

Service Level Agreement

Public Health South Tees and Middlesbrough Council Regeneration Directorate

1. Introduction

The purpose of this Service Level Agreement is to establish a framework for collaboration between Public Health South Tees and Middlesbrough Council Regeneration Directorate to deliver public health outcomes which contribute to reducing health inequalities across Middlesbrough, specifically the Public Health objective of creating and developing healthy and sustainable places and communities as contributors to reducing health inequalities.

Partners in the SLA are:

- Public Health South Tees
- Middlesbrough Council Regeneration Directorate

2. Background

The Local Authority, via the Director of Public Health, has a duty to improve public health under **Section 12** of the **Health and Social Care Act 2012**. Under the provisions of the Act, Middlesbrough Council has a duty to improve the health and wellbeing of the population. This means the council should pay regard to the evidence of need and identify services, approaches or interventions to improve health outcomes and address inequalities.

To support this duty the Director of Public Health is accountable for the delivery of Middlesbrough Council's public health duties and is an independent advocate for the health of the population, providing leadership for its improvement and protection. The duty is expected to be executed via the delivery of mandated and non-mandated functions that best meet the needs of the local population, including having regards to the Joint Strategic Needs Assessment and Joint Health & Wellbeing Strategy (Appendix 1).

To support these responsibilities the DPH is responsible for a public health grant. The level of the grant is set by the Treasury and is ring-fenced for specific uses with its requirements set out in the grant determination letter.

3. Principles of Public Health Grant Allocation

The council needs to demonstrate that the public health grant has been used to improve the health and wellbeing of the population in line with evidence of need and in accordance with the legislation and requirements set out in the grant determination letter.

The DPH and Chief Executive/s151 officer must be able to confirm that expenditure of the grant is in line with the legislative requirements and will assure that:

- The main and primary purpose of any spend against the public health grant is in support of the delivery of strategic public health outcomes;

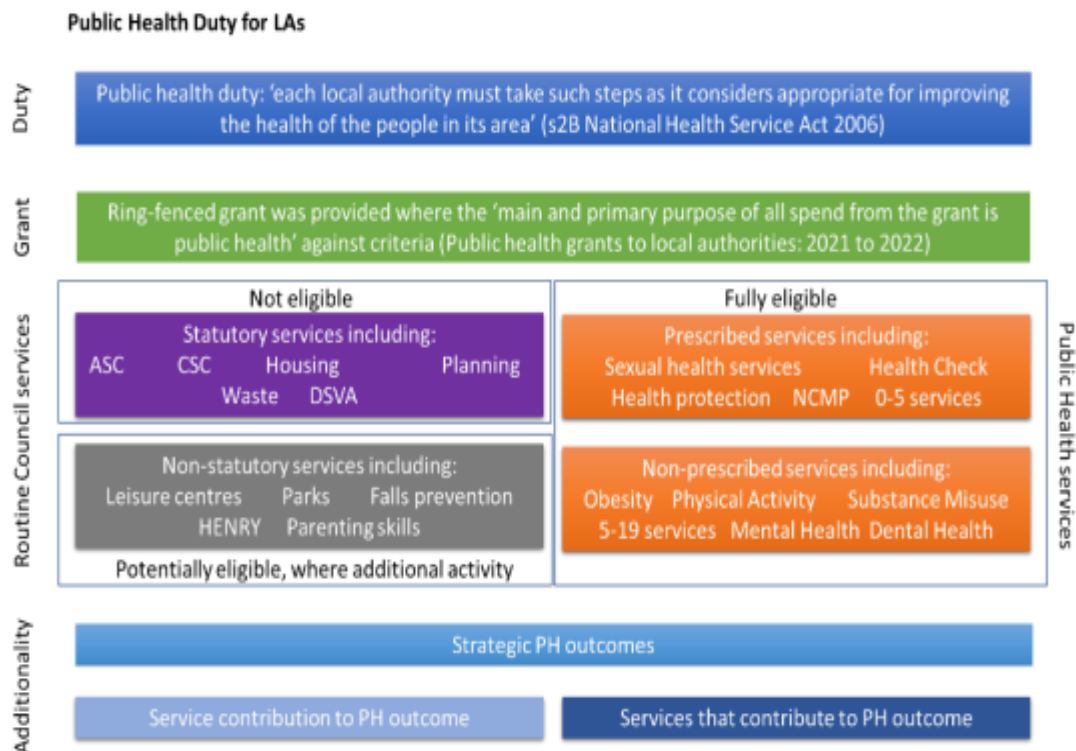
- Expenditure is transparently and demonstrably in line with the grant determination requirements;
- Governance processes are robust and adequate; and
- Public health outcomes are reviewed and monitored.

