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Update on other Board business

Purpose of report

For information and comment.

Summary

Members to note the following updates:

- Outside bodies and external meetings
- Care Bill
- Better Care Fund
- Health Systems
- Regional Physical Activity Senior Leadership Forum
- A guide to whole system sexual and reproductive health and HIV commissioning
- Public health in local government– one year on
- Tackling Tuberculosis - Local government's public health role
- Housing and Public Health – Healthy Lives, Healthy Homes
- Adult Social Care
- Children and Young People
- Dementia
- Forthcoming LGA events

Recommendations

Members are asked to:

1. **provide oral updates** on any other outside bodies / external meetings they may have attended on behalf of the Community Wellbeing Board since the last Board in March; and
2. **note** the updates contained in the report.

Action

As directed by members.

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Update on other Board business

Outside Bodies and external meetings

1. Cllr Katie Hall attended the latest meeting of the **Learning Disability Programme Board** on 25 February, a policy advisory group chaired by Norman Lamb MP which works to improve health and wellbeing outcomes for people with learning disabilities and their families. This meeting emphasised the need for each area to seek faster progress on Winterbourne view.
2. 5 years after the introduction of the dementia strategy, Cllr Ford attended an **All Party Parliamentary Group** Policy Roundtable on improving the support people receive after dementia diagnosis on 26 February. Discussion included consideration of the possibility of developing a minimum standard for post diagnosis support and what “good” might look like. During the meeting, Cllr Ford emphasised that any new support roles taken by Local Authorities would need to be adequately funded to cover additional burdens. She also attended the **Dementia Friendly Communities Champion Group** on 6 March.
3. Cllr Ford attended the **English Forums on Ageing Chairs** meeting on Wed 26th February 2014 at the Department of Work and Pensions on behalf of the LGA. The forums are comprised of regional partners that promote older people and ageing issues at local level. EFA Chairs were keen to work with the LGA to find ways to engage with local authorities in their regions. Cllr Ford stressed that the LGA are looking to promote the issues through influencing existing bodies engaged in ‘ageing society’ such as the Age Action Alliance, UK Advisory Forum on Ageing and the ADASS Older People’s Network, and are planning future events in relation to older people and housing. She drew attention to the LGA’s proposals on rewiring public services and the funding settlement which stress the importance of proper planning for an ageing population.
4. Cllr Hall chaired a celebratory end-of-year event to share **Health and Wellbeing Boards’** learning on 19 March, organised by the LGA and its national health partners. Our Health and Wellbeing Systems Improvement Programme has effectively supported HWBs through a range of products and activities including 17 peer challenges and 3 peer training sessions – involving over 100 peers, 8 electronic bulletins, and 4 national events. These activities have been well received by the sector and evidenced through our on-going evaluation undertaken by Shared Intelligence. Sharing knowledge and learning has been at the heart of the programme and we look forward to working with HWBs in meeting their future challenges, building on the success of the past year with our new 2014/15 programme funded by Department Health.
5. On 7 April Councillor Gillian Ford attended the **All Party Parliamentary Group on housing and care for old people**. This was an opportunity for Lord Filkin, former chair of the Public Service and Demographic Change Committee and now chair of the Centre for Ageing Better, to update the APPG on the Centre’s progress. The meeting also considered the issue of planning retirement housing for an ageing population.
6. Cllr Ford attended a **Care Quality Commission** breakfast meeting with key stakeholders on Wednesday 9 April. This discussed the changes CQC wishes to make on how it regulates and inspects services, including the role of the Chief Inspectors and

more specialist inspection teams, including members of the public. The LGA has provided a joint response to the CQC consultation on its proposed inspection framework, based on feedback from the meeting.

