

Nottingham City Council Delegated Decision



Nottingham
City Council

Reference Number:

4910

Author:

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Department:

People

Contact:

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Subject:

Healthy Schools Team

Total Value:

£416,610 (Type: Capital)

Decision Being Taken:

We are proposing a new Health and Wellbeing team to provide a single point of contact for schools around PSHE and health promotion, providing evidence-based resources, support, training and signposting. They will offer credible and consistent support to enable schools to respond effectively and confidently to local public health priorities and statutory requirements. The team will focus on prevention, providing and coordinating support across a range of areas that impact on health and wellbeing, including sexual health, drugs and alcohol education, financial wellbeing and aspirations. The team will also develop quality marks and standards for schools to encourage whole school approaches to health and wellbeing. In addition, the team will take responsibility for the co-ordination of a PSHE network to share good practice. The new team will sit under Education in Virtual Schools.

Reasons for the Decision(s)

The new government framework for Relationships, Sex and Health Education came into force (September 2020) making Relationships and Health Education statutory for primary schools and Relationships, Sex and Health Education statutory for secondary schools. A framework for this has been provided by the government. The statutory framework ensures that all schools are covering the basic requirements, however provision across the City varies, consequently there is inequity in the amount of RSHE children receive, as it is dependent on the school they attend.

Schools choose how to deliver the curriculum and how much time they allocate. Some schools choose to use external provision. Children's experiences of the PHSE curriculum therefore differs across the city. It is important to note that following the curriculum for RSHE does not guarantee a whole school approach to health and wellbeing nor guarantee a programme focused on local need. Eating and Moving for Good Health has been recognised as a public health priority as part of the Joint Health and Wellbeing Strategy. In Nottingham City, the proportion of year 6 children living with overweight and obesity is 40.8% in year 6 with recent predictions putting this at 50.7% by 2028/29. The importance of schools in tackling this problem has been recognised in the Eating and Moving for Good Health Strategy. The healthy school's team is an important vehicle for us to implement, educate and influence healthy habits early in life through the PSHE curriculum and supporting schools set policies and change the school environment to provide opportunity for moving, eating well and meeting the emotional wellbeing needs of students. Although the nature of this work means that it cuts across several public health priorities such as sexual health, drugs and alcohol awareness, smoking prevention and mental health and wellbeing.

The healthy school team's work with schools will be informed by a robust school student health and behaviour survey. This approach to collecting data, designing a solution and then monitoring changes in the data will contribute to a culture of continuous improvement as the effectiveness of interventions can be assessed on an ongoing basis. The team will support best value for schools; the team will co-ordinate the resources and services available to schools to effectively deliver PHSE and a wider healthy school approach. The team will provide a one stop point of contact for schools to access existing resources developed by the team and relevant commissioned services such as prevent (smoking prevention education). The specialist nature of the team means that they will be able to direct towards the most effective interventions according to current best practice. There are multiple areas of the country where this model has been successfully implemented including Manchester, Leeds, Hertfordshire and Surrey. Reported successes range from improving school packed lunches to improving the Ofsted outcome for health and wellbeing to 'Good' across 95% of schools over a 7-year period. Nottingham previously had a similar model which ran until 2018 and was stopped due to financial challenge. Measures of success were self-reported by schools and included things like setting up breakfast clubs and organising access to water bottles leading to improved behaviour and fewer cases of enuresis. Other schools reported increases in children eating 5 a day, feeling comfortable to talk about their feelings and engaging in active play activities in the playground. An initial three-year period allows us to align this workstream with other schools-based contracts funded by public health. This will enable a co-ordinated review point for these associated services, enabling us to effectively evaluate and assess best value for the future. We envisage that the first year (2023/24) will be focused on establishing the team and creating resources and a healthy school quality mark. A Service Level Agreement will be created outlining year 1 deliverables with Key Performance Indicators for Year 2 and 3 being identified and added to the SLA (Service Level Agreements) before 2024/25.

