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MEMORANDUM OF UNDERSTANDING

Between

Essex County Council (ECC) Public Health Team

And

Tendring District Council

IN RELATION TO “Building Public Health Capacity Programme”

This Memorandum of Understanding sets out the agreement between ECC and Tendring District Council or the funding of a Public Health Practitioner/Officer (PHP/O) post and the provision of a health grant to promote health and wellbeing priorities in the local areas. The Practitioner/Officer will be employed by Tendring District Council where PHP/O will be stationed. ECC Public Health will support in recruiting a suitable candidate for the role as this is a jointly funded post.

Oversight and direction for both funding providers will be via the Consultant in Public Health through Essex County Council.

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Glossary

Terms used in this document:

CIC	Community Interest Company
CIO	Charitable Incorporated Organization
CPH	Consultant in Public Health
ECC	Essex County Council
HOS	Head of Service
LAPH	Local Authorities Public Health <i>Network</i>
L&D	Learning and Development
MOU	Memorandum of Understanding
PHP/O	Public Health Practitioner/ Officer
JHWS	Joint Health and Wellbeing Strategy
UKPHR	UK Public Health Register

THIS AGREEMENT is dated

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PARTIES

The parties to this Memorandum of Understanding (MoU) are:

- (1) **ESSEX COUNTY COUNCIL** of County Hall, Market Road, Chelmsford, Essex, CM1 1LX
- (2) **Tendring District Council** of Town Hall, Station Road, Clacton-on-sea, Essex, CO15 1SE

Hereinafter where the context permits, referred to collectively as **‘the Parties’** and individually as **‘Party’**

The parties of this memorandum of understanding agree completely to the conditions applied to it and are therefore ready to agree to the following:

1. Background

In 2015, Essex County Council (ECC) and the 12 districts collectively initiated the ‘Building Public Health Capacity’ programme. This was aimed at devolving Public Health capacity to the lower tier authorities as an approach to address the wider determinants of health at a local level. This has resulted in continuous funding of a Public Health Practitioner/Officer (PHP/O) post at the local authorities (districts, city, borough) and a dedicated Health and Wellbeing grant provision for the delivery of Public Health agenda.

A comprehensive evaluation of the programme was carried out in Q3 2023, and the findings have necessitated the redesign of the current agreement to bring onboard the proposed recommendations¹.

This MoU defines the purpose and level of resources being granted by ECC Public Health to Tendring District Council in delivering our shared public health ambitions including collaboration to reduce health inequalities and improve outcomes across the wider determinants of health. Additionally, it acknowledges the importance of understanding the unique contexts of different districts in guiding our collaborative efforts effectively. It also sets out a formalised and consistent approach to working on the parties’ agendas.

2. Priorities

The role of the PHP/O will focus on influencing and building relationships necessary to deliver the priorities in the Public Health Business plan², the Essex Joint Health and Wellbeing Strategy³, and local health and wellbeing strategies, including specific work on the following agendas.



ECC Report template

1 - portrait.pdf

2 [WPH&C Business Plan 2022-2025 FINAL PDF.pdf](#)

3 [Essex Joint Health and Wellbeing Strategy 2022 - 2026](#)

- a. Public health advice in spatial Planning. The PHP/O shall undertake specific duties to achieve the key objectives as detailed in Appendix A to this MoU.
- b. Health behaviour change programmes
- c. Reducing inequalities across the priority domains

3. Principles of operation

Our commitment is to foster sustainable and effective health interventions through community-driven efforts. The parties agree to adopt the following principles when carrying out the programme activities:

- a. Place-Based working: PHP/O would adopt a person-centred, bottom-up approach. This involves working closely with people who live and work locally to understand their unique needs. This aims to gain local knowledge and insight, allowing a focus on the strengths, capacity, and knowledge of everyone involved while empowering individuals and communities to thrive wherever they are.
- b. Asset-Based Community Development: PHP/O would focus on harnessing and enhancing the existing strengths and assets within the locality, rather than imposing predefined solutions. This would involve collaboration with residents, local organisations and partnerships to support community led initiatives, leveraging the unique strengths, skills, and resources present within the community. This approach empowers communities, fosters local ownership, and contributes to building resilience, ensuring that the Public Health interventions are both relevant and impactful.
- c. Additionality: PHP/O would focus their efforts on projects that address multiple priority areas, aiming for a broader range of positive outcomes. The goal is to choose work areas that deliver on several key objectives at the same time.

4. Governance

The governance structure defined below provides a structure for the development and delivery of the programme.

