Responding to the risk of reducing resources: Development of a framework for future change programmes in Environmental Health Services

Ruth PLUME[1], Dr Alan PAGE [2], Professor Hemda GARELICK[3]

[1] Middlesex University, London, United Kingdom, r.plume@mdx.ac.uk
[2] Middlesex University, London, United Kingdom, a.page@mdx.ac.uk
[3] Middlesex University, London, United Kingdom, h.garelick@mdx.ac.uk

Abstract: Environmental Health services in the UK have been subject to significant resource reduction over the last 5 years. It is suggested that services risk becoming unsustainable unless efficient and effective ways of working are employed. With this in mind this paper presents the findings of research into the experience of practitioners who are developing and delivering evolving Environmental Health services in English local authorities in the context of deep cutting budget reductions. The research explores the experience of change and identifies lessons learnt in the development and execution of new models of Environmental Health service delivery to mitigate against risks of unsustainable or undeliverable services. Interviews were carried out with the participants to capture their experience of change and the impact on service delivery. A range of service delivery models have been examined including outsourcing, shared services, regional delivery models and discussion of mutual arrangements and at various stages of development from planning through to full transformation. Field work was undertaken between 2014 and 2016. Thematic analysis of interview transcripts has identified six emergent themes of the experience of change: managing changes effectively; understanding the reasons for change; understanding the nature of Environmental Health; meaningful consultation; viability of the proposal; planning and timeliness. Environmental Health services undergoing transformation may benefit from taking into account the lessons learnt by organisations that have previously undergone significant change in their response to the risk of a reducing resource.

Keywords: Environmental Health; austerity; regulation; emerging risk; outsourcing; managing change.

1. Introduction

Context: Environmental Health is a discipline with an historic basis in public health protection which has developed into a modern profession. The World Health Organisation (2006) advocates a regulatory perspective within the public health discipline. In many countries this has emerged in the form of Environmental Health services. Such services seek to ensure a healthy environment across a range of areas including: where we live; where we work;, what we eat; and the quality of the surrounding natural environment. The landscape for Environmental Health service delivery in the United Kingdom (UK) is affected by a range of complex external forces. These include drivers for better regulation (Kellett 2008), regulatory change, austerity (Gainsbury and Neville 2005), devolution (Sandford 2015a), social context, delivery models (Grant Thornton UK 2014) and delivery ethos. Social and economic contexts such as changing demographics, economic change and political change present further challenges. Performance measurement with an emphasis on accountability, value for money and outcomes focus, leading to "New Public Management (NPM)" has developed as a managerialist perspective on the delivery of public services (Massey & Pyper 2005) and is established via privatisation, reorganisation, competition and improved efficiency. The message from the UK government is clear, in that, it wants local authorities to transform services to adapt to this new context. Oversight of this "improvement" process has been led by the Audit Commission (dissolved in 2015) and the Local Better Regulation Office, later reformed as the Better Regulation Delivery Office.

The Emergent Risks: The challenging political direction and austerity measures introduced in the UK since 2010 have had a considerable impact on local authorities and how they deliver their public health protection and regulatory function. According to Gainsbury and Neville (2015) English local authority budgets have been cut by £1.8 billion in real terms since 2010 with at least another £9.5bn expected by the end of the decade. "The part played by councils in protecting public safety through local environmental regulation, food inspections and workplace health and safety checks has also been scaled back by sharp cuts, as government directions to reduce "red tape" have been given further impetus by the need to save money and reduce staff" (ibid, pg 1). The CIEH Workforce Survey 2014/15 confirms the average budget for Environmental Health services has fallen in real terms by 6.8% between 2013-14 and 2014-15, with the Local Government Association (LGA) pointing to a significant loss of skills and experience through early retirement and voluntary redundancy (LGA 2015a). The LGA also examined the challenges for public health protection services, recognising the particular challenge for small sized organisations with a high reliance on government funding. The issue for small agencies is exacerbated by the broad range of functions within public health protection services, which as the authors highlight (ibid) mean it is often more difficult to explain the range of services and thus to protect them from budgetary reduction.

