**Job Description: Director of Public Health (Scotland)**

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| *This specimen generic job description is intended to assist employers in the UK in establishing Director of Public Health posts. These are Board level appointments with executive responsibilities. In Scotland these posts will normally be appointments made by NHS Scotland employing authorities. These senior public health roles are for those who have completed higher specialist training in public health or equivalent and are on the GMC Specialist Register or GDC Specialist List in dental public health or UK Public Health (Specialist) Register. Posts are normally open to applicants with a medical degree trained in public health disciplines. Differences in the organisational details of how services are delivered in the UK should be reflected in the job description, but the criteria in the specimen person specification are the recommended* ***minimum*** *requirements for all posts. This provides a framework, but locality and post specific details should be added as indicated.*  *The Faculty recommends that* ***an outline job plan*** *with indicated programmed activities should be attached to the job description and should include appropriate time for CPD and other activities such as appraisal etc.* | |
| Employing organisation: | Specify name of employing organisation(s) – e.g. NHS Board (Scotland) |
| Job title | Director of Public Health  (Full Time/Part Time/Job Share) |
| Accountable to | The postholder will be dually accountable:   * professionally to the employing authority <specify> * managerially to the employing organisation via the line manager, usually the Chief Executive or equivalent (in all organisations in the case of joint appointments) |
| Managerial responsibility for: | All staff within the public health directorate (may include staff in the NHS and in local authorities in an integrated public health directorate) |
| Appointment | This is a full time/part time/job share post for a DPH <specify whether the post is a new or a replacement post> to the <specify organisation(s)> based at <specify location and, if appropriate, name of host organisation if different from employing organisation(s)>. These posts may be in a variety of organisations including NHS Health Boards. In the case of joint appointments, details of all organisations must be given. |

**1. Job Summary**

The Director of Public Health is the most senior advocate for public health across the organisations and populations served by the post. Itis aBoard level appointment with executive responsibilities working at the heart of *<specify organisation(s)>.*

Such a role requires the postholder 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 communities and better working between the public and local organisations;
* demonstrate high levels of political awareness, be able to work to different organisational cultures and to plan and implement programmes for short and long term health gain;
* be able to coordinate high quality advocacy across all three domains of public health – health improvement, health protection and health service quality;
* have exceptional people management skills both 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.

*While the detail of the job outline will differ between employers, it is helpful to provide a short overview of the post as described below. This should capture and detail the seniority and high level of responsibility of the post and demonstrate that the postholder has freedom to act, the breadth of knowledge, skills and expertise required, the complexity of any of the tasks and the level of mental effort needed. A description of the working relationships, networks and the general working environment should be provided and should indicate whether the postholder will be expected to instigate, develop or maintain these.*

It is expected that the postholder will:

* have responsibility for the health of the local population for delivery of key public health goals
* have responsibility for producing an independent annual report on the health of the local population
* be the chief source of public health leadership expert advice to the Board(s) or equivalent on all aspects of public health. In the case of joint appointments, the DPH should have this remit for all organisations.
* have a key role in leading and driving programmes to improve health and well being and reduce inequalities
* play a powerful role in forging partnerships with, and influencing all local agencies to ensure the widest possible participation in the health and well being agenda
* be an executive director of the Board or equivalent. In the case of joint appointments with local authorities, it is expected that the DPH will be a member of the NHS Health Board Team and will report directly to the Chief Executive.
* be a member of key decision-making bodies in their organisation(s).
* work closely with Health Protection Scotland and other relevant organisations to ensure high levels of local resilience, and be qualified to be appointed as an NHS Health Board “Competent Person” for the purposes of the Public Health etc. (Scotland) Act 2008
* be a highly effective leader for the Directorate of Public Health, including ensuring it contributes appropriately to wider public health networks and to bringing public health practice, teaching and research together as appropriate.

**2. The employing organisation**

*General information about the employing organisation(s) should be inserted here or in an annex. Details should be given about local NHS organisations, local authorities and other relevant organisations.*

**3. Department/Directorate of Public Health**

**Current staffing**

*Details of current staffing should be provided, and a copy of the current structure and organisational chart of the public health directorate attached. Line management details and/or team management and any training responsibilities should be included.*

**IT, secretarial support and other internal resources**

*List facilities supporting research, equipment for which the postholder is responsible including that used by other people, administrative and secretarial posts, IT, library facilities etc.*

**Training and CPD arrangements**

*Give details about whether the department is approved for the training of public health specialists (Foundation Programme, SHOs, pubic health trainees), the numbers taking part, and any other educational opportunities*.