The majority of the projected costs are for staffing. We have identified a need for up to four members of staff: 0.6WTE programme manager (J-Grade); 1.6WTE project officers (H grade); and 0.6WTE administrator (D-grade). This will ensure that the team remains accessible to schools. Public Health currently pay £37,000 to education for an SRE consultant post that we would want to re-define and bring into the new team. HR and finance advice have been sought and this is detailed in the advice section of this document.

Other Options Considered: Do Nothing: This would include keeping the current £37k funding for RHSE support. This funding does not provide the capacity to co-ordinate all the offers from our current public health services. At present not all schools have the capacity to prioritise a whole school approach to health and wellbeing. This maintains the current capacity within the team would require scaling back the ambitions for schools within the Eating and Moving for Good Health Strategy with issues of consistency a challenge. This is not the preferred option. We are not aware of any commercial providers for this work that we consider as an alternative. This scheme is common across the country where it is consistently an offer provided by the local authority.

Background Papers: Department of Education RHSE framework: Relationships Education, Relationships and Sex Education, and Health Education Guidance. RSE - The evidence, Sex Education Forum 2002 National Healthy Schools Programme; Developing the Evidence Base. UCL Curriculum for Life, December 2017

Published Works:

Affected Wards: Citywide

Colleague / Councillor Interests: The councillors we foresee having an interest in this area are Councillor Woodings and Councillor Barnard as Portfolio Holders for Health and Children, Young People and Schools.

Consultations:
Date: 13/03/2023
Ward Councillors: Linda Woodings, Cheryl Barnard, Jay Hayes
Councillor Woodings, Barnard and Hayes consulted at the Public Health Portfolio holder briefing on the 13th March.
Those not consulted are not directly affected by the decision.

Crime and Disorder Implications: There are no direct impacts on the determinants of crime from this decision. There is the possibility of a positive indirect social impact as poor wellbeing and relationships are risk factors in rates of offending in young people, and this service aims to provide support and education in both of those areas.

Equality: Please login to the system to view the EIA document: EIA Healthy Schools final pdf.pdf

Regard for NHS Constitution: Local authorities have a statutory duty to have regard to the NHS Constitution when exercising their public health functions under the NHS Act 2006. In making this decision relating to public health functions, we have properly considered the NHS Constitution where applicable and have taken into account how it can be applied in order to commission services to improve the health of the local community.

Relates to staffing:

Yes

Decision Type:

Portfolio Holder

Subject to Call In:

Yes

Call In Expiry date:

14/04/2023

Advice Sought:

Legal, Finance, Human Resources, Equality and Diversity

Legal Advice:

Relationships education and sex education has recently been made compulsory in primary and secondary schools respectively. There is also now a statutory requirement for health education in all state-funded schools. The proposed new Health & Wellbeing Team would support schools to meet their statutory requirements in this regard. Advice provided by Sarah O'Bradaigh (senior solicitor) on 24/03/2023.

As outlined by the report author, this decision seeks approval to establish and recruit a new Health and Wellbeing Team within Education and funded from Public Health Service for three years.

Actions	FTE	23-24	24-25	25-26
		Cost(£)	Cost(£)	Cost(£)
Create GdeJ1 Programme Mgr post	0.60	35,834*	37,458*	37,458*
Create GdeH1 Project Officer post	1.00	46,967*	49,601*	49,601*
Create GdeH1 Project Officer post	0.60	27,667*	29,259*	29,259*
Create GdeH1 Administrator post	0.60	16,257*	16,892*	16,892*
Non-Pay, Equipment and Events	13,500	5,000	5,000	5,000
Create funding budget	(140,196)	(138,210)	(138,210)	
MTFP impact	Nil	Nil	Nil	

* Note, As this is grant funded, the budget does not include a vacancy rate or any 23-24/24-25/25-26 pay inflation, but does include progression to scale point in the second year.

The total cost of this decision over three years is £416,616. There is no current base budget for this post, and it is proposed the posts will be fully funded by the Public Health Budget.

