

Health and Adult Social Care Overview and Scrutiny Committee



Report subject	Update on Public Health Disaggregation including plans for future contracts
Meeting date	19 th May 2025
Status	Public Report
Executive summary	<p>This report updates members on progress following the disaggregation of Public Health Dorset in April 2025 and the establishment of two separate Public Health teams within Dorset Council and Bournemouth, Christchurch and Poole (BCP) Council. It also sets out the proposed future direction for how Public Health functions and services will be delivered and commissioned, including where joint working between the two councils should continue.</p> <p>The Health and Social Care Overview & Scrutiny Committee is asked to consider the report and make recommendations to Cabinet that endorse the progress made to date, agree the proposed principles for future joint commissioning, and support the recommended future direction for Public Health services</p>
Recommendations	<p>It is RECOMMENDED that the Committee:</p> <ol style="list-style-type: none"> 1. Endorse the work completed to establish the Public Health teams within BCP and Dorset councils and the continued good performance in line with statutory responsibilities for Public Health as set out in the 2012 Health and Social Care Act. 2. Agree the proposed principles for the planned joint commissioning of Public Health services where it makes sense to continue to do so to maintain service quality, performance, efficiency and value for money for the residents of Dorset. 3. Agree the proposed future direction for the delivery of public health functions and services through the two Public Health teams in Dorset and BCP council.
Reason for recommendations	It has been a year since two new Public Health teams were established in BCP and Dorset Councils. This paper and recommendations provide updates to elected members on the progress establishing the new Public Health teams. They provide an overview of the preferred options for how we intend to

	commission and provide Public Health functions and services in the future.
Portfolio Holder(s):	Councillor David Brown, Cabinet Member for Health and Wellbeing
Corporate Director	Laura Ambler, Corporate Director for Wellbeing
Report Authors	Rob Carroll, Director of Public Health & Communities, BCP Council Rachel Partridge, Deputy Director of Public Health & Prevention, Dorset Council
Wards	All Wards
Classification	For Consultation

Background

1. This report updates members on progress following the disaggregation of Public Health Dorset in April 2025 and the establishment of two separate Public Health teams within Dorset Council and Bournemouth, Christchurch and Poole (BCP) Council. It also sets out the proposed future direction for how Public Health functions and services will be delivered and commissioned, including where joint working between the two councils should continue.
2. Over the past year, the priority has been to establish the two new Public Health teams while maintaining stability and continuity of services for residents. During this period, a number of Public Health programmes and contracts have continued to operate on a joint basis. This approach has ensured services remain effective and responsive while a longer-term review of commissioning and governance arrangements has been undertaken.
3. Members are asked to consider and agree a set of guiding principles that will shape future decisions. These principles emphasise that joint working should continue only where there is a clear benefit—such as improved quality, efficiency or value for money—while moving increasingly towards a place-based approach with clearer accountability within each council. Where services remain jointly commissioned, appropriate governance and oversight arrangements will ensure transparency, effective performance management and statutory assurance through the respective Directors of Public Health.
4. An overview is provided of anticipated contract and procurement activity for 2026/27 and 2027/28. This includes those services that are expected to remain joint, those that will transition to a single lead authority over time, and those subject to re-procurement when existing contracts expire. All proposals have been developed with legal, procurement and finance colleagues and are aligned with existing contractual commitments and the three-year indicative Public Health Grant settlement from April 2026.
5. The Health and Adult Social Care Overview & Scrutiny Committee is asked to consider the report and make recommendations to Cabinet that endorse the

progress made to date, agree the proposed principles for future joint commissioning, and support the recommended future direction for Public Health services.

Report

6. When Public Health Dorset disaggregated in April 2025, many Public Health programmes and contracts remained jointly managed by colleagues located across the two new Public Health teams in BCP and Dorset Council. Over the past year we have been reviewing and working through arrangements to further establish and strengthen the two Public Health teams. NHS structures are changing with the Integrated Care Board in Dorset being replaced by a larger strategic Cluster and two “Places” under the two Health and Wellbeing Boards of BCP and Dorset Councils. Creating two unitary council based public health teams aligns with this direction of travel. This is an important time to review and agree the future arrangements for providing Public Health functions in BCP Council and Dorset Council, including identifying which Public Health contracts should remain joint where it makes sense to do so to maintain service quality, performance, efficiency and value for money for local residents.
7. To guide our work and recommended direction of travel the Public Health Senior Leadership Teams, led by the Director of Public & Communities in BCP Council and the Director of Public Health and Prevention in Dorset Council have developed some guiding principles.

Our Guiding Principles

Joint Working – only where it makes sense

- We are two separate teams, with our own work priorities unless there is a good rationale for working together.
- We’ll keep joint Public Health contracts and programmes that benefit from scale.
- Joint oversight groups will set direction and keep things on track for joint work. Programme plans will be overseen jointly by the Directors of Public Health for their statutory assurance role whilst performance will be monitored on a Local Authority basis through the established governance structures within BCP Council and Dorset Council.

Moving toward a Place-Based focus

- We will increase delivery and accountability within each local authority.
- The work will be phased through 2026/27 to ensure an effective and smooth transition.
- It is important to note that some big contracts won’t change until 2027–28 due to existing contract terms. These contracts are monitored jointly and continue to provide good services for our residents.