7. On 6 May Cllr Ford attended the **Dementia Action Alliance** at which there were a number of speakers including Dr Peter Carter, CE, GS Royal College of Nursing Dementia, who argued that services needed to be configured for carers and individuals. On 8 May Councillor Ford attended a roundtable event on how **free social care at end of life** will work in practice. The focus was on the implementation and how this was to work in practice. The roundtable heard from a pilot programme called the Liverpool Star Care model that developed as people wished to end life at home. Councillor Ford, also attended the **Care Bill Implementation event for the operation of the residential care market** on 9 May. The event discussed current issues with England's residential care market, and explored how the Care Bill, due to be implemented in 2015, might affect the operation of this market and the implications for providers, users and local authorities.
8. Cllr Jonathan McShane spoke at the **Drugs, Alcohol and Justice Cross Party Group** meeting on 17 May. The meeting discussed progress of drug and alcohol services since the transition. Concerns were raised about retendering, particularly when a number of neighbouring authorities retendered at the same time stretching the capacity of organisations to respond. There was a call from providers for more long term contracts.
9. On 20 May Cllr Ken Taylor attended the **Ministerial Advisory Group on Mental Health Strategy**. The meeting focused specifically on the way the group should work going forward and invited members of the group to provide ways on the best use of the groups experience.
10. Cllr Katie Hall attended the **Care and Support Transformation Group** meeting on 4 June. Norman Lamb MP addressed the group and responded to a number of questions. The group were also updated on the Care and Support reform programme. The group also looked a number of key priorities including Community Capacity Building, Housing and Information & Advice.
11. Sir Merrick Cockell and Councillor McShane attended the **launch of the Moving More, Living More campaign** in Hackney which aims to increase physical activity levels and promote lifestyle changes in the population through collaboration between central and local partners. A recent guidance document produced by the Chief Cultural & Leisure Officers Association (CLOA) also highlights the role commissioners and culture and leisure service providers can play in improving the health and wellbeing of the communities they serve.
12. Sir Merrick and Cllr Katie Hall met Sir Richard Thompson, President, **Royal College of Physicians** on 22 April. They discussed scope for joint working; and discuss LGA and RCP proposals regarding the future health and care landscape to identify any scope for joint activity.
13. The **healthy schools, healthy citizens conference** in London took place on 28 April and was chaired by Councillor McShane. The conference explored how local authorities and their partners from schools and the NHS worked together on their shared goals. There were a series of interactive discussions and workshops which shared learning

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and looked at the levers that are available in the new health landscape to improve outcomes for children, young people and their families.

14. Councillor McShane spoke at the **Food Active conference** in Lancashire on 8 May. The conference focused on the commercial determinants of public health with a focus on the food industry. There was significant discussion of obesity and the role of the food and drink industry. The DPH from Salford talked about developing a Local Government Declaration on Food along similar lines to the declaration on tobacco.
15. Sir Merrick met Duncan Selbie from **Public Health England** on 9 May to discuss preventative approaches to Dementia.
16. Councillor McShane was a keynote speaker at the **Chief Medical Officer's Conference** on 12 May in London. The event focused on influencing at local level in particular the public health role of local authorities and the role of the DPH within this.
17. Councillor Jonathan McShane chaired the **Public Health System Group** on 15 May. The group heard presentations on the new Health and Wellbeing Framework for England being developed by PHE as well as their new business plan. Proposals for the first PHJSG Stakeholder Forum to be held on June 24th.
18. On 20 May Councillor Gillian Ford presented an award at the **national dementia friendly awards** ceremony, to the winners of the schools and colleges category. Other award presenters included Jeremy Hunt, Nick Hurd and Jeremy Hughes. The event was hosted by Angela Rippon.
19. On 27 May, Sir Merrick attended an informal dinner hosted by the **Nuffield Trust** for national stakeholders and opinion formers to meet Simon Stevens, the new Chief Executive of NHS England to discuss the future of health and care.
20. On 3 June LGA Chairman, Sir Merrick Cockell, spoke at a **King's Fund** event on the pressures facing health and adult social care. Sir Merrick spoke alongside Chris Hopson, Chief Executive of the Foundation Trust Network and Sandie Keene, Director of Adult Social Services at Leeds City Council and Immediate Past President of the Association of Directors of Adult Social Services. Sir Merrick outlined how the scale of the funding cuts to local government overall, combined with demographic pressures, has put the adult social care budget under extreme pressure. Looking to the future, Sir Merrick highlighted the importance of integration between health and social care, calling for a bigger Better Care Fund, supported by a transformation fund to help ease the impact of such a change, along with Health and Wellbeing Boards taking a lead role in the commissioning of local health and social care services.
21. On 28 May, Carolyn Downs had an introductory meeting with Simon Stevens, Head of the NHS, at which they discussed the Better Care Fund, the LGA's longer term vision for integration and our ambitions for the redesign of the health and social care landscape.

Care Bill

22. The Care Bill concluded its passage through Parliament and received Royal Assent on 14 May. For a number of years local government has been at the forefront of making

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the case for changing the way that care and support is designed, commissioned and delivered. The LGA broadly supported the proposals set out in the legislation and worked constructively with Government, parliamentarians and stakeholders. This included working closely with Parliament on the draft Care and Support Bill in 2012 which laid the foundations of the Care Act and which was an important milestone in the process of reform.

23. Throughout the passage of the Act the LGA worked closely with the Association of Directors of Adult Social Services (ADASS) and the Care Support Alliance, a consortium of over 70 organisations that represent and support older and disabled people, to make the case for a reformed system of care that is fully and fairly funded. At the July Community Wellbeing Board we plan to discuss progress with the work to prepare for implementation of the Act in 2015, including key risks and adequacy of funding.