**4. Management arrangements**

The postholder will be professionally accountable to the employing authority and managerially accountable to the employing authority via his/her line manager, usually the Chief Executive or equivalent (in all organisations in the case of joint appointments). For joint appointments however, it is recommended that there is one set of jointly agreed objectives, and these should be clarified. Professional appraisal will be undertaken by *<specify who will be responsible for appraisal as required for revalidation, as well as for performance review against management objectives. Joint appraisal by both Chief Executives is one option, one Chief Executive undertaking it on behalf of both is another>.* An initial job plan will be agreed with the successful candidate prior to taking up the post. This job plan will be reviewed as part of the annual job planning process.

The postholder:

* will manage the directorate of public health staff <insert number of staff including trainees> (include details of line management duties, recruitment, appraisals, disciplinary and grievance responsibilities);
* will hold its budget;
* will be on the Board(s) or equivalent of the organisation(s) (give details for all organisations for joint appointments);
* will be an Executive Director or equivalent (give details for all organisations for joint appointments);
* will be expected to take part in on call arrangements for communicable disease control/health protection as appropriate depending on local arrangement
* will be expected to deputise for the Chief Executive(s);
* will manage all trainees in public health and honorary consultant contract holders.

**5. Professional obligations**

The postholder will be expected to:

* participate in the organisation’s staff appraisal scheme and departmental audit, and ensure appraisal and development of any staff for which 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 (if the postholder designs and delivers core training, specify as applicable and give details of postholder’s involvement e.g. lead trainer, trainer on a module, develops training for others, etc);
* 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 or other specialist register as appropriate.

1. **Wellbeing**

Effective local occupational health support (confidential, includes modalities of self-referral, promoted regularly at induction and when in post) e.g. The post holder should usually have access to the Occupational Health (OH) Department, (full address, telephone and email). The OH team should have access to a physiotherapist and psychologist, and the post holder may self-refer or be referred through their manager. The post holder should have access to counselling, including face-to-face, and well as legal and financial support and other wellbeing resources. Information about Occupational Health will be disseminated at the induction and regularly when in post to ensure the post holder has timely access to the details if help seeking is necessary.

Availability of local initiatives/resources that promote workforce wellbeing (for example, self- care, work-life balance, stress management, coaching/mentoring, peer group support

1. **Work programme**

It is envisaged that the post holder will work XX programmed activities over XX days. Following appointment there will be a meeting at no later than three months with the line manager to review and revise the job plan and objectives of the post holder. The overall split of the programmed activities is 7.5 to be devoted to public health duties and 2.5 to supporting professional activities (as per the Academy of Medical Royal Colleges recommendation). The timetable is indicative only. A formal job plan will be agreed between the post holder and the line manager (usually the DPH) three months after commencing the post and at least annually thereafter.

These professional obligations should be reflected in the job plan. The post-holder may also have external professional responsibilities, e.g. in respect of training or work for the Faculty of Public Health. Time allocation for these additional responsibilities will need to be agreed with the line manager. A suggested draft timetable is below (delete if not required):

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| --- | --- | --- | --- | --- | --- |
| **Day** | **Time** | **Location** | **Work** | **Category** | **No. of PAs** |
| **Monday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Tuesday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Wednesday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Thursday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **Friday** | AM |  |  | PHD/ SPA | XX |
| PM |  |  | PHD/ SPA | XX |
| **On- call work** (if appropriate) |  |  |  |  | XX |
| **Total PAs** | Public health duties | | | | XX |
| Supporting professional activities | | | | XX |

1. **Corporate responsibilities**

The postholder 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 the region/country.

**9. Key tasks**

*This section should normally be structured around the competency areas for specialist public health practice (www.fph.org.uk) as recognised by the Faculty of Public Health and the UK Voluntary Register Board. It is expected that posts generally will include the vast majority, if not all, the range of tasks as set out in both core and defined areas.*

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

**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 with appropriate supplement A, B, C or D (depending on the population size), £ <*insert amount*> to £ <*insert amount* >.

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

***On call arrangements***

The postholder may be expected to be on call for health protection and public health and to participate in the communicable disease and environmental hazards control and emergency planning arrangements for <*specify locality*>. Suitable training will be provided for those who need it.

