

Combined Assurance

Status Report Public Health



Assurance

Date: January 2016

Contents

<i>Introduction</i>	1
<i>Key Messages</i>	2
<i>Next Steps</i>	4
<i>Critical Systems</i>	5
<i>Strategic Risks</i>	11

Contact: Dr Tony Hill, Director of Public Health
Details: Tel: 01522-553960
tony.hill@lincolnshire.gov.uk

1. Introduction

This is an updated combined assurance report following the development of the combined assurance map first reported in March 2014.

We have again worked with management to show what assurances the Council currently has on the areas of the business that matter most – highlighting where there may be potential assurance ‘unknowns or gaps’.

We gathered and analysed assurance information in a control environment that:

- takes what we have been told on trust, and
- encourages accountability with those responsible for managing the service.

Our aim is to give Senior Management and the Audit Committee an insight on assurances across all critical activities and key risks, making recommendations where we believe assurance needs to be stronger.

Scope

We gathered information on our:

- **critical systems** – those areas identified by senior management as having a significant impact on the successful delivery of our priorities or whose failure could result in significant damage to our reputation, financial loss or impact on people.
- **due diligence activities** – those that support the running of the Council and ensure compliance with policies.
- **key risks** – found on our strategic risk register or associated with major new business strategy / change.
- **key projects** – supporting corporate priorities / activities.

Methodology

We have developed a combined assurance model which shows assurances across the entire Council, not just those from Internal Audit. We leverage assurance information from your ‘business as usual’ operations. Using the ‘3 lines of assurance’ concept:

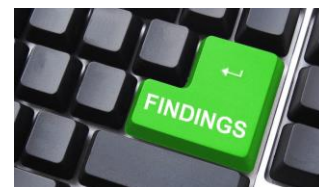


Our approach includes a critical review or assessment on the level of confidence the Board can have on its service delivery arrangements, management of risks, operation of controls and performance.

We did this by:

- Speaking to senior and operational managers who have the day to day responsibility for managing and controlling their service activities.
- Working with corporate functions and using other third party inspections to provide information on performance, successful delivery and organisational learning.
- Using the outcome of Internal Audit work to provide independent insight and assurance opinions.
- We used a Red (low), Amber (medium) and Green (high) rating to help us assess the level of assurance confidence in place.
- The overall assurance opinion is based on the assessment and judgement of senior management. Internal audit has helped co-ordinate these and provided some challenge **but** as accountability rests with the Senior Manager we used their overall assurance opinion.

2. Key Messages

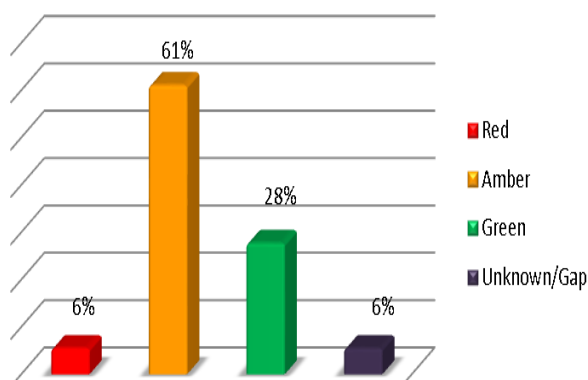


The Public Health Directorate delivers the statutory specialist public health service which gives public health advice and input; assurance on a range of issues which protect the health of the public; commissioning of some major services which affect wellbeing and community resilience; and the delivery of very small number of front line services. We also commission and lead on added responsibilities around Libraries and Heritage; the Customer Service Centre; Registration Services and the Coroners Services.

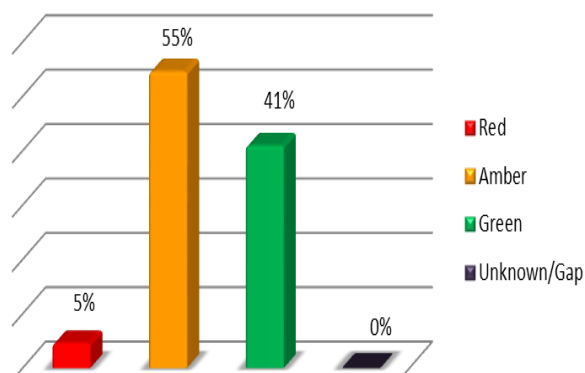
The Directorate adopts the corporate methodology for managing risks and assessing our assurance status. I am satisfied that these are working effectively. We also have some very specific assurance processes associated with my statutory functions. These include the necessary information governance arrangements for the personal health data and information we hold including the appointment of a senior member of my staff as our Caldicott Guardian. In addition, my statutory duty to assure the health protection arrangements for our population delivered by a range of organisations is assisted by the Local Health Resilience Partnership and the Health Protection Board: both of which I chair.