The budget, income and actual costs associated with this decision will require regular monitoring to form an audit trail against this grant funding and also to support robust forecasting. Any decisions taken will need to be captured against this decision value to ensure it is not exceeded. This information will also be used for internal/external reporting purposes as required.

Assumptions:

- . The above costs are based on the 2023-24 NCC pay scales, as yet no pay award has been announced and therefore any agreed pay inflation increase will need to be mitigated by the grant. All new starters will start at level one within the respective grade, unless they are already employed at the council at the same grade, as per Council policy.
- . The posts will be funded from Public Health Grant.
- . This decision will replaced the current agreement of £37k given to Education. Once the decision is approved a journal for the full amount each year will be transferred to Education on evidence that the public health grant has been spent on the expenditure outlined in this report.
- . The staffing costs and grant will be monitored within the Education service and the PH grant transferred to the team in a timely manner.

Risks:

Any reduction/withdrawal of the Public Health Grant will leave the posts unfunded with potentially little notice. If the grant ceases the postholder could be put at risk. If NCC redeployment is unsuccessful, the postholder may be entitled to redundancy costs. This redundancy cost will need to be met by Public Health within existing resource allocation

Further approval will be required:

- . To establish any additional posts not requested in this decision.
- . If there are any changes to the proposals outlined in this decision.

Advice provided by Tracey Moore (Senior Finance Technician) on 27/03/2023.

**Equality and Diversity
Advice:**

The EIA has been reviewed, there are no impacts to any of the protected characteristics and therefore happy to sign off. Advice provided by Rosey Donovan (Equality and Employability Consultant) on 29/03/2023.

HR Advice:

Management is proposing to create a new Health and Wellbeing team to provide single point of contact for Schools around PSHE and Health. Management have confirmed they have the required funding to create 3 new roles and regrade a current role (SRE Consultant currently graded at H). This funding is only secured for 3 years and therefore 3-year fixed term contracts are being proposed.

These roles will sit in Education Strategy under Head of Virtual School. HR provides reassurance to the Decision Maker that this new structure complies with DMA principles.

HR advises the Decision Maker that the SRE Consultant post needs to be regraded to incorporate the additional duties of team management for the period of 3 years only, and then the post holder should revert back to their substantive grade (H) once the additional duties have stopped. Management will need to ensure they are consulting with the colleague impacted by this regrade and are clear on the timeframes.

After discussions with Management I am aware that the roles have not been through job evaluation yet, therefore the grades mentioned above are indicative. Management need to ensure the roles have been through job evaluation before they start to recruit.

Management will need to liaise with the transformation office in respect of the Customer Service / Business Support programme to assess whether the project/ admin posts are in scope for this centralised project. HR advice is that these roles are not recruited to until this conversation has taken place.

As the proposed new posts are temporary, an appropriate exit strategy must be in place in order to terminate the contract in line with NCC guidance in the event that the posts are not made permanent at the end of the fixed term period. Risks should be managed with regard to the impacts of fixed-term workers and allowances will need to be made within the department's budget for redundancy costs given the length of the contract and potential continuity of service implications. Timelines associated with notice periods and redeployment obligations will also need to be considered.

Management will need to ensure that recruitment is conducted through the appropriate processes for the newly created roles, with a CLT panel approval process in place during spending controls for all newly created posts. Management should apply pay policy principles in the starting salary for all new post holders and seek HR advice if necessary. There will need to be a support and development plan and robust performance objectives for the new post-holders once appointed in line with managing performance through the new probationary policy. Future Ways of Working should be discussed with the employee in relation to category of worker and any expectations should be clearly outlined with regard to attendance in the office, dependant on the role and responsibilities.

Louise Hobbs
HR Consultant
23/03/2023

Advice provided by Louise Hobbs (HR Consultant) on 23/03/2023.

Signatures

Linda Woodings as Portfolio Holder (PH Adult Social Care and Health)
SIGNED and Dated: 05/04/2023
Lucy Hubber (DPH)
SIGNED and Dated: 05/04/2023