



**Title:** **DIRECTOR OF PUBLIC HEALTH**

**Accountable to:** Director of Community & Housing, London Borough of Merton  
The Secretary of State through Public Health England or the Chief Medical Officer.

**Pay Band:** NHS Consultant - Consultant Contract (dependant on experience) plus DPH supplement Band D or Very Senior Manager Scale

**Managerially responsible for:** Public Health division consisting of 14 people, including 2.6 Public Health Consultants.

**Appointment:** This is a full time post. Flexible working may be considered by agreement with line manager

**Employing Organisation:** London Borough of Merton

**Base:** Civic Centre, London Road, Morden, SM4 5DX

## 1. Job Summary

The Director of Public Health will be the most senior advocate for public health across Merton. This is a Board level appointment, leading the delivery of the Public Health functions on behalf of the council. The post holder will be a member of the Senior Leadership Team of the Council and on the Board of the Merton Clinical Commissioning Group.

The Director of Public health will be a high profile and highly visible Director, with strong people influencing skills and high levels of political awareness, in particular in relation to the different organisational cultures across local government, the NHS and the voluntary sector. The postholder will need to gain an in depth knowledge about the people and communities in Merton, and have a track record of evidence based delivery across all three domains of public health – health improvement, health protection and healthcare services.

Working closely with the London Borough of Merton and Merton Clinical Commissioning Group, the DPH will lead the promotion and protection of health and wellbeing, tackling health inequalities and improving healthcare for the people of Merton. The DPH will be responsible for ensuring that effective use is made of the public health budget in order to achieve relevant goals. The DPH is responsible for strengthening capability and capacity across the whole public sector to improve the health of the population.

The DPH will play a key role in developing strong partnerships with and influencing key stakeholders in the health economy to ensure the widest possible participation in the delivery of the new Public Health Outcomes on behalf of the Chief Executive. This includes work on the health, social care and children's services agendas to support the development and delivery of the most efficient and

effective pathways in health improvement and care, work related to the health and wellbeing of children and young people and place shaping to create a health promoting physical, social and cultural environment for the future. It is expected that the postholder will have a direct influence on service planning in the council setting across all Directorates and on CCG commissioning to improve health and reduce inequalities.

The postholder will be required to:

- Be a transformational and visionary leader
- Fully understand and be committed to addressing the relationships and cultures of organisations that impact on the wider determinants of health
- Bring a high level of intellectual rigour and personal credibility to the collaborative and commissioning agendas
- Be highly visible to ensure in depth knowledge of local communities and good connections between public and local organisations
- Demonstrate high levels of political awareness and be able to work in different organisational cultures to plan and implement programmes for short and long term health gain
- Demonstrate the ability to be a high quality advocate across all three domains of public health – health improvement, health protection and health services
- Have a sound understanding of the issues relating to safeguarding children and vulnerable adults and to ensure they are embedded in all aspects of the PH function's work
- Have exceptional people influencing skills in relation to developing the public health community and in helping to develop the public health leadership of organisations and the wider workforce
- Have a proven record of previous accomplishments in improving the health of communities
- Have the ability to ensure the effective transition of the public health function in accordance with the Health and Social Care Act 2012

## **2. Key Responsibilities**

The post-holder is responsible for leading the delivery of the public health function and will be responsible for the agreed work programme of the Public Health team. This will be determined each year through a process of Individual Performance Review and Objective Setting, and may change significantly, depending on the needs of the organisations.

The Director of Public Health will:

- Be responsible for the health of the local population and delivery of key public health goals.

This will involve:

- Supporting the Chief Executive, Chief Officers and Elected Members in delivery of the Public Health Outcomes Framework, making best use of the ring fenced public health budget to achieve this
  - Contributing to the full range of Merton Council and Merton Clinical Commissioning Group responsibilities and using the opportunities of system reform, regulation and performance arrangements to ensure that public health goals are at the heart of local authority and local NHS agendas
  - Working with Cabinet and the Scrutiny Committees
  - Acting as a key advisor to the Health and Wellbeing Board
  - Supporting the requirements of national and regional preventative strategies
  - Working with key partner agencies
- Be responsible for reporting on influences on health and wellbeing.