The Emergent Responses: Grant Thornton UK (2014) examined local government's response to these challenging conditions in the context of public health protection services and found innovation and an emergence of alternative delivery mechanisms including: contracts and partnerships with other public sector bodies; contracts, partnerships and joint venture vehicles with the private sector; and new public sector/non-public sector entities (creation of new local authority companies, social enterprises and trusts). The Local Government Act 1972 provides a legal framework for local authorities to share and outsource services and some public bodies have used private companies to deliver shared services (Sandford 2015b). To date, in relation to public health protection, the evidence suggests that the predominant response is local authorities sharing staff and services, with 416 shared service arrangements occurring between councils across the country resulting in £462 million of efficiency savings (LGA 2015b). However, there is limited evidence of outsourcing public health protection services and the future of such outsourcing of a stand-alone public health protection services is doubtful (LGA 2015a). That said, a small number of councils have outsourced wider domains of local authority services that have included public health protection. Sandford (2015b) also points to a number of examples of council services being delivered through mutuals. A public service mutual is defined as an organisation which has left the public sector 'parent body' but continues to deliver public services. Employees play a significant role in the operation and control of a mutual (ibid).

The Study: We explored the experiences of an outsourced Environmental Health service and compare this to other evolving forms of service delivery through an exploration of the experience of practitioners involved in developing and delivering evolving delivery models in English local authorities. The models examined were in various stages of development from planning through to full transformation. Data collection commenced in 2014 and continued until 2016. Research participants were local authority officers, managers, commissioners and leading members of the Chartered Institute of Environmental Health (CIEH) who have been closely involved in Environmental Health service changes, both in the planning and delivery stages of a variety of models. Their experiences are reflected upon and lessons learnt for the future are drawn from this personal and professional reflection.

2. Method

The methodology adopted a constructivist research approach utilising an open research question which was defined as "What are the lessons to learn from the implementation process for differing and evolving service delivery models for Environmental Health?" This approach was used to illicit and value the voice of the participants and to extract personal reflections. The data collection approach followed a comparative multiple-case study design which offered a more robust study than a single case study approach (Yin 2009). The cases were selected to ensure that a range of models of service delivery were explored as identified by Grant Thornton UK (2014). Models of service delivery included were: outsourcing; regional shared public protection service; mutualisation; shared services (management only) and shared services (field officers and management). In addition, there were participants from leading members of the professional body (Chartered Institute of Environmental Health) and the Association of London Environmental Health Managers who had been involved as consultants in the change management with respect to the models of service delivery being explored. The study employed a qualitative method of data capture using a series of unstructured reflective interviews with 14 participants from 11 organisations. Some of these interviews were iterative over the period of transformation, whilst others were single events to explore experiences at various stages of transformation. Each interview lasted for about one hour, was recorded and fully transcribed. In this study, the researcher had 20 years' experience in working in a local authority Environmental Health service and in the specific technical areas being investigated which placed the researcher directly inside the study context with knowledge of what the job entails and the stresses and strains therein (Robson 2002). Therefore, there was a position of trust between the researched and the researcher based upon specialist knowledge of the service under review (Harris 2005). All data collected was kept anonymously and the particpating organisations are not named. Ethical approval for this study was granted by Middlesex University, School of Science and Technology, Natural Sciences Ethics sub-Committee. Thematic analysis was employed to identify, analyse and report on patterns (themes) within the data. The thematic analysis followed phases as suggested by Braun and Clarke (2006). The recorded interviews were transcribed which provided an opportunity for familiarisation with the data. The transcriptions were searched manually to find repeated patterns of meaning issues of potential interest in relation to the research question. Initial codes for the data were identified from repeated words or comparative phrases and the codes were organised into meaningful groups in relation to the research question. The next phase was to consider how these data codes may combine to develop emerging themes. The data codes were organised into thematic maps where the data codes were considered as influencing sub themes which linked to a main central theme.

3. Results and Discussion

Six main themes have emerged from the data analysis (see Figure1) and are as follows: understanding the reasons for change; understanding the nature of Environmental Health; planning and timeliness; viability of the proposal; managing changes effectively; and meaningful consultation. These six themes were then grouped into three complimentary pairs. For each emerging pair of themes the influencing sub themes are first identified and then discussed in the light of the participant responses.

