**CONSULTANT IN PUBLIC HEALTH**

**Employing organisation:** Sefton Council

**Title:** Consultant in Public Health/Consultant in Public Health Medicine

 Full Time

**Accountable to:** The post-holder will be dually accountable:

* professionally to Sefton Council
* managerially to the employing organisation via the Director of Public Health

**Grade:** Hay 4 (£85,125)

**Managerially responsibility:** A small team, including an Advanced Practitioner in Public Health

1. **Appointment**

This is a post for a CPH/CPHM. This is a permanent post employed by Sefton Council based at Magdalen House, Bootle, Merseyside L20 3NJ. The council operates an agile working policy, enabling working from home and off site. Staff are expected to be in the office 2-3 days each week to facilitate teamwork and support corporate function. The post-holder is a health professional providing public health advice to and on behalf of the population of Sefton. The post older will also be expected to lead on Cheshire and Merseyside health protection issues, and to undertake responsibilities on behalf of the Champs public health network. Job share will be considered.

1. **Job summary**

The post holder will contribute to achieving the priorities of Sefton Council and the vision for 2030, building on the wider vision for system change. “Imagine Sefton 2030” will engage the public, local businesses and potential investors in creating a vision that will collectively promote shared prosperity, coordinated public investment, and a healthy environment and population. As a senior leader in the public health team and across the council the post holder will help make the vision a reality, adding value and strengthening the health and wellbeing outcomes.

The post holder will support the local authority to take all steps necessary to improve and protect the health of its population. This includes supporting action to protect residents of Sefton from immediate and future threats to their health, and seeking assurances that all relevant organisations in the area have appropriate plans in place to protect the health of the population and that all necessary action is being taken.

Key portfolio areas will include health protection, screening and immunisations, and infection prevention and control. The postholder will give advice to a range of settings, planning surveillance, and response to incidents and outbreaks. The post holder will also lead programmes of health care public health, health improvement and prevention interventions, including tobacco control, NHS Health Checks, oral health and children’s health and wellbeing.

Strategic Duties and Responsibilities

* Support the Director of Public Health (DPH) in their role reporting to and supporting the work of relevant Council committees and governance bodies, including Health & Wellbeing Board, , Health Protection Forum and Place and Partnership Committees within the Integrated Care System.
* Ensure development and maintenance of systems and processes to enable the local authority to work with partners to respond to major incidents including health protection threats. On behalf of the DPH, to lead on those aspects that the Secretary of State delegates to the authority. Ensure that partner organisations (UKHSA, ICB and NHS) have appropriate mechanisms, to enable surge capacity to be delivered as and when required.
* On behalf of the authority to take responsibility for ensuring delivery of the public health mandated services such that the full range of benefits are delivered to residents of the local authority. This will include taking responsibility for the relevant outcome indicators within the Public Health, NHS, and Social Care Outcome frameworks and working across organisational boundaries.
* To lead health protection work across all Council directorates as well as influencing partnership boards dealing with environmental hazards, and climate change, to maximise health improvement opportunities and the reduction of inequalities in health outcomes amongst residents.
* Lead the delivery of the health protection programmes, including for example, responsibilities relating to acute respiratory infections, Tuberculosis, blood borne viruses, extreme weather planning and pandemic disease planning, and maintaining oversight of nationally commissioned health protection programmes, including childhood and adult immunisation programmes, cancer and non-cancer screening programmes.
* Provide strategic leadership around health protection and community infection prevention and control.
* Provide strategic leadership around health care public health and health improvement (including NHS Health Checks, oral health and tobacco control).
1. **Strategic objectives**
* To support the Councils Senior Management and to assist the Chief Executive working with Elected Members and senior officers to realise the Council’s objectives, priorities and values.
* To deputise for the Director of Public Health and represent the Council ensuring that the reputation of the Council is effectively managed.
* To support change management and promote clear, effective and transparent communication at all levels, both in and out of the Council.
* To work across the entire Council, NHS bodies (the Council has a statutory duty to provide public health advice to ICSs and the Council’s Health and Wellbeing Board has a coordinating role for the whole of the health and care system) and other partner agencies. It will also involve influencing private sector, voluntary sector and community sector organisations that can impact on health and influencing the attitudes and behaviour both of professionals and of the population generally.
* To be an effective advocate for improving health and tackling health inequalities
1. **Local Context and health economy**