The highest risks identified in the report last year were associated with services which were being re-commissioned. These recommissioning exercises have been very successful in achieving both better quality of the services and better value for money. We have avoided or mitigated the anticipated risks. The process for deciding on the future of library services following the Judicial Review and the subsequent commissioning of the library contract have been successful and we won a second Judicial Review.

Overall Assurance Status -
2014/15



Overall Assurance Status -
2015/16



Key Messages Continued

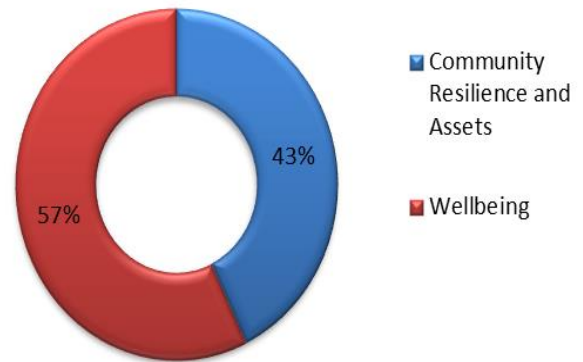


In this current year the greatest risks are those associated with reprocurement exercises, for example of substance misuse services, and the sustainable delivery of coroners services. We will continue to use our existing successful processes to reduce the procurement risks although these are increased by the financial challenges we face. For the coroners services, the risks are due to increasing demands and to therefore increasing costs.

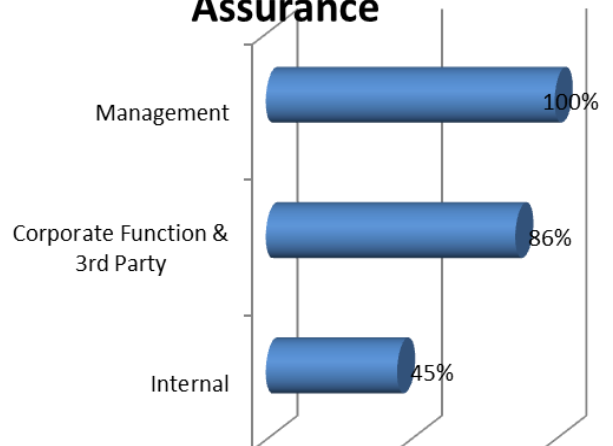
Many of the critical activities are supported by high levels of corporate or third party assurance. These may be provided through regular reports submitted to Scrutiny Committees or processes such as Inspections and Peer Reviews.

Assurance is also provided through reviews conducted by Corporate Audit and Risk Management. This provides independent oversight and added value through recommendations made for improvement and complements any external reviews or inspections carried out. Any recommendations made are monitored to ensure implementation with progress reported to the Audit Committee.

Public Health - Distribution of Assurance



Who Provides Your Assurance



3. Suggested Next Steps

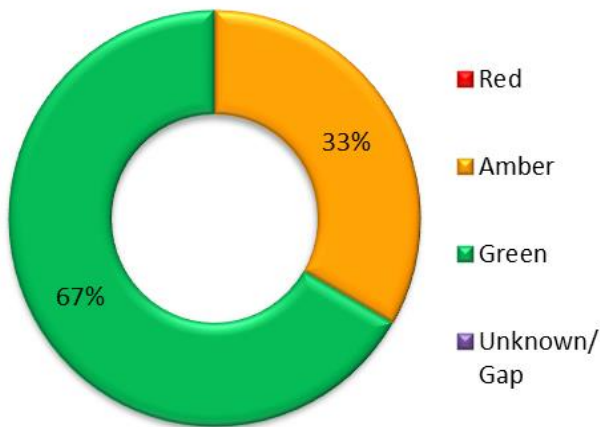
Over the coming year our next steps to maintain and improve assurance are

- Maintain our current procurement processes to ensure that we achieve quality gains and efficiency savings
- Continue with our health protection assurance arrangements and make improvements where possible including pressing for better information sharing by NHS England.
- Develop options for the future arrangements for coroners services for consideration by the Executive.