Figure 1: Thematic Analysis: The six emerging themes.

3.1 Understanding the nature of Environmental Health and understanding the reasons for change

Understanding the reasons for change and understanding the nature of Environmental Health are separate themes but are grouped together due to their complimentary nature (see Figure 2 below).

Figure 2: Understanding the reasons for change and understanding the nature of Environmental Health themes

3.1.1 Understanding the nature of Environmental Health

Influencing sub themes: Problem solving, Breadth, Knowledge, Improving public health, Statutory, Regulatory, Emerging service demands, Priority, Awareness. This research has pointed to the need for an understanding of the nature of Environmental Health which involves not just an appreciation of the

breadth of the subject area but also the various ways of achieving the outcomes. Detailed knowledge of the nature of Environmental Health services may not be required to manage delivery but a lack of sufficient knowledge can lead to problems. Environmental Health Practitioners, whether based in the UK or elsewhere, have a raft of legislation and a choice of subsequent tools to deal with matters that bring about a risk to the public's health. Participants found that detailing their Environmental Health service entailed a detailed understanding of the legality of the service provision. Lack of knowledge of the nature of Environmental Health services from a potential delivery body was noted as a potential barrier and risk and given the substantial breadth of service this can pose significant issues. Participants also noted that the way Environmental Health Practitioners (EHPs) work may give potential service providers unexpected difficulties. Participants realised that EHPs are very different to work with as they are constantly trying to make things better which means that they probably point out more issues than perhaps you might get from other professionals. In addition, establishing an evidence base that measures effectiveness of Environmental Health services and the improvement in public health outcomes will play an important part in designing future models of Environmental Health service delivery. What EHPs do is well established but the benefits are tacit rather than explicit, and thus demonstrating success can be difficult, in itself posing a substantial business risk. Participants noted that creating measurable outcomes is an effective way of increasing awareness and prioritising Environmental Health services. Thus the design of performance indicators by people who understand the nature of Environmental Health can raise the profile of Environmental Health services. Some participants underestimated how little new contract managers knew about Environmental Health and there was a concern that service commissioners will not understand the nature services they may be contracting out. Participants agreed that the setting up of any contract or service delivery model needs to be prescriptive enough to ensure adequate level of service delivery but be flexible to deal with emerging demands.

3.1.2 Understanding the reasons for change

Influencing sub themes: Politics, Value, Shake up needed, Costs, Devolution, Alternatives, Protection, Opportunity, Resilience. Understanding the reason for change was a fundamental issue for participants; unless the reasons for change are understood and accepted then engagement of staff in the change process can only be superficial. All participants accepted that change was inevitable and there was consensus that change was needed and the range of responses evidences this. In general, the more senior the participant was in the organisation the more they understood the reasons for change It was noted that at field officer level, there was a differential in response with more concern expressed by those with a long continuous employment history, whilst those who were relatively new, being more open to the process of change. However, participants acknowledged that changes affect people in different ways and not all see the benefits. Understanding the reasons for change enabled the participants to see the benefits of the changes they were undergoing. An interesting observation made by some participants was that Local Authorities can become quite complacent in service delivery and some members of the community they serve have developed a negative/stereotypical view of council employees and their behaviour, and a fundamental review of the service offered might be timely. In light of the ongoing budgetary restrictions impacting on local authorities, participants identified advantages of developing a new service model as preventing year on year cuts; and that the shared services model provided a degree of resilience in organisations where there are dwindling staff numbers. The national and local political agenda is fundamental to local authority service delivery and all participants understood the politics involved in the change. The depth of the participants understanding of the politics depended on their role, with the leaders of organisation being most immersed in the political agenda. Frontline officers were least concerned with the political agenda but all understood the implications of working within or for a political organisation. Participants' professional and personal values influenced their view of the best model of service delivery, for example, all of the participants felt strongly that the ethos of public service and Environmental Health should be protected in new models of Environmental Health service delivery. This did not necessarily mean

keeping services the same but ensuring that new services maintained the professional values of Environmental Health.

3.2 Planning, timeliness and viability of the proposal.

Planning and timeliness and viability of the programme are separate themes but are grouped together due to their complimentary nature (see Figure 3 below).