Sefton is a metropolitan borough in Merseyside. The Borough consists of a coastal strip of land on the Irish Sea and extends from the primarily industrial area of Bootle in the south to the traditional seaside resort of Southport in the north. In the south-east it extends inland to Maghull.

Sefton has a population of approximately 275,000 with 24% of Sefton’s population being 65 years old or over and one in five being aged under 18. Sefton is ranked 24th out of 309 local authorities for the number of residents aged 65 or over.

Analysis of the local data sets indicate that the main health and wellbeing challenges in Sefton include:

* An ageing population which is also growing faster than the national average, increasing future demand for health and care services.
* Significant variation of issues across the Borough ranging from concerns relating to vulnerable ‘older people’ in the North and challenges relating to a younger population structure in the South, with a different set of challenges relating to health-related behaviours, child health and sexual health. Community development and preventive approaches are vital in these areas.
* Patterns of deprivation marked by isolated pockets and hidden need within communities and extremely high levels of deprivation in some core areas with multiple endemic issues associated with housing, employment, and environmental issues. This creates additional challenges when addressing health inequalities and targeting services to those most in need.
* Significant issues with historical health patterns for some of the population deriving from previous heavy industrial and manufacturing work, along with on-going issues relating to the green and built environmental, air quality, and traffic issues as a result of significant development in more recent years. This is in tandem with continued issues with poor housing stock which has a direct impact on health, leading to an increased risk of cardiovascular and respiratory disease, as well as impacts on mental health.
* Average earnings below the national average contribute to a number of issues including poverty, food insecurity, fuel poverty, debt problems, homelessness, poor mental health and wellbeing and related lifestyle impacts.
* Significant gaps in health status and life expectancy between those living in the most deprived and least deprived areas.
* The changing patterns of smoking, excess weight, physical activity, diet, alcohol, drug use and other behaviours should directly inform the planning of future interventions.
* The growing number of people with long-term conditions, sensory impairment, dementia, cancer and other health problems. This requires a particular focus on those living with multiple health conditions, as traditionally health systems have been largely configured for individual diseases rather than multi-morbidity.
* Sefton’s population is diverse in its needs and inequality can take many forms, resulting in differing health and care needs to which health and care commissioners will need to respond.

Sefton Council works as One Council, without directorates. The Health and Well Being Board brings together Sefton Council with Sefton ICB, NHS England and Sefton Health watch to set and monitor progress against the Health and Wellbeing Strategy. The Council also works closely with the regional centres of UKHSA, OHID, DHSC and Cheshire and Merseyside Cancer Alliance. Other key partners include Sefton Council for Voluntary Services, Merseyside Police and Merseyside Fire and Rescue Service.

The main hospitals serving Sefton are University Hospital Aintree (part of Liverpool University Hospitals Foundation Trust), a large facility with over 1,000 beds, and Southport and Ormskirk Hospitals (part of Mersey and West Lancashire Teaching Hospitals NHS Trust). With specialist provision delivered at centres across the sub-region, this includes Alder Hey Children’s Hospital NHS Foundation Trust and Liverpool Heart and Chest NHS Foundation Trust.

We have a strong multi-disciplinary public health team, with strong support in the Council for intelligence, communications, commissioning and procurement. We are part of Champs, the Cheshire and Merseyside collaborative public health service. This provides a focus for pooling expertise and supporting professional development.

1. **Public health arrangements**

***Current staffing of the department or directorate of public health:***



***Resources:***

The post holder will manage budgets for the portfolio allocated to them, circa £7 million p.a. The overall purpose will be to make the best use of available resources to maintain and improve the public’s health and to provide expert advice on all health matters.

