READING BOROUGH COUNCIL

REPORT BY COUNCIL MANAGING DIRECTOR

TO: HEALTH AND WELLBEING BOARD

DATE: 21 JUNE 2013 AGENDA ITEM: 5

TITLE: NEW HEALTH STRUCTURE

LEAD COUNCILLOR HOSKIN PORTFOLIO: HEALTH

COUNCILLOR:

SERVICE: PUBLIC HEALTH WARDS: BROUGH-WIDE

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UK

PUBLIC HEALTH -

READING

1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This report sets out the basis of the new health structure and provides an overview of the key organisations and their new responsibilities following the implementation of the Health and Social Care Act 2012.
- **1.2** Appendices with this report:
 - Outline roles on responsibilities of health organisations (appendix 1);
 - Diagram showing key organisations (appendix 2).

2. RECOMMENDED ACTION

- 2.1 Consider and confirm the detail within the report and appendices.
- 2.2 Agree to the content being used to help explain the new structure more widely.

3. POLICY CONTEXT

- 3.1 The Health and Social Care Act 2012 has given local authorities a much stronger role in shaping services and responsibility for local population health improvement. From 1st of April 2013 Public Health functions, resources and commissioning responsibilities transfer from the NHS into Local Government. Reading now makes up one of six unitary authorities that will be responsible for Public Health across Berkshire.
- 3.2 The new health and care system became fully operational on 1 April NHS England, Public Health England, Healthwatch England and Health Education England have taken on their full range of responsibilities.
- 3.3 Locally, clinical commissioning groups made up of doctors, nurses and other professionals will buy services for patients, while local councils formally take on

their new roles in promoting public health. Health and wellbeing boards will bring together local organisations to work in partnership and Healthwatch will provide a powerful voice for patients and local communities.

4. NEW STRUCTURE

- 4.1 Clarity on who has the responsibility for specific activity within the complex new make up of health is essential so we can ensure Reading gets the best service for the people that live and work in the borough.
- 4.2 Officers across the council including members of the public health team across do, and continue to, develop relationships with key stakeholders as the new system embeds. Ways of working with Regional and national stakeholders are also being explored within this new health structure.
- 4.3 The roles and responsibilities of a number of key stakeholders and commissioners are outlined at appendix 1, it also details links to service provision for public health functions that are provided by working in partnership with a number of organisations.
- **4.4** A diagram is also provided at Appendix 2 which also helps to illustrate the complex structure.

5. CONTRIBUTION TO STRATEGIC AIMS

5.1 The new health structure and the councils new public health functions will impact on the strategic aim of promoting equality, social inclusion and a safe and healthy environment for all.

6. COMMUNITY ENGAGEMENT AND INFORMATION

6.1 Our ongoing commitment to working with other local health services, partners, communities and local people in the work we do reflects the how important we believe engagement in developing local health services is.

7. EQUALITY IMPACT ASSESSMENT

No equality impact assessment has been undertaken for this report.

8. LEGAL IMPLICATIONS

There are no legal implications associated with this report.

9. FINANCIAL IMPLICATIONS

There are no financial implications associated with this report.

10. BACKGROU ND PAPERS

The Health and Social Care Act 2012,