Better Care Fund

24. It was reported in recent press that the **Better Care Fund** had been delayed. Whilst it is true that many areas want and need to continue to develop plans to ensure they are financially robust and aligned with wider NHS plans, it is not the case that the implementation of the BCF has been delayed. This was confirmed by subsequent DCLG and DH press releases. NHS England are communicating with CCGs over the coming weeks to seek further clarity on the projected savings and to explain the timeline from now through to September, and LGA is ensuring any communications are shared with colleagues in local government. Feedback from local areas to date illustrates the challenges which partners are facing in developing agreed, detailed, robust plans which are ambitious in transforming local systems. But every local area is participating and there is evidence that the Better Care Fund is driving positive change across the country.
25. There will be an oral update on BCF from Andrew Webster.

Dementia

26. A video was launched on 23 May by Sir Merrick asking for a call-to-action for council leaders to support their local communities to become more dementia- friendly. It includes examples of areas of where local councils have actively signed up to becoming more dementia-friendly and are working with local partners to enable people living with dementia to live more fulfilling and rewarding lives and feel more included in their local communities. http://www.local.gov.uk/web/guest/adult-social-care/-/journal_content/56/10180/6206530/ARTICLE

Health Systems

27. Colleagues in the Leadership and Localism team have produced a Councillor Guide to the Health System. The publication is intended for elected member who do not lead on health or social care issues because all councillors, whatever their role and whether they are elected Members of unitary, county or district councils, need to have an understanding of the health system. This is because councils have important functions in relation to the health of their residents.

28. Copies of the publication are available at:
<http://www.local.gov.uk/documents/10180/5854661/A+councillor%27s+guide+to+the+health+system+in+England/430cde9f-567f-4e29-a48b-1c449961e31f>.

Regional Physical Activity Senior Leadership Forum

29. UKactive, Public Health England, the Local Government Association and the County Sports Partnership Network have announced the establishment of Moving More, Living More regional physical activity fora across England. Addressing physical inactivity is a national and local priority, and we know from international, national and local work that a strategic, cross-sector approach is required to address this increasing and previously intractable problem.
30. A quarter of all adults in England are physically inactive, i.e. do less than 30 minutes of moderate intensity physical activity per week. The risks of this are clear: inactivity shortens a person's lifespan by up to 5 years; is responsible for 17% of premature deaths in the UK; and if everyone in England was sufficiently active 37,000 lives would be saved every year. Economic and social impacts of low levels of physical activity include an estimated £20 billion annual cost to the country.
31. Key issues to be addressed include:
- 31.1 Understanding how low levels of physical activity drive poor outcomes and service costs (NHS, local authority and voluntary sector) in local communities.
 - 31.2 Identification of evidence based interventions that effectively address low levels of physical activity in individuals and communities, including peer-to-peer learning.
 - 31.3 Enabling local needs, knowledge and intelligence to inform national developments, tools and resources, to ensure they support local action.
 - 31.4 Developing opportunities for cross-sector partners at national, regional and local levels to explore and planning strategic collaborations that will deliver change.
32. Key dates and locations:
- 32.1 Birmingham - 10th July
 - 32.2 Leeds - 14th July
 - 32.3 London - 15th July
 - 32.4 Cambridge - 16th July
 - 32.5 Bristol - 17th July

A guide to whole system sexual and reproductive health and HIV commissioning

33. Commissioning responsibilities for sexual and reproductive health (SRH) and HIV have undergone major changes over the 18 months, bringing both new opportunities and new challenges. Reflecting this, in January Public Health England along with LGA and the Association of Directors of Public Health announced plans to develop a guide to whole system SRH and HIV commissioning. Consultation with a range of stakeholders has been undertaken to inform this initiative, including workshops and informant interviews across England.

34. The report articulates how commissioning bodies need to work together to ensure that the individual experiences seamless delivery of services to meet their needs.
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/313866/Guide_to_whole_system_sexual_and_reproductive_health_and_HIV_commissioning_FIN_AL_DRAFT_2.pdf

Public health in local government– one year on

35. Public health made the formal transfer to local government in April 2013, and in the subsequent months great strides have been made to tackle the wider social and economic determinants of poor health. This publication was commissioned by the Local Government Association (LGA) to quickly capture the thoughts of those working hard to make the new system work with contributions from councillors, directors of public health, providers, commissioners, GPs, academics and other key decision makers.
http://www.local.gov.uk/documents/10180/5854661/L14-150_Public+Health+in+LG_08.pdf/4c6b0b1d-3843-4eaa-92dd-b9109fb544fa

