



Public Health England

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To: All Directors of Public Health
PCT HR leads
Cc: Local Authority HR leads
DH Gateway reference: 18727

28 February 2013

Dear Director of Public Health and PCT HR Director

Transfer of public health staff from PCTs to local authorities Pension provision post 1 April 2013

This letter sets out the agreement on pension provision for transferring staff, 'new starters' post 1 April 2013 and the groups of staff to whom ongoing access to the NHS pension scheme has been agreed. The letter also sets out subsequent information on each individual member of staff which local authorities will need and how the Director of Public Health and PCT HR lead need to work with the receiving local authority to match a small number of posts to role profiles as part of this information exchange.

Background:

On 20 December, the Department of Health and Local Government Association issued a joint letter which set out the agreements for pension provision for transferring staff who then move roles and 'new starters' post 1 April 2013.

The letter explained that:

1. all transferring staff who have their access to NHS Pensions (NHSPS) protected will retain access to the NHSPS if they are then compulsorily moved to another post within the same local authority and remain in direct local authority employment;
2. transferring 'public health professionals' and staff in the 1995 section of the Scheme within 10 years of their normal pension age of 55 or 60 as at 1 April 2012 and those covered by tapering protection will retain access to the NHSPS if they make a voluntary move to another public health post within the same local authority;
3. all other transferring staff who do not fall within the categories above, will join the Local Government Pension Scheme (LGPS) if they move posts voluntarily after transfer;
4. local authorities, as employers, can decide whether to apply for a directions order to allow continued access to the NHSPS for public health professionals and staff nearing

retirement where they recruit “new joiners” to public health roles who already have access to the NHSPS. These staff could be recruited from the NHS, another local authority or elsewhere.

The letter explained that further work was being undertaken in relation to the description of “public health professionals” for pension purposes and that further guidance would be issued in the new year.

The now agreed description is set out in the **attached** set of ‘Frequently Asked Questions’ and is as follows:

5. *‘Members who are Public Health Specialists or Practitioners: whose job role involves them wholly or mainly undertaking public health practice or activity either in relation to prevention; health protection; healthcare public health; or health promotion programmes for individuals from particular population groups, or in relation to the whole population within a certain geography. They should be registered on one or more of the GMC, GDC, UKPHR, HCPC or NMC registers or be carrying out a public health role as defined by the attached list of Agenda for Change (AFC) role profiles.’*

Information Analyst Principal, Public Health Intelligence, AFC payband 8a-b

Information Analyst Advanced/Team Manager, Public Health Intelligence, AFC payband 7

Information Analyst Specialist, Public Health Intelligence, AFC payband 6

Health Improvement Practitioner, AFC payband 5

Health Improvement Practitioner Specialist, AFC payband 6

Public Health Researcher, AFC payband 7

Health Improvement Practitioner Advanced, AFC payband 7

Public Health Research & Development Manager, AFC payband 8a

Health Improvement Principal, AFC paybands 8a/b/c

Public Health Consultant, AFC paybands 8a-9

The above agreements are designed to focus on specific roles transferring to local government which are likely to:

- require specific public health skills and experience
- be largely NHS facing, and
- be appropriate for staff whose careers are likely to move around the public health system.

Next steps:

The two groups of staff for whom ongoing access to the NHSPS has been agreed are:

- Those nearing retirement – as described in 2 above
- Public health professionals – as described in 5 above

The ESR (Electronic Staff Record) system and individual staff records will identify those:

- in the 1995 section of the Scheme within 10 years of their normal pension age of 55 or 60 as at 1 April 2012 and those covered by tapering protection
- involved wholly or mainly undertaking public health practice or activity either in relation to prevention; health protection; healthcare public health; or health promotion programmes for individuals from particular population groups, or in relation to the whole population within a certain geography
- on relevant registers.

For those staff who are wholly or mainly undertaking public health practice or activity in the public health domains above but are not on one of the relevant registers, Directors of Public Health and HR leads are asked to consider the role these staff are undertaking and match this against one of the role profiles outlined above.

These role profiles are published on the NHS Employers' website (links below) and are referred to in the Agenda for Change Handbook.

http://www.nhsemployers.org/PayAndContracts/AgendaForChange/NationalJobProfiles/Documents/Public_Health-Health_Improvement.pdf

http://www.nhsemployers.org/PayAndContracts/AgendaForChange/NationalJobProfiles/Documents/Information_Management_and_Technology.pdf

These are also the roles against which a job evaluation exercise would have been conducted.

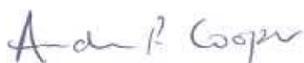
Once these staff have been matched against one of the role profiles set out above, PCT HR are asked to write to the individual member(s) of staff, by 31 March 2013, to confirm this and to explain that this therefore means they are part of the group of staff for whom ongoing access to the NHSPS has been agreed.

This letter needs to also be shared with the receiving local authority so that appropriate records can be maintained on pay roll and elsewhere and individual members of staff pension provision can be appropriately managed.

Both the NHSPS and the LGPS form a valuable part of the pay and rewards package for employees. The attached FAQs provide additional information on access to the NHSPS and the LGPS including the relative contribution rates.

Thank you very much for your help with this process, which will, as far as possible, enable the movement of staff around the public health system and assist local authorities in recruiting specifically qualified public health staff.

Yours sincerely



Andrew Cooper
Deputy Director
Public Health England – Transition Team
Department of Health