

# DH plans to allow councils to take on public health functions early

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The Department of Health is considering "arrangements" that will allow councils to take over the management of public health functions before the legal transition of responsibility in 2013.

But no NHS public health staff should transfer to local authorities prior to the statutory transfer of responsibility and "complete clarity" over their future functions will not be available before October, according to latest documents.

The DH last week published a [short document and checklist](#) to support NHS organisations and councils as they transfer to the new public health system.

It said primary care trusts would be expected to initiate planning to the new public health system over the next 12 months, but with local authorities taking an "increasingly active and leading role" as 2012-13 progresses.

The guidance said the DH expected many local areas to want to agree arrangements for local authorities to manage public health functions during the transition year, though PCTs would still remain legally responsible for public health until their abolition.

"Arrangements to enable such changes are currently being considered at a national level," it said, adding that strategic health authority clusters should support areas that wished to "make early progress with transformation and mitigate risk during transition".

As previously stated in the NHS operating framework, all PCT clusters should have an approved integrated plan, including public health transition, by the end of March. SHA clusters are required to submit early drafts of these plans to the DH by 27 January and a second final format on 5 April.

A [separate document has also been published by the Local Government Association](#), in consultation with the DH, on how council human resources departments should prepare for the transfer of the public health workforce. Similar guidance for NHS organisations will be sent to PCTs "shortly".

The LGA guidance notes that the complete picture of functional transfers will not be available before the end of May 2012, and staff affected by the proposed changes "will not have complete clarity of where their functions will move to, or how they will/will not move with them before October 2012".

However, despite this admission, it said local arrangements should be agreed to help those staff likely to transfer to "engage more closely" with councils. Any such initiatives require the consent of the person involved.

"No staff should transfer employment in advance of the due date of 1 April 2013, which is the date the statutory responsibilities transfer," it stated.

The document confirmed that transfers between NHS organisations and councils will be "guided by the requirements" of Transfer of Undertakings (Protection of Employment) regulations, though it also told employers to take legal advice for each potential transfer on the "nature and scope" of applying TUPE.

The guidance added that it strongly recommended that PCTs and councils set up joint working groups with unions to manage the staff transfer process.