4.1. Guiding principles

The Programme's governance will:

- a) provide strategic oversight and direction;
- b) be based on clearly defined roles and responsibilities at organisation, group and, where necessary, individual level;
- c) align decision-making authority with the criticality of the decisions required;

- d) provide coherent, timely and efficient decision-making; and
- e) correspond with the key features of the Programme governance arrangements set out in this MoU.

4.2. Programme Management

The Consultant in Public Health in conjunction with representatives from the LAPH network will provide strategic management at programme and workstream level. They will provide assurance to the Sponsors' that the key objectives are being met and that the programme is performing within the boundaries set in the MoU.

The team shall have responsibility for the creation and execution of the programme plan and deliverables, and therefore they can draw technical, commercial, legal and communications resources as appropriate into the Programme. The programme management team shall meet biannually or as when needed.

4.3. Line Management and Professional Development

Line management will require matrix working between Tendring District Council and ECC Public Health. The District Manager will be accountable for the direct line management of PHP/O's daily operations. The annual objectives and workplan will be set and supervised by the PHP's line manager in collaboration with the ECC's Heads of Service (HOS) and Consultants in Public Health (CsPH) aligned to the Alliance/Health Care Partnership area where the local authority is located. This will ensure that the priorities and the progress on the work streams are progressing in an agreed way with a clear line of accountability for the work plan.

ECC's Consultant in Public Health will be accountable for professional and training development of the PHP/O. This will include identifying learning opportunities and liaising with the line manager to ensure that PHP/O maintains all required professional standard, training, and supervision required to grow professionally and carry out the job.

5. Role and Responsibilities

5.1. The parties shall undertake the following roles and responsibilities to deliver the Programme:

5.2. Public Health Practitioner/Officer

- Contribute to the development of partnership working and support the implementation of strategic plans and programmes to be delivered across Tendring District Council including co-ordinating services to maximise the public health outcomes in-line with ECC's strategic Public Health plans.
- Promote a culture of delivering Public Health interventions that are evidence led and based

on needs and the delivery of action plans as agreed with the Public Health Head of Service and Consultant in Public Health.

- Contribute to the development and review of Health and Wellbeing strategies and policies which support evidence-based practise within the area of Public Health.
- Enable and support the framework for health and planning, using a Health in all Policies (HiAP) approach to target the wider determinants of health.
- Provide local insights on existing needs and inequalities across the public health priorities and fostering strong connections within the community by serving as a bridge between people, resources, and opportunities.
- Ensure appropriate systems are in place to manage and monitor award of the Public Health grant on interventions that are additive and meet the needs of the local population.
- Attend the PHP/Os' Professional support network meeting with ECC Public Health and the CPH a monthly basis.
- Produce an annual impact report against the targets and utilisation of the funding that has been granted to projects.

5.3. Line Manager

- Responsible for employment and hosting of PHP/O in the Local Authority.
- Lead on the setting of annual objectives, ensuring that the resources available are targeted towards their achievement. Thus, ensuring a progressive and pro-active culture of delivery and change.
- Oversee the daily operations and tasks carried out by the PHP/O.
- Support PHP/O in influencing Public Health agenda through providing access, and building relationships within, between and across teams in the local authority.
- Facilitate PHP/O annual appraisals and personal development & training plan.
- Approve and quality assure projects funded by the Public Health and wellbeing grant.
- Attend and contribute to the Local Authority Public Health (LAPH) network meeting.

5.4. ECC Public Health

- HOS and CsPH will contribute and support PHP/O annual objective setting with their line manager.
- Support in the recruitment of suitable candidate for the PHP/O role.
- Work with line manager to conduct PHP/O annual appraisal and ascertain their learning & development need.
- CPH to support training and professional development of PHP.
- Support in organizing PHP/O monthly professional support network meetings.
- CPH to coordinate LAPH network meeting.

6. PHP/O's Professional Development

The following ways of working are strongly recommended to support PHP/O's professional development.

- Identify shared learning needs among members of staff from both parties and coordinate resources and capacity to address those needs.
- Have a dedicated Continuous Professional Development (CPD) calendar including a range of learning sessions, workshops, and events to support professional growth of the PHP/O.
- Integrate PHP/O into Essex County Council (ECC) staff development and training opportunities. This will ensure that all team members can access a wider range of training resources and programs.
- Leverage the strengths of the Public Health workforce to enhance learning by implementing coaching and shadowing opportunities. Pair less experienced PHP/Os with seasoned members of the practitioner's network or ECC Public Health team to facilitate hands-on learning and effective knowledge sharing.
- Recommend sessions designed to facilitate personal and professional development with both learning and networking elements to address specific skill and knowledge gaps within the team.
- Strongly recommend the use of UK Public Health Register (UKPHR) standards as a guiding framework for appraising the professional development of practitioners. This approach will provide a consistent benchmark for assessing progress and identifying further development needs.
- Working collaboratively and attending sessions ran by the ECC Spatial Planning team to strengthen learning and development of the PHP, further embedding this agenda into the role.

