briefing and one to one meetings. All consultation feedback and questions have been considered and responded to. Staff reps have been part of the Public Health Transition steering group and have had the opportunity to raise issues or feedback any concerns they had with the processes.
- 7.2 The Council has written to the Public Health confirming the formal measures they will be implementing post transfer, this includes a change in the effective payment of salaries.

## **8.0 IMPLICATIONS FOR VOLUNTARY, COMMUNITY AND FAITH GROUPS**

- 8.1 None

## **9.0 RESOURCE IMPLICATIONS: FINANCIAL; IT; STAFFING; AND ASSETS**

- 9.1 Employees within the transfer schedule will transfer to the Council on 1 April 2013. The budget for Public Health moves to the Local Authority with a 2 year budget confirmed. Further resource implications (if any) are not known at this time, but there may be an impact dependant on future provisions of budgets after 2 years.
- 9.2 The Council will receive a grant to cover the costs of its new public health responsibilities. For 2013/14 this will total £25.7 million and will rise to £26.4 million in 2014/15.

## **10.0 LEGAL IMPLICATIONS**

- 10.1 Where functions are transferring from the PCT to the local authority, both the receiver and sender organisations have a responsibility (a statutory responsibility where the Transfer of Undertakings (Protection of Employment) Regulations 2006 (TUPE) applies) to inform and consult representatives of employees affected by transfer or potential transfer situations.

## **11.0 EQUALITIES IMPLICATIONS**

11.1 Has the potential impact of your proposal(s) been reviewed with regard to equality?

(a) No – the transfer is taking place Nationally

## 12.0 CARBON REDUCTION IMPLICATIONS

12.1 None

## 13.0 PLANNING AND COMMUNITY SAFETY IMPLICATIONS

13.1 None

## 14.0 RECOMMENDATION/S

14.1 The Committee confirms agreement of the transfer of the 55 relevant NHS staff, as outlined in the report.

14.2 The Head of Human Resources and Organisational Development and the Head of Legal are authorised to complete all legal documentation to formalise and ensure the effective transfer of the staff and the Public Health function.

## 15.0 REASON/S FOR RECOMMENDATION/S

15.1 The transfer of Public Health staff to the Council takes effect from 1 April 2013.

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## APPENDICES

## REFERENCE MATERIAL

## SUBJECT HISTORY (last 3 years)

Council Meeting	Date
Cabinet	21 June 2012
Cabinet	3 February 2012
Cabinet Report	20 December 2012
Cabinet Report	3 October 2011
Health & Wellbeing OSC	3 September 2011
Cabinet Report	17 March 2011
Health & Wellbeing OSC	18 January 2011