Figure 3: Planning and timeliness and viability of the proposal

3.2.1 Planning and Timeliness

Influencing sub themes: Planning, Pressure, Detail, Getting it right, Specification, Outcomes, Expected levels of service delivery, Risk, Challenges, Opportunities, Timescale. Planning for a new service delivery model should be taken seriously and not be a light touch process. Every single detail needs to be considered and it should be recognised that delivering on a very tightly written specification can be difficult. It was found that there is considerable pressure in planning and delivery of services but well thought out performance indicators are an important tool to make sure that the service remains robust but flexible. A well set up contract which is stringently monitored is said to be likely to succeed and meeting and exceeding targets has a positive impact on the well-being of staff even if the work to get there is intensive. A "tight" specification means that cuts may be difficult to make without affecting the ability to deliver on a contract. Getting the detailed specification of a service is therefore fundamental to the success of a new service delivery model as what gets measured gets done. Lack of detail in a contract has proven to give rise to problems for some participants in regard to services being expected that were not in the contract and this was thought to be partially due to the commissioners lacking subject knowledge.   Resourcing for design and implementation of agreements is important as some participants felt that a client manager with limited knowledge of the service can cause vulnerability. Reporting on detailed performance indicators creates a workload for all levels of officers in the delivery organisation and for the client in respect of monitoring the contract. Participants recognised that detailed indicators are required but reporting on them less often may help. However, this may not be possible in the early stages of a new arrangement as both parties will be anxious to check that the contract is not at risk. Conversely, the opportunity to tell people about what the service is doing helps to raise awareness of a previously low profile service. It was found that it was

important to include clauses in the agreement around raising concern and early termination if issues are not getting addressed. A mechanism to oversee shared services was suggested as good practice and an example of this was the setting up of a governance board and with representatives from both sides. Participants identified particular risks in transferring small parts of a service, on the other hand, from a resilience perspective; sharing small services across a region can bring a wider pool of technical people to help at a time when expertise is disappearing from local authorities. Resilience of small services should be considered at the planning stage with contingencies built in to deal with key personnel becoming unavailable. Although, it is important to pay close attention to "getting it right" it is also important to ensure that the process is carried out in a timely manner. Having a short timescale for implementing change has been difficult for some participants and it has meant that other commitments were not addressed or had not had sufficient time devoted to them. Bringing in resource to support the process can be helpful but this is countered by the need for those setting up the contracts to have sufficient knowledge of the services being considered.

3.2.2 Viability of the proposal

Influencing sub themes: Legality, Cost, Commercial viability, Getting it right, Alternative models, Emerging service demands, Flexibility, Workforce skills, Resilience, Risk, Logistics. Commercial models of Environmental Health service delivery require a profit margin which is very difficult to achieve when bidding to deliver services for organisations where the cuts and diversion of funding have meant that regulatory services are already very lean. Participants expressed a concern that austerity had affected EHS more than other departments, effectively marginalising the service. In turn some of the organisations studied suggested that the only way to make money would be to cut staff leading to a risk that services could not be delivered. Most participants question whether outsourcing Environmental Health on its own is viable at all and think that regulatory services are too small to operate commercially as a standalone service. Equally participants suggest that viability of other models including mutualisation cannot work with small single authority services. Another risk for consideration is the legality of a Local Authority discharging its functions through a third party. This has been explored through legal consultation and the consensus is that it is possible with proper governance in place, but this required substantial thought and any mistakes would pose a serious risk of legal challenge at macro and micro levels. Seeing Environmental Health as a regulatory service causes participants concern, the use of regulation is a tool used to protect public health but it is misguided to think of Environmental Health purely as a regulatory service. Participants not involved in outsourcing worry that the public service ethos may be lost in more commercial models of service delivery believing that ultimately such changes have the potential to impact greatly on those in the community already at a disadvantage. Issues such as poverty and health inequalities and preventative interventions that work towards long term goals may not hold enough interest for companies on 10 or 15 year contracts. However, participants from an outsourced service do not agree, and maintain, that to date, the essence of Environmental Health has not been lost in translation. Redesigning or commissioning services gives the opportunity to think about what is really needed rather than just carrying on doing more or less of the same. Services such as Environmental Health usually have to be locally delivered and so savings cannot be easily made by relocating or centralising although some specialisms may be more suitable for regionalisation. Regionalised or shared service models may be operate over a large geographical area and some participants found that distance is a challenge both for front line services and from a management perspective. However, shared services are working well in most of the organisations involved in the study. Harmonising terms and conditions of employment for staff are flagged as very important when looking at a shared service model or where authorities are joining together. Getting it right in the planning stages was seen as essential to ensure that models are viable. All participants allude to this and the consequences of getting it wrong can damage the relationship between the authority, the profession and the community. Involving those with an in depth knowledge of Environmental Health services in the commissioning of services or drawing up of contracts ensured that sufficient detail was included in new models of service delivery.