To reduce health inequalities and improve health and wellbeing outcomes in Middlesbrough, Public Health South Tees has adopted a Programme Approach across the lifecourse (Start Well, Live Well and Age Well) underpinned by five priority areas to improve health and reduce inequalities:

- Creating healthy and sustainable places
- Health protection
- Preventing ill-health
- Reducing vulnerability
- Promoting positive mental health and emotional resilience

All expenditure must be in line with the principles and processes set out in the legislative model for Public Health grant expenditure (Figure 2). This framework aims to ensure that public health grant is used in a way which is based on a solid understanding of health and wellbeing needs; prioritises prevention; and delivers best value, including a process for continuous improvement.

Figure 2. Legislative model for public health grant expenditure



The planned use of the public health grant allocation must be assessed as being an effective and efficient use of the resource available in order to ensure:

- All grant expenditure is eligible, as per public health grant conditions;
- The effective delivery of all prescribed/mandated public health services; and
- The delivery of activity identified as being required to address the five priorities set out within the Public Health Strategy and programme approach.

Improvement to the health and wellbeing of the population is delivered through a combination of interventions: understanding the needs of the population, influencing system policy and developing collaborative and integrated approaches. The public health grant will be used to support a breadth of services against strategic outcomes to ensure equity of access, cover different levels of prevention and reduce inequalities. Where the public health grant is invested in internal council services, they will be supported by service level agreements that demonstrate the contribution to achieving outcomes aligned to the five priority areas and are reviewed at least annually.

4. Service Scope

Health inequalities exist in Middlesbrough. The population of Middlesbrough have a lower life expectancy when compared to regional and national averages. They can also expect to live a shorter proportion of their lives in good health. People experiencing the greatest deprivation have the shortest life expectancy, living on average 13 years less than those in the most affluent wards. The trend of other key outcomes, such as proportion of children living with overweight or obesity or ill-health attributed to smoking, are worsening. This demonstrates that health impacts should be an important part of any decision making to contribute towards reducing the inequality gap.

The built and natural environment is a key determinant of health and wellbeing outcomes. Planning can influence the built and natural environments to make a positive contribution to several public health issues such as physical inactivity, social isolation, air quality and obesity. Creativity and culture is also a key determinant in supporting health and wellbeing improvements, particularly in relation to connectedness, combating isolation and loneliness and the maintenance or improvement of mental wellbeing as well as supporting recovery.

The scope of this SLA includes reviewing how strategies, plans and infrastructures for regeneration and town planning positively impact on physical activity, active travel, the food environment, and food security and to consider an agreed process for local plan development between public health and planning. It will also include the role of creativity and culture to support achievement of public health outcomes and reduce inequalities.

5. Outcomes and Actions

The strategic public health outcomes have been described in the Public Health Strategy 2023-2026.

The overarching outcome of this SLA is for public health and regeneration to work collaboratively using a system led approach to **support the creation of places that enable healthier food choices and physically active lifestyles** using the Healthy Weight

Declaration (Appendix 2) as a framework for action which was agreed as Council policy by the Executive in July 2023. It will also include how public health and culture can work more collaboratively to support the programme approach outlined in the Public Health Strategy.

Regeneration Commitments

All Directorate Action

HDRC

- Engage proactively with the NIHR Health Determinants Research Collaboration (HDRC) – for example by nominating a senior level ambassador to represent the Directorate at HDRC meetings.
- To work with HDRC colleagues to proactively identify research and evidence priorities for the Directorate.
- Positively consider staff intentions to apply for and undertake personal fellowships (e.g. NIHR Pre-Doctoral/Doctoral Fellowships) as part of their continuing professional development.
- In conjunction with the HDRC, work towards embedding evidence use and creation in Directorate processes.
- Actively participate in the Memorandum of Understanding between the Local Authority and Teesside University.

Training

- Actively engage in shadowing experiences to gain greater understanding of Public Health services, approaches, and offers.
- Encourage staff to attend relevant public health training such as Healthy Weight Declaration e-learning, Making Every Contact Count (MECC), Suicide prevention, and Physical Activity.
- As a Directorate complete an annual public health audit which demonstrates application of knowledge.
- Identify key staff to be trained as mental health first aiders/advocates across the Directorate.
- Nominate a wellbeing champion for the Directorate and to register on the South Tees Wellbeing Network.

