Other Business Report

Decisions

- 1. Members are asked to:
 - Note updates on Health and Social Care Bill; Healthy; LGA Health Commission;
 Communities Programme; Local Government Network (LINks)
 - Receive update on European local government conference about gender equality
 - Receive update on EU
 - Note Feedback from meetings attended since the last Board meeting

Actions Required

2. Secretariat to take necessary action.

Action by: Secretariat

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Other Business Report

Summary

 This report provides a summary of other business relevant to the Board and also deals with issues relating Community Well-being Board representation on LGA groups. Members are also asked to feedback on meetings attended since the last Community Well-being Board meeting.

Other Business

2. Health and Social Care Bill

The Health and Social Care bill has now completed its Commons stages and is due to go to the House of Lords in the next few weeks. During the Public Bill Committee stage amendments put forward by the LGA in relation to the new regulator, the Care Quality Commission, (a duty on to co-operate with local enforcers and not to create new performance indicators over and above those in the National Indicator Set) were withdrawn following government assurances. Amendments to proposed changes to public health powers were withdrawn and may be pursued further in the House of Lords.

3. Healthy Communities Programme

The Programme has received confirmation from the Department of Health that further funding will be received enabling the Programme to be for the next CSR period, with the amount of funding to be finalised from 2009. This has meant that over the past couple of months the Joint Heads of Programme have been engaged in a series of discussions with the Department and other stakeholders to determine the future themes of the Programme. The Programme will continue to have a national focus, and continue to deliver products such as peer reviews and leadership academies in order to help build capacity within local authorities to tackle health inequalities and improve the health of their local communities. Key forthcoming work areas for the programme include place shaping, partnership working (including LAAs and LSPs), community engagement and the financial impact of the health improvement agenda. The Programme will continue to have an emphasis on developing new initiatives which will be piloted across a series of local authorities in conjunction with health partners.

The Programme hopes to provide a full description of its planned activities once the business plan has been agreed with the Department of Health and Programme Board, on which the LGA is represented. Consultants have now been appointed to complete the evaluation and impact assessment of the first phase of the Programme, initial results should be available in the summer.

Coastal health is a developing work area for the programme, an initial event for coastal authorities exploring Joint Strategic Needs Assessments is being held on 20th May in Southend. Clir Roger Thomas (Chair of the LGA Coastal Issues Special Interest Group) has been involved in developing the event and will be a speaker on the day. Other thematic

areas of work the Programme is developing over the next few months include rural and coalfield health.

Other upcoming events include a fringe meeting for elected members at the UK Public Health Association Annual Forum in April. As part of our work to foster understanding and networks between local government and public health professionals, the Programme is running a number of workshops at the Forum, covering issues including coastal health inequalities, the Healthy Communities Peer Review and the Joint Strategic Needs Assessment. The Programme is also sponsoring an award in both the LGC and HSJ Sustainable Communities Awards and the LGC Awards.

It is proposed that the joint heads of programme present to the Board finalised plans for the programme in early Summer.

4. LGA Health Commission

The first two meetings of LGA Health Commission have taken place, focusing on accountability in commissioning and providing health services. The March meeting will concentrate on accountability in public health. Witnesses attending meetings have included the NHS Confederation, the Picker Institute, Sir Ian Kennedy, Chairman of the Healthcare Commission, representatives of NHS Foundation Trusts and GPs.

A call for evidence has been placed on the LGA's website, and responses will be considered at the Commission's March and April meetings. In addition to the monthly meetings scheduled until May, a special seminar is being held in Sheffield, to which a wide range of organisations will be invited. At that event, participants will discuss the 'call for evidence' questions. A poll of the public's views is also being arranged. At the April meeting, a round table discussion will be held with experts, on emerging conclusions and recommendations. The final report will be presented at the LGA annual conference, in July.

Information about the commission, the call for evidence and witness papers can be found on the commission's web pages at: http://healthcommission.lga.gov.uk/lga/core/page.do?pageld=1

5. Local Involvement Networks (LINks)

This year, and particularly the next few months, will be an important time for LINks as councils procure Host organisations and the networks themselves take shape. In many areas activity is well under way and good progress is being made. However, the Department of Health has expressed some concern that development in other areas is not sufficiently advanced for this stage in proceedings. As Chair of the Community Well-being Board, Olr David Rogers has written to all Leaders and Chief Executives to request LINks are given an appropriate level of profile within councils and to ensure there is leadership if there is any sense that progress is slowing.

The LGA is continuing to circulate a monthly newsletter to LINks lead officers on latest news, information and sources of advice and support. On this final point the NHS Centre for Involvement (NCI) is currently leading on the development of a range of advice, guidance and support material. Identifying and sharing best practice and learning is another important activity at this stage in the implementation schedule. LGA officers are

working with the Department of Health on this and ensuring any such knowledge is circulated to council colleagues involved in LINks.

6. European local government conference about gender equality

The Council for European Municipalities and Regions (CEMR), the pan-European LGA, organises a conference in Pisa on 20 and 21 February 2008 about gender equality in local government. About 400 local councillors from 30 countries will attend the conference. The LGA will send three members: Cllr Clare Whelan, Cllr Mary Aspinall and Cllr Zoë Patrick. Cllrs Whelan and Aspinall are the UK members on the CEMR Women's committee and Cllr Patrick is member of the new LGA European and International Strategy Group.