Tackling Tuberculosis - Local government's public health role

36. Frequently Asked Questions on tuberculosis (TB) have been produced by the LGA and Public Health England to address questions that councillors and officers in local government may have on TB and its burden in the UK. The UK now has one of the highest incidence rates of any Western European country, with 8,751 cases of TB reported in 2012.
37. TB is one of Public Health England's key priorities and one supported across local government. A collaborative strategy has been launched for consultation, and aims to bring together best practice in clinical care, social support and public health to strengthen TB control, and provide support to local clinical, preventive and social care services in the NHS, local government and wider health and social care system.
38. Many of the actions needed to eliminate the burden of TB require strengthened and more integrated local services which ensure consistent, evidence based prevention, treatment and support to patients, their families and other contacts, especially so because TB does not exist in isolation from other health and social concerns.

Housing and Public Health – Healthy Lives, Healthy Homes

39. Poor housing costs the NHS at least £2.5 billion a year in treating people with illnesses directly linked to living in cold, damp and dangerous homes. Treating children and young people injured by accidents in the home costs A&E departments across the United Kingdom around £146 million a year. Among the over 65s, falls and fractures account for 4 million hospital bed days each year in England, costing £2 billion. Over 25,000 people die each year in the UK as a result of living cold temperatures much of this is due to living in poorly heated homes.
40. In July the LGA will launch a resource describing how public health in a number of councils has started to use the opportunities of a local government setting to improve health and wellbeing. The case studies were chosen because they show a range of ways in which public health in councils is approaching health and housing. They include

councils spread across England, covering both rural and urban environments and with varying levels of deprivation and affluence.

Adult Social Care

41. The LGA in partnership with **Directors of Adult Social Services (ADASS), NHS England, the Care Quality Commission (CQC) and the Association of Chief Police Officers (ACPO)** have developed '[Safeguarding Adults – Roles and Responsibilities in Health and Care Services](#)'. Part of the LGA Adults Safeguarding programme, this document sets out how individuals and organisations should work together to prevent abuse and neglect and to ensure the safety and well-being of anyone who has been affected.
42. Poor care, neglect and abuse are all part of the same problem and addressing this locally requires action from anyone involved in looking after those who need care. The document highlights the importance of local partners working together including councils, CQC, health and the police to keep people safe and outlines the practical opportunities there are to do so.

Children and Young People

43. On 19th March we submitted a response to the **health select committee** inquiry into children's and adolescent mental health and Child and Adolescence Mental Health Services (CAMHS). The key messages included;
 - 43.1 While some local areas are making progress, there remain a number of barriers which need to be tackled in order to make sustained improvements to this vital service. For example current and high quality data on the prevalence of children and young people's mental health problems are needed by local authorities to enable them to commission better services.
 - 43.2 The transfer of 0-5s public health commissioning to local authorities presents a unique opportunity to take a fresh look at children's services and to develop more integrated services for children and young people across ages 0-19 years old. It is therefore crucial that the transfer is fully funded and communicated early to enable local authorities to plan effectively.
 - 43.3 We are keen to work with NHS England and wider partners to improve CAMHS. It is important that the different tiers within CAMHS are informed by, and work alongside, local partners who provide other services for children, particularly local authorities and Clinical Commissioning Groups (CCGs).
 - 43.4 There is good evidence that early identification and intervention can help reduce the long-term cost on hard-pressed health and care services. Local authorities need the resourcing and flexibility to be able to invest in prevention and universal services to promote good mental health for all children, particularly those most at risk.

Forthcoming LGA events

Leadership essentials: support for Health and Wellbeing Board chairs

44. This year's Leadership essentials event takes place on 24 and 25 June 2014 and 14 and 15 October 2014 at the Warwick Conference Centre in Coventry. Supporting HWB chairs is a central objective of our 2014/15 Health and Wellbeing System Improvement programme. It is now a critical time for HWBs to strengthen their system leadership role

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in shaping the local health and care system and in driving transformation. The role of the chair of the HWB is pivotal in building relationships with partners, fostering collaborative leadership, providing democratic accountability and driving forward this agenda. This is an opportunity for chairs and vice-chairs to come together to have space to think and reflect, share experiences, network and actively learn from each other through the tried and tested two-day residential Leadership Academy model. The session will be led by LGA peers who are HWB chairs with input from national partners.

National Children and Adult Services Conference

45. This year's National Children and Adult Services conference takes place in Manchester on 29-31 October 2014 and will bring together the most senior and influential figures in children and adult services. Since the last conference in Harrogate there have been significant developments in both fields against a dominating backdrop of severe funding cuts across the public sector. Attendees will hear from a mix of keynote and or ministerial addresses and other significant plenary sessions by key players in the adult, children and healthcare sectors. We will keep Board members informed as the programme develops.