This will involve:

- Producing an independent annual report on the health of the local population
- Taking a lead role in producing the Joint Strategic Needs Assessment for the Council and Clinical Commissioning Group

- Be a key source of public health leadership and expert advice to Merton Council and Merton Clinical Commissioning Group on all aspects of public health ensuring that resources are brought to bear across the public sector to promote health and well-being for the whole community.

This will involve:

- Leading on behalf of Merton Council and Merton Clinical Commissioning Group communication, dissemination, implementation and delivery of National, Regional and Local public health policies and strategies, developing inter-agency and inter-disciplinary strategic plans and programmes, with delegated board or organisational authority to deliver key public health targets
  - Being responsible for the development and implementation of multi-agency long-term public health programmes as required, based on the identification of areas of potential health improvement, the diversity of local needs and the reduction of inequalities
  - Ensuring proper linkages between the health, social care and children's services agendas and strategies related to the wider determinants including for example, safeguarding and child protection, community safety, the environment and sustainability
  - Ensuring the delivery of the core Public Health commissioning support offer to Merton CCG, including supporting the South London Commissioning Support Service (or other commissioning support entity in due course) as appropriate
- Lead and drive programmes to improve health and wellbeing and reduce inequalities

This will involve:

- Working collectively across Merton Council and Merton Clinical Commissioning Group, and in collaboration with Public Health Observatories, Health Protection Units, NICE and the developing Public Health England function, to ensure the proper design, development and utilisation of major information and intelligence systems and the best available evidence base to undertake regular joint reviews of the health and wellbeing status and needs of the population, and to undertake the assessment of health inequalities, health impact assessment and the identification of areas for action within the local population
  - Taking lead responsibility for the full range of public health functions across Merton
  - Advising on the health impact of policies and changes of policy which may affect health and care, as part of the place-shaping agenda
  - Undertaking health equity audits and identifying and tackling health inequalities
- Play a powerful role in forging partnerships with, and influencing all local agencies to ensure the widest possible participation in the health and wellbeing agenda.

This will involve:

- Working collectively with colleagues and partners to lead the development of inter-agency and interdisciplinary short and long-term strategic plans for securing health improvement both in the general population and in vulnerable groups at high risk of poor health and reduced life expectancy, in partnership with a range of statutory, non-statutory, voluntary and private sector agencies
- Working collectively with emerging commissioners to provide expert public health advice and leadership to support and inform an evidence-based and ethical approach to commissioning and to planning high quality equitable and sustainable services, across primary, secondary and social care
- Working with primary care professional and community staff, local NHS trusts and voluntary sector organisations to raise awareness of their public health role, and to strengthen their public health leadership
- Working collectively with colleagues and key partner agencies including the voluntary sector to lead on the co-ordination of services and to promote effective

- joint working to ensure delivery of the wider government targets and improved health and wellbeing
  - Being the chief source of local public health leadership and advocacy, and strengthening public understanding and capacity to improve health
  - Being a member of key bodies, including Merton Health and Wellbeing Board and the Merton Partnership. This will involve working closely with Elected Members
- Work closely with the Health Protection Agency, the developing Public Health England function and other relevant organisations to ensure high levels of local resilience.

This will involve:

- Taking responsibility for safeguarding the health of the population in relation to communicable disease (including delivery of immunisation targets until the National Commissioning Board takes on this responsibility) and non communicable environmental hazards
  - Working with the Health Protection Agency, and local health protection units / teams to ensure that effective local arrangements exist to ensure local resilience and for covering the on call rota for the effective control of communicable disease and environmental hazards, and emergency planning
  - Communicating effectively and accurately with a wide audience including the media and the public in emergency circumstances such as communicable disease outbreaks, chemical incidents and incidents related to immunisation and screening
- Be a highly effective leader for the Public Health portfolio, and ensuring its appropriate contribution to wider public health networks and public health practice, teaching and research together as appropriate:

This will include:

- Participating in managing organisation change processes
- Managing public health staff including recruitment, appraisals, disciplinary and grievance responsibilities
- Holding local public health budgets
- Providing educational supervision and support to trainees in public health
- Managing academic contract holders as appropriate

The job description will be subject to review in consultation with the post holder and in the light of the needs of the employing organisation, the transition of the public health function and the development of the specialty of public health and any wider developments in the field of public health.