***Indemnity***

As the postholder will only be indemnified for duties undertaken on behalf of *<name of employing organisation>* the postholder is strongly advised to ensure that he/she has appropriate professional defence organisation cover for duties outside the scope of the *<name of employing organisation>* and for private activity within *<name of employing organisation>*. For on call duties provided to other organisations as part of cross cover out of hours arrangements the NHS Litigation Authority has confirmed that those organisations will provide indemnity for the postholder. *These arrangements may differ across the four countries.*

***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.

***Investors in People (include this paragraph if applicable)***

The employing organisation has made a public commitment to work towards the National Investors in People and Improving Working Lives standards. All Directors and staff will demonstrate their ownership of and their support for these goals through management and corporate action.

***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 2018.

***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 (amend as appropriate)***

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.

**Appendix 1: Person Specification for Director of Public Health (Scotland)**

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| **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. Further amended in June 2015, and September 2018.** | | |
|  | | |
| **Education/Qualifications** | ***Essential*** | ***Desirable*** |
| [The National Health Service (Appointment of Consultants) Regulations 1996 (legislation.gov.uk)](https://www.legislation.gov.uk/uksi/1996/701/regulation/4/made)  In line with legislation, inclusion in the GMC Full and Specialist Register with a license to practice/GDC Specialist List  **or**  Inclusion in the UK Public Health Register (UKPHR) for Public Health Specialists **at the point of application** | X |  |
| If included in the GMC Specialist Register/GDC Specialist List in a specialty other than public health medicine/dental public health, candidates must have equivalent training and/or appropriate experience of public health practice | X |  |
| Public health **specialty registrar applicants** who are currently on the UK public health training program and not yet on the GMC Specialist Register, GDC Specialist List in dental public health or UKPHR **mus**t provide verifiable signed documentary evidence that they are within 6 months of gaining entry to a register at the date of interview. \* | X |  |
| If an applicant is UK trained in Public Health, they must ALSO be a holder of a Certificate of Completion of Training (CCT), or be within six months of award of CCT by date of interview  If an applicant is non-UK trained, they will be required to show evidence of equivalence to the UK CCT *[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, or equivalent | X |  |
| Masters in Public Health or equivalent |  | X |
| Have documented evidence of current (or past) competence at the level required by the legislative guidance in order to be appointed as an NHS Health Board “Competent Person” for the purposes of the Public Health etc. (Scotland) Act 2008, as set out in the appropriate regulations | X |  |
| **Personal qualities**  [Recruiters are welcome to refine these criteria to ensure good fit with post concerned] |  |  |
| Able to influence senior members including directors and CEOs | X |  |
| Able to both lead teams and to able to contribute effectively in teams led by junior colleagues | X |  |
| Commitment to work within a political system irrespective of personal political affiliations | X |  |
| **Experience**  [Recruiters are welcome to refine these criteria to ensure good fit with post concerned] |  |  |
| Delivery of successful change management programmes across organizational boundaries | X |  |
| Media experience demonstrating delivery of effective health behaviour or health promotion messages |  | X |
| Experience of using complex information to explain public health issues to a range of audiences | X |  |
| **Skills**  [Recruiters are welcome to refine these criteria to ensure good fit with post concerned] |  |  |
| Strategic thinker with proven leadership skills and operational nous | X |  |
| Able to demonstrate and motivate organisations to contribute to improving the public’s health and wellbeing through mainstream activities and within resources | X |  |
| Ability to lead and manage the response successfully in unplanned and unforeseen circumstances | X |  |
| Analytical skills able to utilize both qualitative (including health economics) and quantitative information | X |  |
| Ability to design, develop, interpret and implement strategies and policies | X |  |
| **Knowledge**  [Recruiters are welcome to refine these criteria to ensure good fit with post concerned] |  |  |
| In depth understanding of the health and care system and the relationships with both local national government | X |  |
| In depth knowledge of methods of developing clinical quality assurance, quality improvement, evaluation and evidence based public health practice | X |  |
| Strong and demonstrable understanding of interfaces between health, social care and key partners (dealing with wider determinants of health) | X |  |
| Understanding of the public sector duty and the inequality duty and their application to public health practice | X |  |
| **Equality and diversity** | | |
| An understanding of and commitment to equality of opportunity and good working relationships, both in terms of day-to-day working practices, but also in relation to management system | X | I |

***\*Applicants going through the portfolio registration routes (GMC or UKPHR) are not eligible to be shortlisted for interview until they are included on the register. The six-month rule does not apply to these portfolio route applicants.***

**Appendix II: competencies expected of all public health consultants / specialists/Directors of Public Health**

**(Based on the 2022 PH Specialty Training Curriculum)**

All consultants/specialists and Directors of Public Health, irrespective of their background are expected to be proficient in the competencies set out below.