Collaboration/Strategic Partnerships

- Support the development of the Joint Strategic Needs Assessments and delivery of the Live Well South Tees Health and Wellbeing Strategy.
- Collaborate to produce an Advertising and Sponsorship policy, building on the work of London Local Authorities, and closer to home, Durham to ensure any sponsorship or funding offer is in line with the Healthy Weight Declaration and other commitments outlined in the Public Health Strategy.
- Nominate dedicated service representatives to attend the Healthy Weight Alliance (once established) to support the implementation of the Healthy Weight Declaration (agreed as Council policy in July 2023).

- Sign up to the Age Friendly Charter as a Directorate.

Planning, Development and Economic Growth

- Coordinate the response of Public Health and the council when looking at documents and workstreams like the Local Plan, ensuring evidence, insight and intelligence informs policy development and decision making.
- Embed consideration of active spaces and health in planning policies and decision making through the implementation of Health Inequalities Impact Assessments as part of the development and design process to positively impact on health inequalities and to create healthy, more resilient and sustainable communities.
- Consider the inclusion of public health approaches, such as active spaces, in Masterplan developments.
- Embed Sport England Active Design Principles into the planning process and decision making.
- Promote safe and accessible developments and routes.
- Provide safe, accessible open space and increase the use of green spaces for formal and informal recreation, including allotments and growing spaces, promoting physical activity and improving mental wellbeing.
- Develop hot food takeaways guidance considering supplementary guidance for hot food takeaways, specifically in areas around schools, parks and where access to healthier alternatives are limited.
- Facilitate a multi-agency needs assessment of housing needs of vulnerable client groups to ensure future housing-related schemes address the lack of affordable, single-person accommodation and promote a less restrictive view of access to decent accommodation for vulnerable client groups.
- To consider the local approach to improve housing quality, affordability and accessibility.
- To promote environmentally sustainable practices including reducing pollution and improving air quality, and water quality.
- Conduct impact assessments to reduce the means of suicide in the build environment and promote positive mental health.
- Utilise the data gathered by the new North East wide Reducing Gambling Harms workstream to develop our understanding and approach to prevention of gambling harms.
- Town centre developments/Council owned buildings to support public health approaches e.g., Breastfeeding Welcome South Tees, Dementia Friendly.
- Work with Public Health to deliver a new Playing Pitch Strategy if required by Sport England or needed for any other strategic purpose.

Culture

- Ensure food and drinks provided at council led public events include healthy provisions, supporting local food retailers to deliver this offer.
- Processes are in place to ensure all food and drinks provided at public events meet food hygiene standards to reduce any outbreaks.
- A nominated individual to sit on the HAF steering group to ensure culture is embedded as part of programme delivery.

- Work collaboratively with public health on the development of future events and learning and engagement programmes to ensure an Arts in Health focus.
- Promote and amplify public health campaigns.
- Support the delivery of creative health programmes and activities within our cultural venues.
- Work with artists and creative organisations to build capacity around creative health delivery and improve access to funded commissions/programmes of work (public health, adult social care, etc.)
- Work with artists and creative organisations to support public consultation on health and wellbeing strategies.
- Support the creation of a South Tees Health & Wellbeing Strategy.
- Where possible, evaluate the health and wellbeing benefits of our cultural programmes and use this to inform future delivery.
- Continue to work to seek external funding to deliver, then support the delivery of, sports and physical activity events in Middlesbrough.
- Continue operational support from the events team for Run Middlesbrough.
- Work with Public Health to ensure the maximum health and participation opportunities are realised from the new Middlesbrough Half Marathon.
- Work with Public Health to maximise health promotion opportunities are realised from their events programme.

Adult and Community Learning

- Work Collaboratively with public health to promote public health events to all learners.
- Deliver Adult learning opportunities within the Live Well Centre.
- Support the HAF steering group to provide information regarding support for parents and carers linked to adult learning.
- Provide impact and case studies linked to health improvement from learners who have engaged in Learning for Inclusion.