***Training and CPD arrangements***

Sefton is approved for the training of Specialty Registrars in Public Health.All staff are expected to participate in and meet Faculty of Public health standards for personal development. Support is provided for CPD requirements. There is an active programme of educational sessions including in house spotlight sessions and protected learning time, the Champs CPD events, and educational programmes provided by Liverpool and Manchester Universities. A member of the senior team is currently seconded on a part time basis to NHS England Northwest as an Associate Dean.

1. **Strategic responsibility and key tasks**

***The range of duties expected of the post-holder include***

* Chair the Health Protection Forum working with a range of stakeholders from both statutory and non-statutory to seek assurance on behalf the DPH around preparedness and response to health protection situations, incidents and outbreaks.
* Work with key partners to help coordinate health protection responses to incidents, outbreaks and environmental threats in Sefton.
* Work with partners across the Cheshire and Merseyside sub region to prepare for and address existing, emerging and potential public health threats.
* Work with colleagues in Merseyside Resilience Forum and Local Health Resilience Partnership to support preparedness and response to situations and incidents.
* Along with other consultants in the team, carry a flexible portfolio and work across all the domains of public health and all life course areas. This will include managerial responsibility for commissioning services and programmes relating to the lead portfolio areas and the associated budgets.
* Be accountable for interpreting and utilising the JSNA, assessing performance and ensuring an evidence-based approach to service re-design and commissioning as well as policy development.
* Be responsible for the identification and implementation of appropriate health outcome measures, care pathways/protocols and guidelines for service delivery across patient pathways for the local population.
* Provide expert public health advice and leadership to support and inform an evidence-based approach within ethical frameworks for commissioning and developing high quality equitable services, across primary, secondary and social care, and across sectors including local authorities, voluntary organisation, etc.
* Will be a core member of the Sefton place-based partnership leadership team, helping to shape priorities and policy development.
* Will manage/supervise staff and contribute to the delivery of training programmes as a major part of the job e.g. day to day management of a group of staff being responsible as a line manager for their functions and mentoring of Specialty Registrars in Public Health and others.
* Will commission research audits/projects and undertake research or audit and translate research findings into public health practice
* Will contribute to Champs, the Cheshire and Merseyside collaborative public health service as well as other regional networks such as Liverpool City Region etc.
* Will contribute to the Annual Report of the Director of Public Health

The job description will be subject to review in consultation with the post holder in the light of the needs of the employing organisation and the development of the specialty of public health and any wider developments in the field of public health. The post-holder may also have external professional responsibilities, e.g. in respect of training or work for the Faculty of Public Health. Time allocation for these additional responsibilities will need to be agreed with the line manager.

1. **Management arrangements and responsibilities**

The post-holder will be professionally accountable to the employing authority and managerially accountable to the employing authority via the Director of Public Health. Professional appraisal will be required. An initial job plan will be agreed with the successful candidate prior to that individual taking up the post based on the draft job plan attached. This job plan will be reviewed as part of the annual job planning process.

The post-holder will:

* Directly line manage the Advanced Practitioner in Public Health; this role includes line management duties, recruitment, appraisals, disciplinary and grievance responsibilities
* Contribute to matrix management for other public health staff contributing to health protection / health care work
* Manage Specialty Registrars in Public Health
* Manage budgets for specific programme areas – including Tobacco Control, NHS Health Checks and Community Infection Control, Oral Health
* Be expected to deputise for the Director of Public Health as required
* Attend evening meetings and committees as required
1. **Professional obligations**

The post-holder will be expected to maintain effective, courageous, and responsible public health advocacy. It is a duty of a health professional to foster scientific integrity, freedom of scientific publications, and freedom of debate on health matters, and public health professionals have a further responsibility to promote good governance and open government. Public health practice must be carried out within the ethical framework of the health professions.

Some obligations of the position include:

Participating in the organisation’s staff appraisal scheme and quality improvement programme and ensure appraisal and development of any staff for which s/he is responsible.