7. Funding

Funding for the PHP/O post is subject to the availability of the nationally allocated Public Health ring-fenced grant, as well as ECC's ability to manage any financial or operational challenges. Additionally, the recipient would be required to meet the outcomes set by both parties in order to maintain continuous funding. In this context, we also anticipate that the local authority will demonstrate their commitment to this initiative by contributing funding for the Public Health Practitioner post, thereby strengthening the financial base of the project. The proposed funding structure begins in April 2024, with one year confirmed and an additional two years tentatively planned. Details are as follows:

Contributions

Year	2024 – 2025 Confirmed	2025 – 2026 In Principle	2025 – 2027 In Principle
ECC Salary contribution	£22,000	£22,000	£22,000
Tendring District Council Salary Contribution			
Health and Wellbeing Grant	£43,946	£43,946	£43,946
*L&D	£10,000	£10,000	£10,000

* £10,000 has been top sliced from the programme budget to be distributed across all local authorities for Learning and Development, the monies will be used at Essex County Council's discretion.

In recruiting to this post, the signatories collectively agree to adopt the following principles:

- a. The final approval to appoint must be authorised by both parties.
- b. Appointment to the post is subject to a joint agreement between all parties with a view to minimize the risk of high redundancy costs.
- c. Essex County Council Public Health commits to allocating a proportionate contribution from the allocated Public Health grant towards future redundancy costs, to ensure the local authority is not financially disadvantaged.
- d. The contribution from ECC Public Health can be carried over from one year to another, but if any monies are left at end of this agreement, they will be required to cover any redundancy cost.
- e. Any proposed deployment or revision to the agreed deployment will require a simple agreement between the local authority Nominated Officers and the Public Health Nominated Officer and in writing.
- f. ECC will raise a purchase order for both grants at the end of every financial year, and this will serve as an annual funding confirmation to the local authority.

7.1. Criteria for Spending the Health and Wellbeing Grant

The conditions for awarding the grant will adhere to the governance procedures outlined by Tendring District Council, supplemented by the following guidance.

If there is a dual funding application for FAB funding and Health & Wellbeing grant, this will be subject to further review by the PHP Manager and ECC Consultant of Public Health.

The health and wellbeing grant is open to UK registered;

- Voluntary and Community Organisation
- Charitable Incorporated Organisation (CIO)
- Not-for-profit company limited by guarantee
- Community Interest Company (CIC)
- Educational Settings
- Statutory body (including NHS Integrated Care Systems, local authorities, town, parish, or community council)

7.2. The health and wellbeing grant will fund services that meet criteria A and either B or C as outlined below.

- A. Projects that address a health and wellbeing priority in the local area as it pertains to
 - the agenda on the Public Health Business Plan and the Essex Joint Health and Wellbeing Strategy, and local health and wellbeing strategies.
 - reducing health inequalities by focusing on the wider determinants of health
 - supporting long term independence for all sections of the local community
- B. Projects that are 'additive,' meaning the services and activities aimed at delivering multiple outcomes of different priorities rather than a single outcome.
- C. Organisational/ workforce development - this can include testing new ways of working, developing governance and leadership, developing, and sharing impact and learning, and increasing capacity through the employment of a Public Health Apprentice.

8. Evaluation

This MoU recognizes the importance of evaluation as an integral component of the development process of the PHP/O. Hence, the parties agree to foster a culture of continuous learning and improvement, viewing evaluation not merely as a performance metric, but as a tool for ongoing development. It is recommended to take the following approaches.

- a. Include regular reflection on practice, learning from both successes and failures, and making necessary adjustments will be encouraged.
- b. The evaluation process should be closely tied to the stories and outcomes derived from lived experiences, providing a more holistic view of the programme's effectiveness and its real-world impact.
- c. Conduct regular appraisals of PHP/O portfolio using the UKPHR standards. Ensure that the practitioner is developing in alignment with recognized public health standards by confirming that the program meets essential quality and performance criteria.

- d. Set clear and measurable objectives for each year, aligned with the overall goals of the programme.
- e. evaluation will be an ongoing process, with regular evaluations such as mid-year and end-of-year assessments providing timely feedback and allowing for quick course corrections.