The post holder will be expected to be able to cope with multiple and changing demands, and to meet tight deadlines. They will be prepared to take on new areas of work as and when they arise, managing priorities set within the time available. A high level of intellectual rigour, negotiation and motivational skills and flexibility are required to deal with complex public health issues, to advise and make recommendations regarding services and patient care. A high level of tact and diplomacy is required and an ability to understand other cultures to enable effective working across organisational boundaries and influencing without formal authority.

### **3. London Borough of Merton**

#### **Merton's Population**

In 2015, Merton has a resident population of 206,200 (GLA 2013 round population projections SHLAA capped). The population profile is younger than England overall, and more in line with London. The population in Merton is increasing and it is predicted that by 2021 it will have increased by about 3%. The number of births increased by 39% between 2002 and 2010, dropped steeply in 2012/13 and is project to decrease slightly in the next few years. As well as the increase

in population size, the age profile is rising and by 2021 the number of over 65 year olds is predicted to increase by 9%.

In addition to Merton's increasing and ageing population its local communities are becoming more ethnically diverse and multicultural, with a profile reflective of London. The extent of diversity has increased markedly over the last ten years with emerging new Polish and Tamil communities in the borough.

## **Health Outcomes**

Merton health outcomes are among the best in London, and largely in line with, or above, the England average. Based on figures for 2010-12, life expectancy in Merton for men is 80.5 years and for women is 84.4. However, there are stark differences between electoral wards. For instance, while life expectancy at birth across Merton is higher than the England average, there is a difference of 8 years for men and 3 years for women between small areas (Lower Super Output Area) within the borough overall. These health inequalities reflect the gap in multiple deprivation between east and west Merton

## **Merton Council**

Merton Council is a large organisation and is responsible for providing or commissioning almost 1000 separate services.

In 2009 Merton Council was rated by the Audit Commission as a four star authority which is improving strongly, the highest score any council can achieve. The commission was particularly impressed by Merton's improvements in education and community safety. It also praised the council's knowledge of the local community, its ability to provide value for money and the leadership it has shown in working with local partners to deliver major projects such as Mitcham Eastfields station opened in 2008.

There are 4 political groups on Merton Council and the current Membership is as follows: Conservative - 20 councillors; Labour - 36 councillors; Liberal Democrat - 1 councillor; Merton Park Ward Independent Resident - 3 councillors.

The Cabinet comprises of up to ten councillors, including an executive Leader elected by the council. Labour currently lead the Council and make up the Cabinet.

Overview and scrutiny ensures that the Cabinet is held to account for the decisions that it makes and their impact upon the borough and its residents. There is an Overview and Scrutiny Commission and three Overview and Scrutiny Panels.

The current Chief Executive of Merton Council, Ged Curran, was appointed in March 2004 and leads and takes responsibility for the work of the 5,000 paid staff of the council, who run the local authority on a day to day basis. Merton Council is made up of four departments:

- Corporate Services
- Children, Schools and Families
- Environment and Regeneration
- Community and Housing

## **NHS Merton Clinical Commissioning Group**

The NHS Merton Clinical Commissioning Group comprises 24 practices. The vision of MCCG is to improve the health outcomes for the population of Merton by commissioning services tailored to the needs of individual patients whilst addressing the diverse health needs of the population. MCCG intends to improve patient experience and health outcomes in a financially and clinically sustainable way. The commissioning model focuses on ensuring that local people benefit from the right services, delivered by the right health care professionals, in the right settings, at the right time

and achieving the right outcomes. An understanding of patient's needs and their experiences will drive performance improvement through an integrated approach to primary, secondary, community, mental health and social care services developed through strong and sustainable partnerships.

The current clinical priorities for MCCG are improving the management of long term conditions and end of life care.

## **Merton Partnerships**

The Merton Partnership is the overarching strategic partnership that brings together organisations that provide services or are involved in public life in the borough, working together in partnership to achieve our vision of Merton as

**'a great place to live and call home, where citizens are also neighbours and take responsibility for improving their own lives and neighbourhoods'.**

The Merton Partnership is working to improve the quality of life for people in Merton by building strong, safe, active and sustainable communities and is determined to bridge the gap between the east and the west of the borough.

Merton has strong relations with the Voluntary and Community sector and the Merton Compact partnership agreement is nationally recognised as an excellent example of a local compact and has won a number of awards.