4. Critical Systems



Community Resilience and Assets



Advice, information and support services from community and voluntary sector infrastructure organisations

This activity currently includes a large and wide-ranging area of work, supporting the voluntary and community sector. Through working closely with voluntary organisations, investing time and resources; Lincolnshire has a professional, streamlined, effective and increasingly efficient voluntary sector infrastructure, which is taking on growing levels of responsibility. This includes voluntary and community sector training, support and development; volunteering opportunities, information sharing, development and promotion of volunteer work, access to and streamlining of, community grants. Their role is to ensure that the voluntary sector in Lincolnshire is strong, connected, efficient, well trained and consistent.

Community engagement and development

The Community Engagement Team's role is to widely advertise consultations; giving expert advice and feedback to ensure information is accessible, clear and simple and that engagement events and activities are delivered appropriately, enabling (or allowing) the council to effectively use what people tell us (You said, We did). The team is responsible for the corporate and legislative oversight, expertise and profile of the entire spectrum of Community engagement activity, from information giving, to consultation, to co-production. The Community Engagement Strategy is due to renewed shortly and will take into account the recommendations within the report presented to Formal Executive in September 2015, including closer working relations with Councillors. The team have the responsibility of managing all community grant agreements, including the Lincolnshire Armed Forces Community Covenant, governance boards, steering groups and performance monitoring meetings within the agreement of the outcome framework. The team also have responsibility for the implementation and promotion of the "Big Society" agenda, which includes the administration of the entire Big Society Members' Fund, the management, oversight and development of the voluntary sector.

Volunteering support

This work governs the brokerage for volunteers in Lincolnshire, identifying and fulfilling volunteer opportunities, providing training, oversight, promoting equality and diversity of experience, and consistency in implementation of policy and management. This provides an effective support network for volunteers and agencies, adding value through the expertise and advice provided; and giving guidance to ensure volunteering brings value to the individuals and organisations involved.

Financial inclusion

The Income Maximisation Scheme is a county-wide service designed to safeguard the most vulnerable people receive financial support and advice, ensuring that they are aware of and able to claim the full range of benefits and support that they are eligible for. The scheme is operated by CABx and specialists advisors are available to complete home visits to those who are isolated and unable to access support and advice in any other way.

Community Hubs

A recent and growing area of responsibility has been the implementation and development of Community Hubs, now in the second year. Working with partners such as District Councils, Lincolnshire Association of Local Councils, Dept. of Work and Pensions Involving Lincs and LCC service areas (e.g. Libraries & Youth Services) the project has identified community hubs already existing and those that wish to develop within communities where currently none exist. Four Community Advisors work with other service providers and organisations to identify the breadth of support and guidance that is currently in existence and any gaps in provision, at the same time establishing and further developing a network of community hubs which will deliver local services to local communities and, through sharing, help ensure the sustainability of the hubs and build community resilience. It should be noted that this is a temporary and time limited project which was due to end on 31 March 2016. Given the delays in the library restructure and recommissioning, as a result of the Judicial Review, the decision was taken to extend this temporary provision until December 2016 to better enable the projects ability to support community libraries in the medium and long-term.

Library & Information Services

Libraries are a statutory duty in the Public Libraries and Museums Act 1964 and as such fall under the remit of Secretary of State for Culture, Media and Sport who has the power to intervene if these duties are not being met, and although there is no national standard or accreditation scheme they are advised by Arts Council England. Tier 1 local authorities have to provide a "comprehensive and efficient" library service under section 7 of the act, but are at liberty to determine what this means in practice within their locality. In Lincolnshire, the council's Executive determined the statutory provision outlined in the report to Executive in February 2013.

This approach was subject to a Judicial Review in July 2014; Community Right to Challenge in October 2014 and as a result triggered a full procurement of library services. In December 2015, a report was presented to Executive Council with the recommendation that the LCC library service be delivered by an external supplier. This was accepted and agreed, and Public Health will oversee the transition of these services between December 2015 and April 2016 when the new contract will start. The management of this process is being lead by the Commissioner for Community Assets and resilience, supported by a multi-disciplinary Transition Board.

Archives

The Archives function is covered by a number of Acts of Parliament. Archives are regulated and inspected by The National Archives under a national Accreditation Scheme. During 2014 Lincolnshire Archives retained its full accreditation following an inspection and review by The National Archives (inspection report available).