3.3 Managing changes effectively and meaningful consultation

Managing changes effectively and meaningful consultation are separate themes but are grouped together due to their complimentary nature (see Figure 4 below).

Figure 4: Managing changes effectively and meaningful consultation

3.3.1 Managing changes effectively

Influencing sub themes: Fear, anxiety, Impact of changes, Difficult, Process, Trust, Conflict, Customer Satisfaction, Emerging service demands, Skills development. Managing change effectively was found to be essential to a successful delivery of a new service model in Environmental Health. Change is difficult and this was expressed by all participants, but the way change is managed can ease the process and improve the experience of those affected. One clear element was to embrace the change and to seek to influence the outcome to provide a positive solution. What is apparent is that the participants wanted to ensure that the decisions being made are appropriate and that the service delivered continued to protect and improve citizens' health irrespective of the model of delivery. However, the participants found that the way the change is being managed is influential but it is equally important to ensure the decisions made now are the right ones as they will shape the future of not only the Environmental Health profession but of the people and environment that the service has set out to protect and improve. Trust commonly came up as in issue for participants and organisations, with the level of trust depending on the participant's role in the change process. Participants felt that it is important to nurture relationships throughout the organisation and to develop the trust. Trust was also shown to be an issue between different types of organisations, for example, local authorities have a history of benchmarking their services against each other but this level of comparison is not thematic between commercial organisations and local authorities making comparison of

service delivery difficult. Participants reported that in the early stages of privatisation there was a degree of suspicion between those involved in provision of public goods and those in the commercial sector. New service delivery models often results in new leadership and a need for demonstrable judgement of success. This has resulted in increased reporting and recording giving the staff the impression that they were no longer trusted

Conflict between organisations is something that is mentioned by participants, but with potential advantages in setting out a more formalised service with agreement or contract, although many participants recognised a need for maintained flexibility. The differences in overarching organisational culture and psychology were not just limited to the public/private sector divide. It was noted that some of the local authorities working together were very different in nature, and conflicting political leadership was found to be an issue. This is a critical issue since the political make up of local authorities may alter as part of the electoral process, as can leadership and direction, and this may well impact on shared services both current and proposed. Likewise not all shared services span similar local environments, demographics and local economies resulting in differing priorities and agendas. It is, of course, possible to overcome these differences but the local issues do need to be well understood by those who are responsible for setting up new service delivery models. Skills of managers of services affected by change have to be developed. Reporting on contracts and acting more commercially is not always part of the skill base of the participants although most participants report that they have adapted well. Customer satisfaction was flagged as very important to all participants although in most cases it was too early to assess whether customer satisfaction had been affected by changes in service delivery. All participants agreed that customer service was a priority in effectively managing the changes. Fear and anxiety were experienced by participants undergoing change but this was more common in the early stages of planning. One significant issue established is the knowledge of the service by senior managers, with services not led by a regulatory practitioner more at risk of creating fear and distrust. This fear and anxiety was not equally held by all participants with some seeing the opportunities early on whilst others felt anxiety in the early stages but later on began to see the opportunities, this is in line with other research into organisational change which found that the response to change may be staged as follows: denial; defence; discarding; adaptation and internalization (Carnell 2003).

