**Community Wellbeing Board: Annual Review of the year**

**Overview**

1. The LGA has continued to promote the role of local government in the health and care system, building on the themes set out in *Rewiring Public Services.*

**Integration of Care and Support**

1. The LGA continued to work at all levels with the Department of Health, NHS England, Public Health England and other partners to influence the national debate on health and social care integration. We have produced a range of joint value cases, tools and resources.
2. This collaborative work has been a major influence on the Integration Pioneers Programme and the Better Care Fund (BCF). Negotiations continue on the BCF to ensure that the promises secured as part of the Spending Round are honoured, and that councils get a fair deal from their hard work with local partners.
3. The LGA and the NHS Confederation have published ‘[All Together Now: the future of integration](http://www.local.gov.uk/documents/10180/12193/All+Together+Now+-+Making+integration+happen/e3117093-2b58-4ff3-85a5-29814e540c81)’, which further develops our shared vision of integration and identifies what the Government needs to do to address the key barriers.
4. We also lobbied hard for extra support to implement the Better Care Fund and the Care Act. This resulted in funding of £2.7 million to support regional working on the BCF and Care Act in 2014-15, plus an additional £125,000 per council just for Care Act implementation in 2014/15.

**Adult social care reform and funding**

1. The LGA submitted a detailed response with the Association of Adult Social Services (ADASS) and Solace to the government’s **‘caring for our future’ funding reform consultation** in October 2013. This highlighted concerns around costs, timetable, the lack of required detail, the importance of raising public awareness, and the impact of the proposals on the provider market.
2. The Care Bill received Royal Assent, becoming the **Care Act**, in May 2014. The LGA broadly supported the Bill but we lobbied extensively, with a range of partners at every stage of the Bill’s passage through Parliament. Our lobbying focused on:
   1. Adequacy of funding: The Minister gave the commitment that he could “absolutely confirm” that there is adequate funding for the reforms;
   2. Briefing successfully against an amendment to require the Care Quality Commission to conduct reviews of local authority commissioning regardless of whether there was a particular failure in care that needed investigating; and
   3. Proposing amendments to the new duty to offer **universal deferred payment agreements** (DPAs). We proposed a national body to oversee and administer the DPA scheme to prevent councils being exposed to the inherent financial and reputational risk. We secured a meeting with the Minister to set out our concerns, several of which are reflected in the draft guidance.
3. As part of our behind the scenes work on the **cost of the reforms** we raised a range of concerns about funding assumptions with Department of Health. A number of these are reflected in the Department’s latest Impact Assessments particularly costs associated with carers. We produced a ‘Ready Reckoner’ for councils, which provides an illustrative breakdown for every council of the amount of money they are likely to receive for Care Act costs in 2015/16.
4. Our lobbying and influencing work on funding and reform was given wider public profile through accompanying **media** work. We secured prominent coverage on the BBC and in The Telegraph, Independent, Guardian, Times and Express on issues including funding cuts, the Spending Round, the Care Bill, and the BCF.

**Public Health Transformation**

1. The LGA has worked extensively with key stakeholders to support the new emerging public health system. The LGA now chairs the Public Health Systems Group, which reflects local government’s crucial strategic role in the new system.
2. We have focused on collating and disseminating best practice on how councils have embedded public health locally and the interconnectedness of the social determinants of health. Our briefings, factsheets and case studies in this area have been downloaded 20,000 times and are the most downloaded publications on the LGA website. We also delivered over 20 public health conferences which have attracted over 2,500 delegates.
3. Our annual national public health conference took place on 4 February in partnership with the Association of Directors of Public Health. Jane Ellison MP, Public Health Minister and Duncan Selbie, Chief Executive of Public Health England attended and the conference offered a valuable opportunity to analyse the implications for local government and public health since transition.
4. In response to high rates of measles, an emergency catch-up campaign was launched in April 2013 to vaccinate unprotected children against MMR. Run with PHE, NHS England and local directors of public health, it showed how swift collaborative action could be taken to protect health and maintain public confidence.
5. We have also been influential in a range of other issues in the past year including: sexually transmitted infections; the restriction of takeaway establishments; alcohol licencing; food marketing and labelling, electronic cigarettes to children, and alcohol abuse.
6. **Children’s Public Health:** The Community Wellbeing and Children and Young People’s Boards have overseen negotiations around the transfer of 0-5s public health commissioning responsibilities to local government. We secured a transfer date of 1 October 2015, and LGA is negotiating with the Department of Health, NHS England and other partners to ensure the transfer is fully funded, and any formal mandate is based on outcomes and time limited.