The conference is the final conference of the project regarding the Implementation of the European Charter for Equality of Women and Men in Local Life. This Charter was completed in 2006 and sets out the role that local authorities can play in this field being the level of governance closest to the citizens and their responsibilities as service providers and employers. The Charter outlines certain key principles, which touch on the following: dealing with multiple discrimination, balanced representation and participation, stereotypes and obstacles and developing policies and services which take into account the specific needs of women and men in local life.

Local authorities are invited to sign it, to make a formal public commitment on the principle of equality of women and men, and to implement, within their areas, the commitments set out within the Charter. Until now, more than 500 local authorities in Europe signed the Charter (one from the UK: Chester-le-Street).

The LGA circulated the Charter at the beginning of 2008 to all its members (chief executives and equalities departments) with the recommendation to use the Charter as a tool to implement the Gender Duty. Members can find the Charter on the website of the LGA: http://www.ccre.org/docs/charte-egalite-en.doc

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7. EU update

The European Commission published a consultation paper entitled "Modernising social protection for greater social justice and economic cohesion: taking forward the active inclusion of people furthest from the labour market". The aim of the EU's active inclusion agenda is to promote a Europe wide strategy, which Member States can use to integrate their most disadvantaged into society. Active inclusion comprises three principles: 1) providing an adequate level of income support to tackle underlying social problems and promote full integration of all EU citizens; 2) ensuring an inclusive labour market; and 3) better access to quality public services. Since the EU has no competence in any of the above three issues, the Open Method of Coordination prevails, meaning that the EU sets some broad, headline objectives, and leaves Member States to decide how to reach them

The Commission consultation ends on 28 February. The LGA european and international unit developed a short response, and circulated it to lead members of both the Community Wellbeing and Regeneration boards. The key points are:

General comments:

- Welcomes the broad, non legislative approach set out in the Commission's Active Inclusion Communication. We support further work being carried out within the Open Method of Co-ordination (OMC).
- Considers lifelong learning as fundamental to the active inclusion objective. Alongside
 active labour market measures, it can help those most excluded to become better
 integrated into society and to be equipped with the skills to become active in the
 labour market.
- A comprehensive, permanent infrastructure of public services, decided on, organised and funded by local authorities, such as transport infrastructure, affordable housing, and affordable, accessible and timely childcare and care for people with disabilities and the elderly, can provide a solid basis for achieving active inclusion objectives within the wider Lisbon strategy.

Minimum incomes: The [EU] Lisbon Strategy is about both the quality and quantity of jobs. EU and Member States should encourage "quality" jobs by promoting the creation of inclusive, sustainable labour markets, and address the regrettable challenges of in-work poverty and discrimination, as well as .. the "quantity" by promoting active labour market policies (ALMP) to tackle worklessness. A job is the best safeguard against social exclusion: unemployment/inactivity can lead to inequality and divisions in society.

Inclusive labour markets:-

- Despite considerable efforts in national employment and skills programmes, worklessness remains high across the EU. While UK government has reached its headline EU Lisbon employment targets [70%] and is striving for an 80% employment rate, it masks regional, intra regional, sub regional and local unemployment disparities. Local councils engage, advise, and help those furthest from the labour market by tailoring and personalising national and European active labour market policies (such as New Deal and the European Social Fund) to individual and local need. Real progress can only be made by devolving, localising and incentivising them since many impose rules/criteria which can act as a barrier to progression from worklessness to work for key groups.
- Local councils are pivotal in coordinating partnerships with the private, voluntary and public sector to help bring services and organisations together. They should be encouraged to exploit innovative approaches and methods to bring employment and skills policy together, which is the most effective way helping people into employment. The response cites the city strategies as an example of how this works.

Access to quality social services:

- Supports the Commission's non-legislative approach as regards social services and welcomes the acknowledgement in the active inclusion document that 'local and national governments have a fundamental responsibility for designing, funding and administering policies to secure the integration of people furthest from the labour market. Service providers
- private, public or mixed play a key role in implementing policies at a local level.'
- Such an approach echoes the new Protocol on Services of General Interest agreed in the Lisbon Treaty. The reference to the 'wide discretion' that local authorities have is the

first of its kind, and helps to address some of LGA's concerns that Internal Market rules are increasingly affecting how local social services can be financed and delivered.

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8. Feedback from Meetings Attended since the last Board meeting

Clir Mike Colston attended nign seminar addressed by Ivan Lawrence on ASC. Also atended S⊞P Board as se counties ASC group of councils rep.

Clirs. Barnard, Ritchie and Banks attended the Research in Practice Councillors' and Trustees Seminar, 6 and 7 February at Woodland Grange, Leamington Spa, entitled 'Think Family: Getting the whole picture'. Sessions on this theme included 'Reaching Out: Think Family' Chris Cuthbert; 'Families and Learning Disability' Jo Williams; 'Support for Families where Parents have a Learning Disability' Beth Tarleton and parents from the Parents2Parents group; 'Intergenerational Practice' Alan Hatton-Yeo; 'Connected Care:Integrating health and social care and delivering community led solutions' Richard Kramer; 'Working with Families where there are Mental Health Problems' Clare Mahoney; 'Keeping the Family in Mind' Louise Wardale.

This was usefully a two half-days gathering allowing time for travelling time and from the event. Research in Practice for Adults joined together with Research in Practice to emphasise the importance of Adult Services working closely with Children's' Services.