* 1. **Use of public health intelligence to survey and assess a population’s health and wellbeing**

To be able to synthesise data from multiple sources on the surveillance or assessment of a population’s health and wellbeing and on the wider environment, so that the evidence can be communicated clearly and inform action planning to improve population health outcomes.

* 1. **Assessing the evidence of effectiveness of interventions, programmes and services intended to improve the health or wellbeing of individuals or populations**

To be able to use a range of resources to generate and communicate appropriately evidenced and informed recommendations for improving population health across operational and strategic health and care settings.

* 1. **Policy and strategy development and implementation**

To be able to influence and contribute to the development of policy and lead the development and implementation of a strategy.

* 1. **Strategic leadership and collaborative working for health**

To use a range of effective strategic leadership, organisational and management skills, in a variety of complex public health situations and contexts, dealing effectively with uncertainty and the unexpected to achieve public health goals.

* 1. **Health Improvement, Determinants of Health, and Health Communication**

To influence and act on the broad determinants, behaviours and environmental factors influencing health at a system, community and individual level to improve and promote the health of current and future generations. To be proactive in addressing health inequalities and prioritising the most vulnerable or disadvantaged groups in the population.

* 1. **Health Protection**

To identify, assess and communicate risks associated with hazards relevant to health protection, and to lead and co-ordinate the appropriate public health response. To understand how those risks associated with hazards relevant to health protection may be influenced by climate change and environmental degradation currently and in the future.

* 1. **Health and Care Public Health**

To be able to improve the efficiency, effectiveness, safety, reliability, responsiveness, sustainability and equity of health and care services through applying insights from multiple sources including formal research, health surveillance, needs analysis, service monitoring and evaluation.

* 1. **Academic public health**

To add an academic perspective to all public health work undertaken. Specifically to be able to critically appraise evidence to inform policy and practice, identify evidence gaps with strategies to address these gaps, undertake research activities of a standard that is publishable in peer reviewed journals, and demonstrate competence in teaching and learning across all areas of public health practice.

* 1. **Professional, personal and ethical development**

To be able to shape, pursue actively and evaluate your own personal and professional development, using insight into your own behaviours and attitudes and their impact to modify behaviour and to practise within the framework of the GMC's Good Medical Practice (as used for appraisal and revalidation for consultants in public health) and the UKPHR’s Code of Conduct.

* 1. **Integration and application for consultant practice**

To be able to demonstrate the consistent use of sound judgment to select from a range of advanced public health expertise and skills, and to use them effectively, working at senior organisational levels, to deliver improved population health in complex and unpredictable environments.

**Appendix III: shortlisting notes**

**Applicants in training grades**

* 1. *Medical and dental applicants*

All medical/dental applicants must have Full and Specialist registration (with a license to practice) with the General Medical Council or General Dental Council (GMC/GDC), **or be eligible for registration within six months of interview.** Once a candidate is a holder of the Certificate of Completion of Training (CCT), registration with the relevant register is guaranteed.

Applicants that are UK trained, must ALSO be a holder of a Certificate of Completion of Training (CCT), **or be within six months of award of CCT** by date of interview demonstrated by a letter from the Training Programme Director (TPD).

* 1. *Non-Medical Applicants in training programme*

All nonmedical applicants must be registered with the UKPHR or be within six months of registration at the date of the interview. Applicants must provide proof (letter of confirmation from UKPHR or the CCT) at interview.

1. **Applicants in non-training grades**

Applicants that are non-UK trained, will be required to show evidence of equivalence to the UK CCT.

Applicants from a medical background will be expected to have gained full specialist registration with the GMC through the Certificate of Eligibility for Specialist Registration (CESR) route.

Applicants from a background other than medicine are expected to have gained full specialist registration with the UKPHR at the point of application.

**Employers are advised that individuals are not eligible for and should not be shortlisted for 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 Public Health (Specialist) Register. Although an applicant may be able to provide documentary evidence that a portfolio application is in progress, no guarantee can be made as to the outcome of an application to the GMC/GDC/UKPHR specialist registers. The exception to this is when the candidate holds the CCT.**

**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.**