**Dementia**

1. **Chairman’s campaign:** The LGA has played an active role in ensuring a continued high political and public profile on dementia. The Chairman made dementia one of his key priorities for his last 6 months in office, making a personal commitment to the issue and launching a call to action for all council leaders to develop dementia friendly communities.
2. The Community Wellbeing Board (CWB) has continued to influence national policy in this area through our input on the Ministerial Advisory Group on creating dementia friendly communities and the Post Diagnosis Support Working Group.
3. We have worked in partnership with the Alzheimer’s Society, Department of Health and Public Health England to produce a range of case studies, tools and resources. Over 200,000 people have now become dementia friends and increasing numbers of local councillors are supporting the development of local Dementia Action Alliances.

**Mental Health and Autism**

1. The national mental health strategy; ***No Health Without Mental Health*** set out a clear ambition that mental health should have equal parity with physical health. The LGA has been working with partners to deliver the actions set out in the Mental Health Concordat, to showcase examples of local innovation to meet the needs of people experiencing or at risk of mental health crisis.
2. **Autism:** The LGA has supported the implementation of the Autism Strategy across local authorities and contributed to the identification of key priorities to be included in the revised strategy, Think Autism.
3. **Children’s mental health:** The Community Wellbeing and Children and Young People’s Boards submitted a joint response to the Health Select Committee inquiry into children’s and adolescent mental health services. They called for greater funding for children’s mental health services and an overhaul of the system to address key barriers including poor quality data, lack of accessibility and poor transitions between children’s and adult services.

**Older people and ageing**

1. The LGA has continued to influence this agenda, submitting formal responses to the Centre for Ageing Better; the Liberal Democrats’ Ageing Society consultation and a joint response with ADASS to the government consultation on the Vulnerable Older People Plan.
2. In October 2013, we organised a roundtable on the preparedness of local government for an ageing society and the findings of the House of Lords Select Committee report on Ageing. This made a number of recommendations that are informing future LGA work programmes in this area.

**Housing for adults with care and support needs**.

1. Working in partnership with ADASS, NHS England, the Chartered Institute for Housing and the National Housing Federation, we have developed a joint housing, social care and health partnership agreement, which will be launched later this year.

**Adult Social Care and Health Improvement**

1. The LGA secured funding of £6.5 million for a range of [Sector Led Improvement programmes](http://www.local.gov.uk/web/guest/publications/-/journal_content/56/10180/6010508/PUBLICATION) to support health and social care improvement in 2014/15. These include:
   1. Towards Excellence in Adult Social Care;
   2. Health and Wellbeing System Improvement Programme;
   3. Implementation of the Care Act;
   4. Integration and support for the Better Care Fund; and
   5. The Winterbourne View Joint Improvement Programme.
2. From September 2014 these programmes will report to the Improvement and Innovation Board, with close links to the Community Wellbeing Board on policy issues. They have been brought together as part of a more coherent “offer” to councils and are offering a wide range of support from peer challenges, shared learning events, tools and guides.
3. The LGA has provided support for lead members in adult social care through a leadership academy for adult social care portfolio holders, Regional Lead Member Networks, and 'Must Knows', a free downloadable web-based source of information aimed at new portfolio holders on current issues.

**Equalities**

1. The LGA continued its work to support councils to meet their Public Sector Equality Duties, for instance revising the Equalities Framework toolkit to reflect changes to Equalities policy brought about by the Independent Review of the Public Sector Equalities Duty. We also organised a national conference in November 2013 to promote awareness of the revised framework and share best practice.
2. In January, the Chair of the CWB presented a report to the Executive, which proposed the Executive maintain corporate oversight of equalities issues across the LGA. This proposal was unanimously supported.

**Next Year**

1. The Community Wellbeing Board will set its agenda for 2014-15 at its September meeting. Priority areas for consideration include:
   1. Preparing for **implementation of the Care Act** in April 2015;
   2. Supporting the implementation of the **Better Care Fund;**
   3. Working to ensure the new **0-5 public health responsibilities** will be properly funded and well implemented;
   4. Influencing the **Spending Review** in 2015; and
   5. Influencing and shaping the national picture: responding to the final report of the Commission on the Future of Health and Social Care in England, and evidence to the Health Select Committee’s inquiry on public expenditure.

|  |  |
| --- | --- |
| **Contact officer:** | Sally Burlington |
| **Position:** | Head of Programmes |
| **Phone no:** | 020 7664 31 |
| **E-mail:** | [sally.burlington@local.gov.uk](mailto:sally.burlington@local.gov.uk) |