3.3.2 Meaningful consultation

Influencing sub themes: Questions, Answers, Honesty, Not appeasing staff, Flexibility, Engagement, Trust, Solutions, Problems. Questions and answers are the building blocks of consultation. If questions are not answered then this may lead to staff feeling that they are being appeased and that the consultation is not meaningful. Staff consultation groups were well received by participants who were involved but some felt that only the positives were highlighted in an attempt to sell the proposal and participants recommended that consultation be realistic from the first stages. For some participants initial excitement at the prospect of more support and resilience was depleted as the process went on and the reality was not as promised. Openness and honesty was seen as very important so that people do not feel that a decision has already being made. Some participants mentioned leaking of information which raised issues of trust which, in turn, led to lack of engagement in the consultation period whilst others felt unsettled if decisions about which way to go still hadn't been made. It was recognised that it is a fine balance getting people on board and engaging them whilst still being honest and sharing as much information as is available and still maintaining the need for confidentiality of sensitive information. The need for meaningful consultation is further supported by Smollen (2015) who found that uncertainty, unclear roles, lack of consultation/participation, relationships and stress of others all caused stress during a change process. Some participants were worried that the consultation period had not addressed the true nature of the work of Environmental Health Practitioners. For example, the use of time management matrixes to predict staff resources required raised concerns that some of the richness and quality of service would be lost in an organisation that

delivers a public service using business models such as time management. There were also concerns about the difficulties in delivering bespoke services to different LAs and having to make decisions about how to carry out the work differently according to the political direction of the area. Participants did not feel that this had been addressed in the consultation, probably because it was an unknown entity.

4. Conclusions

The main themes that have emerged from the data analysis are: Understanding the reasons for change, Managing changes effectively, Understanding the nature of Environmental Health, Viability of the proposal, Meaningful consultation and Planning and timeliness. Ensuring that key personel understand the reasons for change when it is forced by external influences can reduce the risk of losing experienced staff and their associated skills and may enhance opportunities to rethink the service making for leaner delivery. Managing changes effectively helps deal with the difficulties that redesign of services can bring. Anticipating the challenges and dealing with them effectively whist taking on board the views of the key players reduces the risk of alienation and improves the resilience of the evolved service model. Understanding the nature of Environmental Health is therefore essential for people who are involved in drawing up contracts or commissioning services in order to reduce the risk of the service failing to deliver the expected outcomes. Getting it right ensures that a service delivery model is viable, maximises its resilience and reduces the risk of failure in service delivery. The larger the scale of the project, and the bigger the change, the more emphasis participants made in respect of getting it right and recognising the risk. An effective and meaningful consultation will acknowledge unknowns and build in flexibility around these in the eventual service design to ensure a robust service model. Getting it right at the planning stage and allowing sufficient time for implanting the changes maximises the chances of providing a resilient service model with a smooth transition for customers, staff and management.

These themes should not be considered in isolation as each is an intrinsic component of a successful change process in response to the risk of reducing resource for English Environmental Health services. The themes and influencing sub themes identified in this study have the potential to be developed into a framework to show lessons learned which Environmental Health services can consider when planning or making changes to their model of service delivery. Environmental Health services undergoing such transformation may benefit from taking into account the lessons learnt by organisations that have previously undergone significant change in their response to the risk of a reducing resource. The participating organisations in this study are unique in terms of their operational context, resources, political and history which may not be replicated in other contexts. However, regulatory services in local authorities seek to deliver similar service domains since the service is an executive agent of government legislation and they operate in the same macro context and macro political environment. As such, it is hoped that the broad lessons captured from these early adopters of new service paradigms can be utilised by other agencies. In terms of future interpretation, each organisation should consider their own context, politics and history in the employment of the lessons learnt (Bell 2005).

5. Recommendations and dissemination

Three heads of Environmental Health services from local authorities who were not involved in the initial stage of the research have considered the findings and have agreed the themes as relevant and recommended timely dissemination to Heads of UK Environmental Health services to inform future change management practice and to reduce the risk of regulatory failure in a climate of reducing resource. The next step is to further refine the emergent themes into a product which can facilitate Environmental Health services wishing to draw on the lessons learned to inform their future practice.

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Corresponding author:

Ruth Plume

E mail:

R.Plume@mdx.ac.uk

Address:

Office: T210, Hendon Campus, Middlesex University , The Burroughs, London NW4 4BT

Tel 020 8411 5227

Figures will need to be colour in print

Conflicts of Interest: None