

Recruitment of Public Health and Commissioning posts funded by the Office for Health Improvement and Disparities (OHID) for supplemental substance misuse treatment and recovery grant to manage and commission the additional Public Health requirements

Date: 22nd June 2022

Report of: Chief Officer, Healthy Living and Health Improvement

Report to: Director of Public Health

Will the decision be open for call in? Yes No

Does the report contain confidential or exempt information? Yes No

What is this report about?

Including how it contributes to the city's and council's ambitions

- This is a supplementary report which is part of the key decision published on 25th May 2022.
- The purpose of this report is to seek approval to recruit Public Health and Commissioning posts funded from the grant provided by the Office for Health Improvement and Disparities (OHID) drug strategy and treatment funding in order to manage and commission the additional Public Health responsibilities of this funding.
- Approval to recruit the following posts within Public Health and add to the Public Health structure at an anticipated approximate annual cost of £160,249 - £174,853 including on-costs, funded from the OHID grant:
 - 1X DIR 45% Head of Public Health 1.0 WTE new permanent post
 - 1X PO4 Advanced Health Improvement Specialist 1.0 WTE new permanent post
 - 1X PO2 Health Improvement Specialist 1.0 WTE new permanent post
- Approval to recruit the following posts within Adults and Health Integrated Commissioning (Housing Related Support and Public Health) and add them to the Integrated Commissioning structure at an anticipated approximate annual cost of £170,077 - £183,820 including on-costs, funded from the OHID grant:
 - 1X PO6 Commissioning Programme Leader 1.0 WTE new permanent post
 - 1X PO4 Commissioning Manager 1.0 WTE new permanent post
 - 1X PO2 Senior Commissioning Officer 1.0 WTE new permanent post
 - 1X 0.5 WTE of spare hours at PO2 level to be used to convert an existing Adults and Health Integrated Commissioning (Housing Related Support and Public Health) team member who is currently working 0.5 WTE at SO2 and 0.5 WTE at PO2 to a full time 1.0 WTE PO2

The proposals in this report directly contribute to the Best Council Plan's overarching vision of tackling poverty and reducing inequalities. They address the Best Council Plan's priorities of reducing health inequalities and improving the health of the poorest the fastest; supporting businesses and residents to improve skills, helping people into work and better jobs. In addition, the proposals support the Leeds Drug and Alcohol Strategy and Action Plan key outcome to increase the proportion of people recovering from drug and / or alcohol misuse.

Recommendations

- a) That the Director of Public Health agrees to the creation of the posts outlined within this report at an approximate cost of £330,326 - £358,673 per annum which will be funded by the OHID grant.

Why is the proposal being put forward?

- 1 The proposal to recruit the new posts within Public Health and Commissioning is put forward in order to manage and commission the additional Public Health requirements of the new grant funding received from OHID for supplemental substance misuse treatment and recovery. Approval is sought to recruit at the earliest opportunity to ensure this critical work programme can proceed within the timeframes outlined by the grant funding.

What impact will this proposal have?

Wards Affected:

Have ward members been consulted? Yes No

- 2 These roles will ensure there is capacity to manage the grant, increase strategic leadership and commissioning officer resources within the council's public health commissioning teams and meet government deadlines as set out in the national strategy.
- 3 An Equality, Diversity, Cohesion and Integration Screening has been completed in relation to this decision.

What consultation and engagement has taken place?

- 4 Consultation has taken place on the implications of this report with the Executive Member for Public Health and Active Lifestyles on 9th May 22, Lead Member for Human Resources and Trade Unions on 17th June 22 and Deputy Director, Integrated Commissioning on 9th June 22.

What are the resource implications?

- 5 The implication and costs in relation to the recommendations of this report are as follows:
 - 1X DIR 45% Head of Public Health 1.0 WTE new permanent post, 1 x PO4 Advanced Health Improvement Specialist 1.0 WTE new permanent post and 1 x PO2 Health Improvement Specialist 1.0 WTE new permanent post. Funded from the new OHID grant at an approximate annual cost of £160,249-£174,853 including on-costs.
 - 1X PO6 Commissioning Programme Leader 1.0 WTE new permanent post, 1X PO4 Commissioning Manager 1.0 WTE new permanent post, 1X PO2 Senior Commissioning Officer 1.0 WTE new permanent post, 1X 0.5 WTE PO2 Senior Commissioning Officer post

and 1X 0.5 WTE of spare hours at PO2 level to be used to convert an existing Adults and Health Integrated Commissioning (Housing Related Support and Public Health) team member currently working 0.5 WTE at SO2 and 0.5 WTE at PO2 to a full time 1.0 WTE PO2. Funded from the OHID grant at an approximate annual cost of £170,077-£183,820 including on-costs.

What are the legal implications?

- 6 This is a significant operational decision and not subject to call-in. There are no legal implications identified as a consequence of this report.

What are the key risks and how are they being managed?

- 7 If approval to recruit is not approved this would have significant and detrimental impact on the ability to manage and commission the additional responsibilities for the OHID drug and alcohol treatment and recovery funding and requirements.

Does this proposal support the council's 3 Key Pillars?

Inclusive Growth Health and Wellbeing Climate Emergency

- 8 The proposal directly contributes to the Best Council Plan's overarching vision of tackling poverty and reducing inequalities. It addresses the Best Council Plan's priorities of reducing health inequalities and improving the health of the poorest the fastest; supporting businesses and residents to improve skills, helping people into work and better jobs.
- 9 In addition, the proposal supports the Leeds Drug and Alcohol Strategy key outcome to increase the proportion of people recovering from drug and / or alcohol misuse.

Options, timescales and measuring success

a) What other options were considered?

- 10 The capacity of both the Public Health and Commissioning teams was reviewed with neither teams having capacity to resource the additional responsibilities of this new significant work programme.

b) How will success be measured?

- 11 To ensure the service meets the outcomes identified in the national drug strategy and the supplementary grant agreement. To successfully manage the workstream, ensure effective commissioning, contract management, project management, funding accountability arrangements, submit financial returns and increase activity.

c) What is the timetable for implementation?

- 12 The timetable for implementation to recruit is at the earliest opportunity in order to proceed with this significant work programme and will be dependent on the recruitment processes of Leeds City Council.

Appendices

- 13 Equality, Diversity, Cohesion and Integration Screening

Background papers

14 None