Contributing actively to the training programme for Specialty Registrars in Public Health as an educational supervisor and LAs management trainees as appropriate, and to the training of practitioners and primary care professionals within the locality In agreement with the DPH,

Undertaking an annual professional appraisal including completion of a programme of CPD, in accordance with Faculty of Public Health requirements, or other recognised body, and undertake revalidation, audit or other measures required to remain on the GMC/GDC Specialist Register or the UK Public Health (Specialist) Register or other specialist register as appropriate. In agreement with the DPH, contribute to the wider the public health professional system by becoming an appraiser or practitioner appraiser for a specified period of time.

Contributing as an appraiser or practitioner appraiser to the professional appraisal system in agreement with the DPH

Practising in accordance with all relevant sections of the General Medical Council’s Good Medical Practice (if medically qualified) and the Faculty of Public Health’s Good Public Health Practice and UKPHR requirements.

Contributing to medical professional leadership within the health system.

1. **Work programme**

It is envisaged that the post holder will work 10 programmed activities over 5 days. Following appointment there will be a meeting at no later than three months with the line manager to review and revise the job plan and objectives of the post holder.

The post-holder may also have external professional responsibilities, e.g. in respect of training or work for the Faculty of Public Health. Time allocation for any external professional responsibilities will need to be agreed with the Director of Public Health.

**Indicative Consultant in Public Health Session Plan – Final plan to be agreed and will be reflective of the candidate appointed.**

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| **Day** | **Time** | **Location** | **Work** |
| **Monday** | AM | hybrid | Line management |
| PM | hybrid | Health care – early intervention  |
| **Tuesday** | AM | hybrid | Health protection |
| PM | hybrid | SPA – training, teaching, audit, personal development, CPD, appraisal and accreditation related administration |
| **Wednesday** | AM | hybrid | Healthcare – early intervention |
| PM | hybrid | Healthcare – early intervention |
| **Thursday** | AM | hybrid | Health Protection |
| PM | Hybrid | Health Protection |
| **Friday** | AM | Hybrid | Cheshire and Mersey system leadership |
| PM | Hybrid | SPA  |

1. **On-call and cover arrangements**

Sefton does not participate in on-call rota. A call down system works for extended holiday periods such as Christmas and New Year.

1. **Wellbeing**

Effective local occupational health support (confidential, includes modalities of self-referral, promoted regularly at induction and when in post) is important to Sefton Council. The post holder can have access to the Occupational Health (OH) Department, The OH team can help in arranging support from a physiotherapist and psychologist, via self-referral from the post-holder or can be referred through their manager. The post holder can have access to counselling, including face-to-face, and well as legal and financial support and other wellbeing resources. Information about Occupational Health will be disseminated at the induction and regularly when in post to ensure the post holder has timely access to the details if help seeking is necessary.

Availability of local initiatives/resources that promote workforce wellbeing (for example, self- care, work-life balance, stress management, coaching/mentoring, peer group support).

1. **Personal qualities**

The strategic objective of the post is to support the Director of Public Health (DPH) in their role reporting to and supporting the work of relevant Council committees and governance bodies, including Health & Wellbeing Board, Public Health and Public Health Board, Place and Partnership Committees within the Integrated Care System.

The post-holder will deal with complex public health and wellbeing challenges in a multi-organisational environment with widely differing governance, finance systems and organizational cultures. It is expected that the post-holder will be able to cope with such circumstances as well as multiple and changing demands, and to meet tight deadlines. A high level of intellectual rigour, political awareness and negotiation and motivation skills as well as flexibility and sensitivity are required. The post holder will advise the health and wellbeing board and make recommendations regarding services, residents’ care and wider determinants of health and therefore a high level of tact, diplomacy and leadership is required. This includes the ability to work within the local political context and at the same time maintain the ability to challenge and advocate for local residents’ health and wellbeing on specific issues in order to achieve public health outcomes. The achievement of public health outcomes and the successful pursuit of change are the purpose of the job and the metric against which performance will be assessed.