The Health and Wellbeing Board was established in April 2013 after working in shadow status since February 2011. It is chaired by the Cabinet Member for Health and Social Care. The Board brings together those who commission services across the NHS, public health, social care and children's services, elected representatives and representatives from HealthWatch and the voluntary sector to plan the right services for their area. The Board developed a first Health and Wellbeing Strategy for Merton in 2013 and is about to produce a refreshed version.

## **Merton's track record on Public Health**

Merton is well placed to meet its public health responsibilities, building on a track record of addressing public health issues. The Merton Partnership has a long standing commitment to reducing health inequalities, as evidenced for example in its choice of stretch targets for the Local Area Agreement (LAA) Performance Grant. Its Healthier Communities Partnership was peer reviewed in 2007 and the Council was identified as providing effective leadership. Since that time partnerships have been maintained and developed, including the joint appointment of a Consultant in Public Health in 2009, the delivery of LAA targets to tackle health inequalities in 2010 and the development of the shadow Health and Wellbeing Board. Merton had a peer review for health and wellbeing in the autumn of 2013 and had positive feedback for it was working with its partners and for how public health was becoming established within the council. Merton Council also has a track record of commissioning high quality public health services, such as substance misuse services.

### **Useful links:**

[www.merton.gov.uk](http://www.merton.gov.uk)

[www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

[www.jsna.suttonandmerton.nhs.uk](http://www.jsna.suttonandmerton.nhs.uk)

[www.mertonpartnership.org](http://www.mertonpartnership.org)

#### **4. Management arrangements**

The post holder will be accountable to the Director of Community & Housing for the London Borough of Merton. The post holder will also have direct access to the Chief Executive regarding advice on public health statutory functions. The post holder will also liaise with the Cabinet Member for Health and Adult Social Care. Professional appraisal will be required. A single work programme will be agreed with the post holder and will be reviewed as part of the annual job planning process.

S/he will contribute to the working of the SWL Cluster Public Health network.

The post holder:

- Will manage those members of the Merton Public Health Team.
- Will hold the Public Health function budgets of £9.236k plus a Health visiting budget from October 2015 of £2.922k
- Will be a Board Member of Merton Clinical Commissioning Group
- Will be a Chief Officer of the London Borough of Merton as set out in the Health and Social Care Act 2012.

The postholder will be expected to take part in on call arrangements as appropriate

#### **5. Professional obligations**

The post holder will be expected to:

- participate in the organisations' staff appraisal schemes and departmental audits, and ensure appraisal and development of any staff for whom s/he is responsible
- contribute actively to the training programme for public health trainees as appropriate, and to the training of practitioners and primary care professionals within the locality
- pursue a programme of CPD/CME, in accordance with Faculty of Public Health requirements, or other recognised body, and undertake revalidation, audit or other measures required to remain on the GMC Specialist Register/GDC specialist list in dental public health/UK Public Health Register as appropriate.

#### **6. Corporate responsibilities**

The post holder will be expected to:

- contribute to the full range of NHS and local authority equivalent responsibilities and use the opportunities of system reform, regulatory and performance management arrangements, to ensure that the public health goals are at the heart of the local authority and local NHS agenda
- contribute to the wider NHS and local authority corporate agenda, team building, and organisational development using appropriate management skills and behaviours
- work with other public health colleagues to strengthen public health capacity and delivery across South West London.

## **CORE COMPETENCY AREAS**

The postholder will be expected to demonstrate competence in the following areas of core and defined public health competence:

### ***Surveillance and assessment of the population's health and well-being***

- To ensure the proper design, development and utilisation of major information and intelligence systems to underpin public health improvement and action for the population across disciplines and organisations.
- To receive, interpret, provide and advise on highly complex epidemiological and statistical information about the health of populations to the NHS, Local Authority and voluntary organisations.
- To ensure the use of the best available evidence base to support the assessment of health needs, health inequalities, health impact assessment and the identification of areas for action within the local population.
- To produce an annual report on the health of the population of Merton.

### ***Assessing the evidence of effectiveness of health and healthcare interventions, programmes and services***

- To provide expert public health advice and leadership to support and inform an evidence-based approach within ethical frameworks for commissioning and develop high quality equitable services, across primary, secondary and social care, and across sectors including local authorities, voluntary organisations, etc, in potentially contentious and hostile environments where barriers to acceptance may exist.
- To be responsible for leading on service development, evaluation and quality assurance governance in specific areas and for preparing and adjusting action plans in line with changing needs and changing geographical boundaries.
- To provide expert advice to support evidence based commissioning, prioritisation of services for the population (and in some circumstances for the individual) in order to maximise opportunities for health.