Fairness and equity

- Leadership, commissioning, and support functions will be shared fairly.

- We'll review support functions where capacity is uneven – things like intelligence, communications, Community Health Improvement Service contracts (CHIS) processing, and procurement.
 - Schedules will be updated alongside the Joint Sharing Agreement for 2026/27.
 - The shared focus of both Public Health teams, under the leadership of the Directors of Public Health and Cabinet and Lead elected members for Health and Wellbeing is to ensure public health outcomes are delivered equitably across BCP Council and Dorset Council.
8. This paper is to seek the engagement and input of elected members through the Health and Adult Social Care Overview & Scrutiny Committee prior to an update being considered by Cabinet.
 9. The plans for the upcoming contracts and procurement activity for the Public Health Services and activities in 2026/27 and 2027/28 will be subject to the necessary governance, legal and procurement processes as appropriate for each contract by the agreed lead Local Authority.
 10. The proposed contracts and procurement activities have been developed with support from legal and procurement colleagues in both Councils.
 11. A focus of the Joint Sharing Agreement between BCP and Dorset Council relates to the management of contracts, commissioning and payments due to the need to have clear legal frameworks for the flow and payments of Public Health funding between the two Local Authorities where we have existing joint contracts. These are summarised in appendix 1.

Options Appraisal

12. The alternative option is for a complete separation of all Public Health functions, services and contracts which is considered neither feasible or desirable.

Summary of financial implications

13. The Public Health functions and services are funded through the ring-fenced Public Health Grant given to each upper tier Local Authority. BCP Council and Dorset Council each received a 3-year indicative settlement from April 2026 and all Public Health services and contracts have been modelled to ensure these are delivered within the grant amount. The efficiency and value for money considerations are part of the rationale to commission some mandated Public Health services jointly where this is beneficial.

Summary of legal implications

14. The existing Joint Sharing agreement and any subsequent revisions and updates provides the legal framework for BCP and Dorset Councils to work together to provide and commission public health services on behalf of their residents. Any future contracts will be established in accordance with the necessary legal, procurement, financial and governance arrangements as determined on a case-by-case basis.

Summary of human resources implications

15. There are no new human resources implications arising from this report. Some staff will continue to work on joint programmes of work that benefit both Councils.

Summary of sustainability impact

16. There are no sustainability implications arising from this report.

Summary of public health implications

17. Public Health is a statutory requirement for all upper tier Local Authorities. There is a clear ambition to retain and provide high quality public health functions and services to support the health and wellbeing of residents and reduce health inequalities.

Summary of equality implications

18. The work of Public Health provides high quality services to residents and seeks to improve health and wellbeing and reduce inequalities in health outcomes. Equality Impact Assessments are completed, and performance data is regularly reviewed to mitigate and address inequalities in access and outcomes.

Summary of risk assessment

19. The risks associated with this decision are considered to be low. There is a risk that disaggregating all public health contracts will potentially increase costs to both local authorities and provide lower value for money. This decision seeks to mitigate this risk and deliver better value for money for both BCP and Dorset residents.

Background papers

- **07/02/2025** - [Public health disaggregation: progress and overview of decisions](#)
- **05/02/2025** - Cabinet [Public health disaggregation: progress and overview of decisions05/02/2025](#)
- **03/03/2025** - Health and Adult Social Care Overview and Scrutiny Committee [Public health disaggregation: progress and overview of decisions03/03/2025](#)

Appendices

Appendix 1 BCP and DC planned Joint Public Health contract work during 2026/27.

Contract	Activity	Proposed Lead Local Authority	Timeframe
Community Health Improvement Service (CHIS) contracts	Novation of BCP contracts to BCP. Includes contracts for NHS Health checks, smoking cessation, Drug & Alcohol treatment, Contraceptive services.	BCP & DC	For 2027/28
Integrated Sexual Health and HIV service	Procurement of replacement contract	BCP	For 1 st April 2027
0-19 Public Health Nursing service	Procurement of replacement contract	DC	For 1 st October 2027
Breastfeeding Network Peer Support	Review and procurement to replace existing contract.	TBC	June 2027
Online Smoking Cessation Service	New contract following successful pilot	DC	In progress
Dental Epidemiological survey	Establish compliant contract for existing service provision	DC	In progress
Supervised toothbrushing	Procurement for new service as temporary arrangement.	BCP	In progress
Weight management services	Replace existing contracts	TBC	For 1 st July 2027
Smoking cessation support	Replacement/extension of existing contract (Allan Carr Easy Way)	TBC	For Oct 2026
	Vapes supply	TBC	For 1 st April 2027
AI text messaging	Procurement for new service	DC	Early part of 2026/27

Contract	Activity	Proposed Lead Local Authority	Timeframe
MyQuit app or equivalent	Replacement of existing provision	DC	For April 2027
SmokeFree app or equivalent	Replacement of existing provision (cost and volume)	DC	TBC – when existing provision is fully utilised
LiveWell Dorset digital platform	New contract or arrangement to replace existing contract	DC	For 1 st April 2027
Healthy Movers	New grant award for 3 years	DC	From April 2026