Lincolnshire Archives offers a public search room where members of the public are welcome to consult original archives, microfilm resources and library material relating to the county of Lincolnshire and its connections in other parts of the UK and overseas. Records held at Lincolnshire County Council's Archives Service have been named as amongst 38 national collections designated as having outstanding national and international importance. Other activities on offer are talks and group visits, school and further education services and lecture room hire. In addition visitors are able to copy documents and pay for research.

Heritage

A comprehensive county heritage service running a number of sites, and providing collections care and access to the heritage collections of Lincolnshire including;

The Castle - The Castle has undergone major redevelopment works as part of the Lincoln Castle Revealed project. This £19.9m project, part funded by Heritage Lottery Fund, European Regional Development Fund & Lincolnshire County Council will restore & reveal the history & stories of Lincoln Castle in time to celebrate the 800th anniversary of Magna Carta.

The Collection - brings together Lincoln's Museum and the Usher Gallery. The Usher Gallery has a wide ranging collection of fine and decorative art and there is a large gallery hosting a vibrant programme of temporary exhibitions.

The archaeological collection - covers 300,000 years of history from the earliest inhabitants of Lincolnshire to the Eighteenth Century. Some highlights of the collections are prehistoric finds from the River Witham, treasures from Anglo-Saxon burials and finds from Lincoln's rich Roman, Viking and Medieval heritage. There are also significant collections of coins and medals, arms and armour, ethnography and natural science. The Collection also hosts a series of talks, demonstrations and events throughout the year and has a searchable online database.

Gainsborough Old Hall - built around 1460 by Sir Thomas Burgh. The hall has gone through many phases of use, including as a theatre, and as a Masonic lodge as well as lodging rooms. In 1949, after many years of neglect, the hall was saved from demolition by the Friends of Gainsborough Old Hall. In 1970 the hall was given to the nation by Sir Edmund Bacon.

Lincolnshire County Council now manages the hall as part of its heritage service on behalf of English Heritage. Following a period of visitor improvement work in early 2012 the Hall now has a newly refurbished gift shop and café; award winning audio-visual tour guides (available free of charge); a civil ceremonies licence and a dedicated wedding hospitality service. Corporate hospitality packages are also available, and plans are in place to develop these further.

Museum of Lincolnshire Life

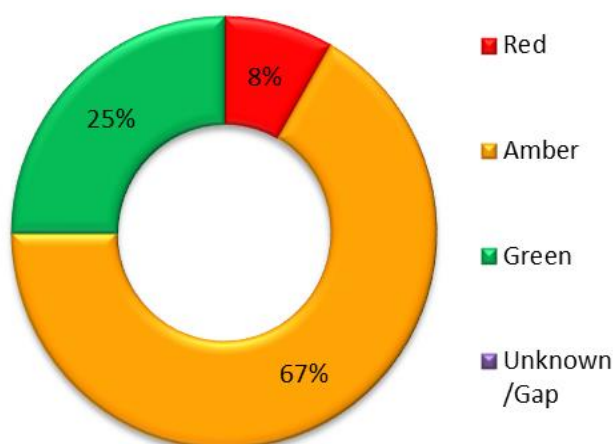
The Museum of Lincolnshire Life - the largest and most diverse community museum in the county. The collections include Lincolnshire farm wagons and machinery, a unique World War I tank, steam and oil engines, locomotives and road rollers.

Ellis Mill, a working 18th century Grade II listed windmill, is located around the corner from the museum. The Mill is managed through the Museum but opened to the public by a team of dedicated volunteers. There are also a further three windmills, Alford, Burgh-le-Marsh and Heckington.

Customer Service Centre

In many cases the CSC provides a first point of contact for members of the public accessing council services. Since April 2015, this service has been the responsibility of an external supplier, Serco, though Community Assets and Resilience commissioning retain the Customer insight and development side, along with the contract management aspects of the CSC.

Wellbeing



Health Improvement, prevention and Self-Management and Health Protection

Public Health staff continue to support the Director of Public Health's statutory responsibility for the assurance of the health protection function. This involves scrutinising and challenging immunisation and screening programmes commissioned by NHS England; both the strategic challenge of health protection plans relating to Emergency Preparedness and Response (EPRR) and participation in the response; ensuring that health protection incidents and outbreaks are managed effectively; the assurance of Infection Prevention and Control (IPC) functions across health and social care and the delivery of a community IPC support function.