### ***Policy and strategy development and implementation***

- To lead on behalf of the PCT Board and Council Cabinet on the communication, dissemination, implementation and delivery of national, regional and local policies and health strategies, developing inter-agency and interdisciplinary strategic plans and programmes, with delegated Board and Cabinet authority to deliver key public health targets.
- To act in an expert advisory capacity on public health knowledge, standards and practice, across the spectrum of public health at Board and Cabinet level.
- To be responsible for the development and implementation of multi-agency long-term public health programmes as required, based on identification of areas of potential health improvement, the diversity of local needs and the reduction of inequalities.
- To ensure proper linkages between the health agenda and strategies related to the wider determinants including for example, community safety, the environment and sustainability.

### ***Leadership and collaborative working for health***

- To take the lead role on behalf of the Council and Clinical Commissioning Group in developing inter-agency and interdisciplinary short and long-term strategic plans for securing health improvement both in the general population and in vulnerable groups at high risk of poor health and/or reduced life expectancy, in partnership with a range of agencies such as those in the statutory, non- statutory, voluntary and private sectors and by taking lead responsibility with Merton Council. This requires the ability to work cross-directorate and across other agencies and voluntary organisations.
- To work with primary care professionals and community staff to raise awareness of their public health role.

- To lead on the integration of health, social services and voluntary organisations to promote effective joint working to ensure delivery of the wider government targets.
- To influence external agencies in their public health policy decisions by working with complex professional, managerial and population groups and other organisations in the statutory, non-statutory and private sectors.

## **DEFINED COMPETENCY AREAS**

### ***Health Improvement***

- To be responsible for designated areas of health improvement programmes, public health surveillance or population screening or geographical areas.
- To take a Board or equivalent level leadership role in specified areas with local communities and vulnerable and hard to reach groups in Merton, helping them to take action to tackle longstanding and widening health inequality issues, using community development approaches as appropriate.
- To provide expert knowledge to ensure effective community involvement with regard to all the work of the organisation including commissioning and prioritising high cost services and to ensure that policies and strategies are interpreted, developed and implemented at all levels.

### ***Health Protection***

- To take responsibility for safeguarding the health of the population in relation to communicable disease, infection control and environmental health, including delivery of immunisation targets.
- To ensure that effective local arrangements exist for covering the on call rota for the effective control of communicable disease, environmental hazards to health and emergency planning, as detailed in local health protection agreements.
- To communicate effectively and diplomatically with a wide audience including the media and the public to change practice in highly challenging circumstances such as communicable disease outbreaks, chemical incidents, immunisation and screening.

### ***Service Improvement***

- To provide expert advice to support evidence based commissioning, prioritisation of services for the population (and in some circumstances provide highly specialised advice on preferred treatment options or protocols based on the evidence for individual patients) in order to maximise opportunities for health.
- To be responsible for implementation of NICE/National Service Frameworks or equivalent national standards/guidance and frameworks.
- To lead the development of clinical networks, clinical governance and audit.
- To review evidence and providing specialised advice on preferred treatment options or protocols based on the evidence for individual patients.

### ***Public Health Intelligence***

- To analyse and evaluate quantitative and qualitative data and research evidence from a range of sources to make recommendations and inform decision making which has long term impacts.
- To compare, analyse and interpret highly complex options for running projects identified as key public health priorities, and communicate this information across organisations and the local community.
- To be responsible for the identification and implementation of appropriate health outcome measures, care pathways/protocols and guidelines for service delivery across patient pathways for the local population.
- To work with the London PHO and/or other organisations to strengthen local, regional and national public health intelligence and information capacity.

### ***Academic Public Health/Research and Development***

- To undertake and commission literature reviews, evaluative research surveys, audits, and other research as required, to inform equitable service provision and reduce health

inequalities. This may involve taking the lead on R&D public health and related activities for NHS Sutton.

- To develop links with academic centres as appropriate and / or the London Public Health Observatory to ensure the work of the organisation is based on a sound research and evidence base.
- To develop public health capacity through contributing to education and training and development within the Directorate, and within the wider NHS and non NHS workforce.