Public Health South Tees Commitments

- A dedicated “Making Research Happen” Officer to support the HDRC.
- Fund a fixed-term two-year post (Creating Active and Healthy Places Lead) through You’ve Got This, a Sport England Local Delivery Partnership. The post will be responsible for building relationships with the Regeneration Directorate, in particular planning, and wider stakeholders to create and develop healthy and sustainable places. A key focus of the work will be based on the principle of ‘designing in’ health and wellbeing as an essential part of the planning process, placing specific emphasis on active travel, multi-functional open space and high-quality urban environments through the development and implementation of Health Inequalities Impact Assessments and contribution to the local and development plans, Health and Wellbeing Strategy and JSNA.
- Training and support on the implementation and application of the Health Inequalities Impact Assessment.
- Provide up-to-date training for regeneration staff to access.

- Nominating key staff to support achievement of outcomes.
- Space at the Live Well Centre for community learning.

6. Guiding Principles

The following guiding principles underpin the work:

- Partners have equal status and will work collaboratively and support each other in the spirit and intention of this SLA.
- Partners will be open and transparent and act in good faith towards each other.
- Partners will discuss any changes to services that may impact on the delivery of Public Health outcomes with Public Health prior to changes being agreed.
- As the Public Health Grant is allocated to a percentage of the overall service delivery which is deemed to contribute to Public Health outcomes, Public Health cannot be held responsible to fund any changes in service budgets such as pay increases
- Partners will commit resources appropriately to support the delivery of the SLA outcomes.
- Partners will demonstrate a willingness to put the needs of the public before the needs of individual organisations.
- All partners recognise and acknowledge that integration is an interactive and iterative process.

7. Monitoring and ongoing development

Quality assurance and improvement will be delivered through the regular monitoring of the investment agreements and the production of a co-produced annual report with responsibilities for oversight held by Public Health DMT.

The post supported by Sport England, through You've Got This, is externally funded and therefore subject to separate monitoring. Grant payments are subject to continued funding from Sport England.

8. Key Monitoring Metrics

- Attendance at key recommended boards (Healthy Weight Alliance and HDRC Oversight Board).
- Identified research and evidence priorities for the directorate in partnership with HDRC colleagues.
- Identified ambassadors for the HDRC.
- Development of planning guidance setting out expectations of developers in terms of the delivery of healthy development and communities.
- Agreements on thresholds for undertaking HIAs in relation to different types of development.
- Number/type of developments undertaking a HIA.
- Increase local capacity and knowledge of health and spatial planning issues with planning and public health teams.
- Number of staff undertaking training.

- Nominated mental health first aiders.
- Evidence of contribution to the development of key strategies and documents such as JSNA.
- Sign up to the Age Friendly Charter.
- Evidence of new developments/town centre/council buildings supporting and promoting Breastfeeding Welcome South Tees, Dementia Friendly.
- Inclusion for Health Case studies.

9. Signatories to this SLA: Public Health South Tees and Middlesbrough Council Regeneration

- This SLA is effective from 01.04.2023 for a period of one year, subject to early termination in the event of changes to the Public Health Grant such as a reduction in overall allocation to the Council.
- The SLA will be reviewed on an annual basis and subsequent allocation of Public Health Grant to the Directorate.
- The Agreement may only be varied with the express written agreement signed by the partners (or their authorised representatives).
- Any changes to the service which may impact on specified Public Health outcomes need to be discussed with Public Health before any final decisions/agreements.

I hereby agree the above conditions on behalf of Public Health South Tees:

Signed _____ **Date:** _____

Name: _____

I hereby agree the above conditions on behalf of the Regeneration Directorate:

Signed _____ **Date:** _____

Name: _____

Schedule 1- Price and payment

- The Service will be funded through Public Health South Tees
- The following funding is available to contribute towards delivering the service outcomes:

£456,700

- Internal transfer will be arranged by the Public Health Business Partner

Appendix 1. Public health mandated and non-mandated functions

Mandated functions include:

- Weighing and measuring of children at reception and year 6 (National Weight Measurement Programme)
- NHS Health Check assessment and delivered, offered every 5 years to eligible residents who meet screening criteria;
- Provision of sexual health services – STI testing and treatment and contraception;
- Provision of Public Health advice to the ICB;
- Health protection, including prevention, planning for and responding to emergencies;
- Oral health, including initiation, variations and termination of fluoridation; oral health promotion; oral health surveys; oral health needs assessment (subject to change)

Non-mandated functions that are conditions of the Public Health Grant:

- Drug and alcohol provision
- Children and young people (Health Visiting and School Nursing)