The Health Protection Assurance framework (which is the means by which assurance is obtained) has been revised following internal audit. It remains robust but better reflects what is achievable in practice. Issues around the provision of immunisation uptake data remain but a solution has been found which should ensure that this data is available in the future. Following an assessment against the EPRR core standards, Lincolnshire NHS providers have again provided assurance that robust plans are in place to enable a coherent and timely response to a major incident. This has been supported by a number of multi-agency exercises. From an IPC perspective, specific performance indicators relating to this area have been encompassed into Adult Social Care (ASC) contracts. The team have continued to provide IPC training to both primary and social care staff, the uptake for which has risen dramatically; and have worked closely with ASC to provide IPC advice and support to the contracting function.

The Lincolnshire Health Protection Board continues to provide an opportunity to engage stakeholders on a range of health protection issues and has provided a useful springboard to highlight particular service issues and ensure that additional resources are put in place by NHS commissioners.

Support to CCGs (Public Health Professional Advisory Services)

One of the Public Health responsibilities for Local Authorities is the provision of public health advice to NHS Commissioners. This is a mandated responsibility. To meet this responsibility in Lincolnshire there is a Memorandum of Understanding which establishes a framework for the working relationship between Lincolnshire County Council's Public Health directorate and Lincolnshire's Clinical Commissioning Groups (CCGs). Each of the four CCGs is supported by a named Public Health Consultant who contributes at Executive level to the decision making process at Governing Body and relevant clinical meetings and, for example, supports the development of evidence-based care pathways and service specifications; provides public health input into business cases; contributes advice on evidence-based prioritisation policies; and supports commissioning strategies that meet the needs of vulnerable groups. The arrangement provides an excellent opportunity for LCC to build and maintain close links with clinical commissioners and complements the Health and Wellbeing Boards, Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy. During 2016, support to CCGs should improve as a result of increased capacity following the staff review in 2015.

Wellbeing Service

The Wellbeing Service is designed to promote confidence in living independently. By delivering through a preventative approach The Wellbeing Service should enhance wellbeing, and reduce or delay escalation to statutory support services.

The service is designed to improve accessibility to support services when they are needed, deliver services that are tailored and fit for purpose and allow equal opportunity regardless of location within Lincolnshire.

The service can include;

- A brief period of support to achieve person centred outcomes with a focus on promoting independence
- Access to Simple Aids for Daily Living such as kettle tippers, key safes and raised toilet seats.
- Minor adaptations including grab rails, hand rails, second banister rail and alterations to steps.
- Supply and installation of Telecare equipment which is linked to a 24 hour monitoring centre.
- A Wellbeing Response service offering a 24 hour 7 day a week service, attending a person's property for non-medical emergencies.
- A Home Safe service which is a transport and resettling service for individuals returning home from a hospital stay.

The Wellbeing Service contract with providers has been extended until 31st March 2017, and a recommissioning process currently being looked into to determine what this service may potentially look like post April 2017.

Registration, Celebratory and Coroners Services

In 2015 customer satisfaction levels with Registration and Celebratory continued to remain very high with another successful review for Customer Service Excellence. This is the sixth year running that the service has gained 100% compliance in meeting the government standards for this award.

The Coroners Service has continued to respond to new guidance from the national Chief Coroner. The demands on the service especially in relation to Deprivation of Liberty Safeguarding Authorisations has remained high, particularly noticeable due to a higher death rate in 2015. The Service Improvement Plan following a comprehensive internal audit of the Coroners Service continues with a number of recommendations firmly embedded in the service. A further 'Peer Review' was completed in Spring 2015 which has been helpful in providing feedback on service delivery and opportunities for further developments. The service continues to look at ways to improve which will result in enhanced support to bereaved families, the Coroners, and the remit to continue to improve efficiency and timeliness of coroners' caseloads. In addition budget monitoring is fully established to review expenditure and aid budget projections. Financial risk remains in relation to Long Inquest payments but opportunities should arise in 16/17 to provide further mitigation.

5. Strategic Risks



Public Health has no strategic risks. Last year we reported a strategic risk:

Integration with Health and Social Care

This has been removed from the Strategic Risk Register of Lincolnshire County Council as the financial risk is carried by the Health Service.