**Appendix 1: FACULTY OF PUBLIC HEALTH COMPETENCIES**

(Based on the 2022 Public Health Specialty Training Curriculum)

***Use of public health intelligence to survey and assess a population’s health and wellbeing***

To be able to synthesise data from multiple sources on the surveillance or assessment of a population’s health and wellbeing and on the wider environment, so that the evidence can be communicated clearly and inform action planning to improve population health outcomes.

***Assessing the evidence of effectiveness of interventions, programmes and services intended to improve the health or wellbeing of individuals or populations***

To be able to use a range of resources to generate and communicate appropriately evidenced and informed recommendations for improving population health across operational and strategic health and care settings.

***Policy and strategy development and implementation***

To be able to influence and contribute to the development of policy as well as lead the development and implementation of a strategy.

***Strategic leadership and collaborative working for health***

To use a range of effective strategic leadership, organisational and management skills, in a variety of complex public health situations and contexts, dealing effectively with uncertainty and the unexpected to achieve public health goals.

***Health improvement, determinants of health and health communications***

To influence and act on the broad determinants, behaviours and environmental factors influencing health at a system, community and individual level to improve and promote the health of current and future generations. To be proactive in addressing health inequalities and prioritising the most vulnerable or disadvantaged groups in the population.

***Health protection***

To identify, assess and communicate risks associated with hazards relevant to health protection, and to lead and co-ordinate the appropriate public health response. To understand how those risks associated with hazards relevant to health protection may be influenced by climate change and environmental degradation currently and in the future.

***Health and care public health***

To be able to improve the efficiency, effectiveness, safety, reliability, responsiveness, sustainability and equity of health and care services through applying insights from multiple sources including formal research, health surveillance, needs analysis, service monitoring and evaluation.

***Academic public health***

To add an academic perspective to all public health work undertaken. Specifically to be able to critically appraise evidence to inform policy and practice, identify evidence gaps with strategies to address these gaps, undertake research activities of a standard that is publishable in peer-reviewed journals, and demonstrate competence in teaching and learning across all areas of public health practice.

***Professional, personal and ethical development***

To be able to shape, pursue actively and evaluate your own personal and professional development, using insight into your own behaviours and attitudes and their impact to modify behaviour and to practise within the framework of the GMC's Good Medical Practice (as used for appraisal and revalidation for consultants in public health) and the UKPHR’s Code of Conduct.

***Integration and application of competencies for consultant practice***

To be able to demonstrate the consistent use of sound judgment to select from a range of advanced public health expertise and skills, and to use them effectively, working at senior organisational levels, to deliver improved population health in complex and unpredictable environments.