*Medically qualified members of the public health team are expected to play certain roles in medical leadership, in relationships with the medical profession and in bringing a medical perspective to public health advice. A medically qualified holder of this post would be expected to share these roles with other medically qualified members of the team.*

## GENERAL CONDITIONS

### ***Terms and conditions of service***

The post is subject to general NHS Terms and Conditions of Service and relevant organisational employment policies.

Those candidates who meet the requirements for appointment as a Consultant in Public Health Medicine will be eligible for the NHS Consultant Contract (*England, Wales, Scotland, N Ireland as appropriate*), DPH salary scale plus DPH Supplement D.

Those candidates appointed as Consultants in Public Health will be eligible for NHS VSM salary scales.

### ***On call arrangements***

The postholder will be expected to be on any relevant On-call rota and, subject to local negotiation, take part in the on-call for health protection and public health and to participate in the communicable disease and environmental hazards control and emergency planning arrangements for South West London. Suitable training will be provided for those who need it in discussion with the Health Protection Agency.

### ***Indemnity***

As the postholder will only be indemnified for duties undertaken on behalf of Merton Council, it is strongly advised that a private Professional Indemnity insurance policy is obtained to cover any duties not undertaken within the course of employment for Merton Council, including any private activities.

### ***Flexibility***

The postholder may, with their agreement - which should not reasonably be withheld - be required to undertake other duties which fall within the grading of the post to meet the needs of this new and developing service. The employing organisation is currently working in a climate of great change. It is therefore expected that all staff will develop flexible working practices both within any relevant local public health networks and at other organisational levels as appropriate, to be able to meet the challenges and opportunities of working in public health within the new and existing structures.

### ***Confidentiality***

A consultant has an obligation not to disclose any information of a confidential nature concerning patients, employees, contractors or the confidential business of the organisation.

### ***Public Interest Disclosure***

Should a consultant have cause for genuine concern about an issue (including one that would normally be subject to the above paragraph) and believes that disclosure would be in the public interest, he or she should have a right to speak out and be afforded statutory protection and should follow local procedures for disclosure of information in the public interest.

### ***Data protection***

If required to do so, the postholder will obtain, process and/or use information held on a computer or word processor in a fair and lawful way. The postholder will hold data only for the specified registered purpose and use or disclose data only to authorised persons or organisations as instructed in accordance with the Data Protection Act.

### ***Health and safety***

Employees must be aware of the responsibilities placed on them by the Health & Safety at Work Act (1974) and its amendments and by food hygiene legislation to ensure that the agreed safety procedures are carried out to maintain a safe condition for employees, patients and visitors.

### ***Smoking policy***

The employing organisation has a policy that smoking is not allowed in the work place.

***Equal opportunities policy***

It is the aim of the employing organisation to ensure that no job applicant or employee receives less favourable treatment on grounds of gender, religion, race, colour, sexual orientation, nationality, ethnic or national origins or disability or is placed at a disadvantage by conditions or requirements which cannot be shown to be justifiable. To this end, there is an Equal Opportunities Policy in place and it is for each employee to contribute to its success.

**PERSON SPECIFICATION  
DIRECTOR OF PUBLIC HEALTH**

London Borough of Merton

**IMPORTANT:** This person specification contains changes introduced in amendments made to the NHS (Appointment of Consultants) Regulations for England, Scotland, Northern Ireland and Wales which came into force during 2005.