The ultimate goal of these principles is to create a responsive, adaptable, and continuously improving programme.

9. Term and Termination

- This MoU shall commence on the date of signature by both parties and will remain in effect until modified or terminated by any one of the parties, by mutual consent.
- Any Party may give three months' notice in writing to the other Party to withdraw from the programme at any time.
- In the absence of a further agreement, this MOU shall cease by 31st March 2027.

10. Nominated Persons

For Local Authority one – Essex County Council

Name:

Title:

Address:

Telephone:

E-mail:

For Local Authority two – Tendring District Council

Name:

Title:

Address:

Telephone:

E-mail:

11. Agreement

We undertake to implement and adhere to this Memorandum of Understanding

Signed for and on behalf of ESSEX COUNTY COUNCIL	
Signature:
Name:
Position:
Date:
Signed for and on behalf of Tendring District Council	
Signature:
Name:
Position:
Date:

APPENDIX

Appendix A Spatial Planning and Health

Role of Public Health Practitioners/Officers in Planning and Health

Focus: Implementing health in all policies through public health engagement in spatial planning

Specific role and responsibilities with support from ECC Public Health and Spatial Planning Team:

1. Public health engagement at district level as a non-statutory consultee to provide advice on the implementation of Health Impact Assessments according to local plan policy and thresholds
2. To quality assure submitted HIA's and provide a public health response to development management
3. Collaborate with the respective LPA Planning Policy team, ECC Spatial Planning Team and Public Health Team to integrate health considerations into local plan policies

What	Resource requirement	How	Why
Public health engagement at district level as a non-statutory consultee to provide advice on the implementation of Health Impact Assessments according to local plan policy and thresholds.	<ul style="list-style-type: none"> • PH Officer time • LPA DM team engagement • LPA Planning Policy engagement 	<ul style="list-style-type: none"> • Provide advice and help shape scope of HIA's to be conducted for planning applications (threshold will depend on local plan policy) • Learning and guidance supported by ECC Spatial Planning/Public Health • Collaborate with respective LPA DM team 	<ul style="list-style-type: none"> • To ensure we can positively influence the scope of the HIA • To ensure local health and wellbeing issues, health inequalities are well considered in the impact assessment
To quality assure submitted HIA's and provide a public health response to development management	<ul style="list-style-type: none"> • PH Officer time • LPA DM team engagement • LPA Planning Policy engagement 	<ul style="list-style-type: none"> • Undertake quality assurance (QA) review of submitted HIAs using Wales Health Impact Assessment Support Unit (WHIASU) framework or another recognised QA framework • Learning and guidance supported by ECC Spatial Planning/Public Health • Collaborate with respective DM team 	<ul style="list-style-type: none"> • To ensure submitted HIA's are of good quality and adequately and proportionally consider the impacts on health and wellbeing • To ensure recommendations of the HIA are reported back and aligned with key decision timelines of the specific application and providing responses to DM/case officer
Collaborate with the respective LPA	<ul style="list-style-type: none"> • PH Officer time • ECC Officers 	<ul style="list-style-type: none"> • Work with respective LPA Planning Policy team ECC 	<ul style="list-style-type: none"> • Embedding explicit public health and well-being relevant

Planning Policy team, ECC Spatial Planning Team and Public Health Team to integrate health considerations into local plan policies

- LPA Planning Policy engagement

Public Health and Spatial Planning team where possible to develop and embed health considerations

- policies into local plans as strong levers for addressing public health objectives
- National Planning Policy Framework (NPPF) makes clear that ‘Planning policies and decisions should aim to achieve healthy, inclusive and safe places...’
 - Planning Practice Guidance (PPG) covers matters such as health inequalities, healthy food environments, plus overweight and obesity and how planning can influence these.

Abbreviations:

LPA – Local Planning Authority

DM – Development Management

ECC – Essex County Council

HIA – Health Impact Assessment

Appendix B

ECC funding contributions for Districts, Boroughs and City Councils

Local Authority	Salary (£)	Grant (£)	Learning & Development (£)
			10,000
Basildon	22,000	50,288	
Braintree	22,000	44,203	
Brentwood	22,000	28,324	
Castle Point	22,000	33,800	
Chelmsford	22,000	39,781	
Colchester	22,000	50,428	
Epping Forest	22,000	34,581	
Harlow	22,000	34,308	
Maldon	22,000	27,178	
Rochford	22,000	29,292	
Tendring	22,000	43,946	
Uttlesford	22,000	29,871	