**SPECIMEN PERSON SPECIFICATION**

**CONSULTANT IN PUBLIC HEALTH /CONSULTANT IN PUBLIC HEALTH MEDICINE**

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| **IMPORTANT: This person specification contains changes introduced in amendments made to the NHS (Appointment of Consultants) Regulations for England, Scotland, Northern Ireland and Wales which came into force during 2005. Further amended in June 2015, and September 2018** |
| **Education/Qualifications** | **Essential** | **Desirable** |
| [The National Health Service (Appointment of Consultants) Regulations 1996 (legislation.gov.uk)](https://www.legislation.gov.uk/uksi/1996/701/regulation/4/made)In line with legislation, inclusion in the GMC Full and Specialist Register with a license to practice/GDC Specialist List or inclusion in the UK Public Health Register (UKPHR) for Public Health Specialists **at the point of application.**  | X |  |
| *If included in the GMC Specialist Register/GDC Specialist List in a specialty other than public health medicine/dental public health, candidates must have equivalent training and/or appropriate experience of public health practice* | X |  |
| Any public health **speciality registrar applicants** who are currently on the UK public health training programme and not yet on either the GMC, GDC or UKPHR specialist register **must** provide verifiable signed documentary evidence that they are within 6 months of gaining entry to a register at the date of interview\* | X |  |
| If an applicant is UK trained in Public Health, they must ALSO be a holder of a Certificate of Completion of Training (CCT), or be within six months of award of CCT by date of interview. If an applicant is non-UK trained, they will be required to show evidence of equivalence to the UK CCT *[see shortlisting notes below)* | X |  |
| Applicants must meet minimum CPD requirements (i.e. be up to date) in accordance with Faculty of Public Health requirements or other recognised body  | X |  |
| MFPH by examination, by exemption or by assessment, or equivalent | X |  |
| Masters in Public Health or equivalent |  | X |
| **Personal qualities**  |  |  |
| Able to influence senior members including directors and CEOs | X |  |
| Able to both lead teams and to able to contribute effectively in teams led by junior colleagues | X |  |
| Commitment to work within a political system irrespective of personal political affiliations | X |  |
| **Experience** |  |  |
| Delivery of successful change management programmes across organizational boundaries  | X |  |
| Media experience demonstrating delivery of effective health behaviour or health promotion messages |  | X |
| Experience of using complex information to explain public health issues to a range of audiences | X |  |
| **Skills** |  |  |
| Strategic thinker with proven leadership skills and operational nous | X |  |
| Able to demonstrate and motivate organisations to contribute to improving the public’s health and wellbeing through mainstream activities and within resources | X |  |
| Ability to lead and manage the response successfully in unplanned and unforeseen circumstances | X |  |
| Analytical skills able to utilize both qualitative (including health economics) and quantitative information  | X |  |
| Ability to design, develop, interpret and implement strategies and policies | X |  |
| **Knowledge** |  |  |
| In-depth understanding of health and care system and relationships with both local & national government | X |  |
| In depth knowledge of methods of developing clinical quality assurance, quality improvement, evaluations and evidence based public health practice | X |  |
| Strong and demonstrable understanding of interfaces between health, social care and key partners (dealing with wider determinants of health) | X |  |
| Understanding of the public sector duty and the inequality duty and their application to public health practice | X |  |

***\*Applicants going through the portfolio registration routes (GMC or UKPHR) are not eligible to be shortlisted for interview until they are included on the register. The six-month rule does not apply to these portfolio route applicants.***

**SHORTLISTING NOTES**

**Applicants in training grades**

***Medical and dental applicants***

All medical/dental applicants must have Full and Specialist registration (with a license to practice) with the General Medical Council or General Dental Council (GMC/GDC) **or be eligible for registration within six months of interview.** Once a candidate is a holder of the Certificate of Completion of Training (CCT), registration with the relevant register is guaranteed.

Applicants that are UK trained must ALSO be a holder of a Certificate of Completion of Training (CCT) **or be within six months of award of CCT** by date of interview demonstrated by a letter from their Training Programme Director (TPD).

***Non-Medical Applicants in training programme***

All non-medical applicants must be registered with the UKPHR or be within six months of registration at the date of the interview. Applicants must provide proof (letter of confirmation from their TPD or the CCT) at interview.

**Applicants in non-training grades**

Applicants that are non-UK trained, will be required to show evidence of equivalence to the UK CCT.

Applicants from a medical background will be expected to have gained full specialist registration with the GMC through the Certificate of Eligibility for Specialist Registration (CESR) route.

Applicants from a background other than medicine are expected to have gained full specialist registration with the UKPHR at the point of application.

**Employers are advised that individuals should not take up consultant in public health posts (including DPH posts) until such point as they have gained entry to the GMC Specialist Register/GDC Specialist List in dental public health/UK Public Health (Specialist) Register. Although applicants will be able to provide documentary evidence that an application is in progress, no guarantee can be made as to the outcome of an application to the GMC/GDC/UKPHR specialist registers. The exception to this is when the candidate holds the CCT.**

**The above guidance applies to applications for both general and defined specialist registration with the UKPHR. Individuals with defined specialist registration are eligible for consideration for shortlisting for, and appointment to, consultant posts including those at DPH level. In all appointments, employers will wish to ensure that an applicant’s areas of competence meet those required in the person specification.**