<b>Education/Qualifications</b>	<b>Essential</b>	<b>Desirable</b>
Inclusion in the GMC Specialist Register/GDC Specialist List or UK Public Health Register(UKPHR)	X	
If included in the GMC/GDC Specialist Register in a specialty other than public health medicine/dental public health, candidates must have equivalent training and/or appropriate experience of public health medicine practice	X	
Public health specialist registrar and specialist trainee applicants who are not yet on the GMC Specialist Register/GDC Specialist List in dental public health/UKPHR must provide verifiable signed documentary evidence that they are within 6 months of gaining entry at the date of interview ; all other applicants must provide verifiable signed documentary evidence that they have applied for inclusion in the GMC/GDC/UKPHR specialist registers [see shortlisting notes below for additional guidance]	X	
Applicants must meet minimum CPD requirements (i.e. be up to date) in accordance with Faculty of Public Health requirements or other recognised body	X	
MFPH by examination, by exemption or by assessment		X
<b>Personal qualities</b>		
Transformational and visionary leader	X	
Commitment to adding public health values to corporate agendas	X	
Strong commitment to public health principles	X	
Able to prioritise work, and work well against a background of change and uncertainty	X	
Adaptable to situations, able to handle people of all capabilities and attitudes	X	
Commitment to team-working, and respect and consideration for the skills of others	X	
Self-motivated, pro-active, and innovative	X	
High standards of professional probity	X	
The ability to demonstrate personal credibility: Within public health Within the NHS and local government With senior clinicians and managers	X	
<b>Experience</b>		
Minimum of three years' experience of public health practice at senior level	X	
Has a demonstrable personal track record of delivering strategy, plans and outcomes in practice and making an impact in improving the health of communities.	X	
Evidence of taking personal responsibility in contributing to developing an organisation's vision and strategic goals for modernisation and reform and in gaining support for this at all levels both internally and externally.	X	
High level project management skills	X	
Excellent staff and corporate management and development skills	X	
Experience of working in complex political and social environments	X	
Excellent change management skills	X	
Evidence of strong corporate contribution in delivering financial balance for an organisation.	X	
Training and mentoring skills		X
Scientific publications, presentation of papers at conferences, seminars etc.		X
<b>Skills</b>		
Strategic thinker with proven leadership skills	X	
Excellent oral and written communication skills (including dealing with the media)	X	
Effective interpersonal, motivational and influencing skills	X	
Ability to respond appropriately in unplanned and unforeseen circumstances	X	
Good presentational skills (written and oral)	X	

Sensible negotiator with practical expectation of what can be achieved	X	
Substantially numerate, with highly developed analytical skills using qualitative and quantitative data	X	
Computer literate	X	
Ability to design, develop, interpret and implement policies	X	
Ability to concentrate for long periods (e.g. analyses, media presentations)	X	
Resource management skills	X	
<b>Knowledge</b>		
High level of understanding of epidemiology and statistics, public health practice, health promotion, health economics and health care evaluation	X	
Full understanding of and commitment to addressing relationships and cultures of organisations that impact on the wider determinants of health	X	
Full understanding of and commitment to delivery of improved health through mainstream NHS activities	X	
Understanding of NHS and local government cultures, structures and policies	X	
Knowledge of methods of developing clinical quality assurance, quality improvement and evidence based clinical and/or public health practice	X	
Understanding of social and political environment	X	
Understanding of interfaces between health and social care	X	

<b>Corporate Requirements</b>	<b>Essential</b>	<b>Desirable</b>
Has a demonstrable personal track record of delivering strategy, plans and outcomes in practice and making an impact in improving the health of communities.	X	
Evidence of delivering organizational improvement through personal introduction of techniques/knowledge from outside the organisation		X
Evidence of continuing professional and personal development	X	
Has board level experience, functioning as a corporate Director with significant contribution to strategy across a range of areas		X
Has relevant board level management experience in a variety of health and/or social care settings with evidence of effective partnership working		X
Evidence of previous experience of working within a complex and challenging environment at Director level		X
Has experience of working as a Board member in more than one setting/type of board arrangement. Has experience of working in joint board arrangements		X
Evidence of personal contribution in delivering vision/strategy in a multi-organisational setting through modernization and reform projects		X
Has a demonstrable track record in delivering complex targets and objectives to right deadlines	X	
Evidence of taking personal responsibility in contributing to developing an organisations vision and strategic goals for modernisation and reform and in gaining support for this at all levels both internally and externally	X	
Evidence of developing and maintaining an excellent partnership relationship and team fit with the Chair, Chief Executives, Members and other corporate colleagues	X	
Evidence of strong corporate contribution in delivering financial balance for an organisation	X	
Evidence of personal contribution as a strong team player, holding people together and facilitating effective team-working effectively, particularly at stressful points	X	
Demonstrates high caliber leadership and influencing skills which command personal support and commitment from others and secure the necessary support to deliver results	X	
Evidence of leadership roles at regional/national level		X
Is sought out as a facilitator and problem solver inside and outside the organisation and is recognised beyond direct work spheres as a valuable source of personal advice		X
Evidence of outstanding inter-personal skills, with a demonstrable ability to engage positively with individuals from junior to very senior levels and to deliver solutions and conflict situations	X	
Evidence of achievement of leading change	X	
Evidence of the drive to network for information with a background searching for and bringing to the organisation best practice and innovation from outside	X	

Evidence of political astuteness and the ability to drive for and deliver results in complex environments where organisational and personal agendas are not aligned	X	
Evidence of resilience in a range of complex and demanding situations	X	
Shows evidence of personal support mechanisms		X
Evidence of a strong sense of commitment to openness, honesty, inclusiveness and personal integrity	X	
Demonstrable evidence of a commitment to teamwork in difference settings and with different groups and able to respect the skills of others	X	

## Shortlisting notes

The Faculty of Public Health advises that in order to be shortlisted for a consultant post applicants who are not yet on the GMC Specialist Register/GDC Specialist List in dental public health/UK Public Health Register (UKPHR) must provide verifiable signed documentary evidence that an application for inclusion on one of these specialist registers is in progress as follows:

### 1. Applicants in training grades

Public health Specialist Registrars and Specialist Trainees in a recognised UK public health training scheme must provide evidence to confirm that they are within **SIX** months of award of their certificate of completion of training (CCT) and inclusion in the GMC Specialist Register/GDC Specialist List in dental public health/UKPHR at the date of interview (i.e. the expected date of award of their CCT must fall no more than six months after the date of interview). *Please note that from January 2005 in England, May 2005 in Scotland and November 2005 in Northern Ireland and Wales, this period has been extended from the three months required previously.* The documentary evidence should be:

**Either** a RITA Form G (Final Record of Satisfactory Progress) **or** a letter from the postgraduate dean (or Faculty Adviser) specifying the expected date for completion of training (which must be not more than six months after the date of interview).

### 2. Applicants in non training grades

#### 2.1 Doctors (i.e. medical practitioners)

Doctors outside recognised UK public health training schemes fall into a number of categories:

- those who have trained outside the UK, who may have specialist training and qualifications which they are seeking to have recognised by the Postgraduate Medical Education & Training Board (PMETB) in order to gain registration with the GMC: these doctors may be shortlisted according to the following 2005 guidance from the Department of Health and Scottish Executive which indicates that *There will be some instances (for example when considering applicants trained outside the UK) where an AAC may choose to interview a candidate prior to [GMC] Specialist Register entry. In these circumstances, it will wish to be satisfied that subsequent Specialist Register entry is likely.* **Employers should ask the applicant to provide documentary evidence that he/she has submitted an application to the PMETB which is eligible for consideration at the time of application (for shortlisting).**
- those who have not completed specialist training in the UK who are seeking entry to the GMC Specialist Register through Article 14 of the European Specialist Medical Qualifications Order (ESMQO), which allows the PMETB to consider not only training but also relevant experience: these doctors may have trained in or outside of the UK. **Again, employers should ask the applicant to provide documentary evidence that he/she has submitted an application to the PMETB which is eligible for consideration at the time of application (for shortlisting).**

#### 2.2 Applicants from a background other than medicine

- Other than trainees (see 1 above), applicants from a background other than medicine would normally be expected to have gained full registration with the UKPHR. However, exceptionally, individuals who can demonstrate that they have submitted a portfolio application to the UKPHR may be considered for shortlisting. **Suitable evidence will be a letter from the UKPHR acknowledging receipt of the portfolio application.**
- Other than trainees (see 1 above), applicants from a background in public health dentistry must be included in the GDC Specialist List in dental public health. However, those who can demonstrate that they have submitted an application for inclusion on the GDC specialist list in public health dentistry may be considered for shortlisting. **Employers should ask the applicant to provide documentary evidence that he/she has submitted an application to the GDC which is eligible for consideration at the time of application (for shortlisting).**

**Employers are advised that individuals should not take up consultant in public health medicine or consultant in public health posts (including DPH posts) until such point as they have gained entry to the GMC Specialist Register/GDC Specialist List in dental public health/UK Voluntary Register for Public Health Specialists. Although applicants will be able to provide documentary evidence that an application is in progress, no guarantee can be made as to the outcome of an application to the GMC/GDC/UKPHR specialist registers.**

**The above guidance applies to applications for both general and defined specialist registration with the UKPHR. Individuals with defined specialist registration are eligible for consideration for shortlisting for, and appointment to, consultant posts including those at DPH level. In all appointments, employers will wish to ensure that an applicant's areas of competence meet those required in the person specification.**