

External meetings, outside bodies and other CWB Business updates

Purpose

For information and comment.

Summary

Members to note the following updates:

- External meetings and Outside bodies; and
- Other CWB Business updates.

Recommendation/s

Members are asked to:

1. Provide oral updates on any other relevant outside bodies/external meetings they have attended on behalf of the CWB since July 23;
2. Note the updates contained in this report; and
3. Provide a steer to officers in relation to items 15, 18, 28 and 31.

Action/s

As directed by members.

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External meetings and outside bodies

1. **14 July 2014: Cllr Gillian Ford attended the APPG on housing and care for older people.**
 - 1.1 The sessions discussed *After the Care Act: Implementing housing with health and care for older people*. The APPG heard from the following speakers: Jon Rouse, Director General, Social Care, Local Government and Care Partnerships, Department of Health; Neil Revelly, Executive Director People Services, Sunderland City Council and Aileen Murphie, Director DCLG/LG Value for Money, National Audit Office.
 - 1.2 **Jon Rouse.** Jon split his address into 3 parts. Firstly the Care Act, secondly Integration and the BCF and thirdly, dementia. This was a lively session. For example, Lord Best asked Jon Rouse about the unease in Local Government about the BCF and the transition to the new ways of working. In response, Jon admitted that they are learning as they go. He had been impressed with level of ambition. 80% of the plans were on the right track. Plans good on information sharing, 7 day working etc. but there was insufficient focus on reducing hospital admissions. Therefore DH had recalibrated payment on performance but this had rebalanced the risk onto local government. Baroness Howarth raised concerns over the integration of planning, as some of this work is long term, but there is a need for some immediate adaptations. Jon Rouse responded saying it is complex putting national policy into local practice and housing needs to be attractive and marketable. Baroness Gardner raised concerns about local authorities' contracts to privately run care homes. She said they don't pay money for travel and LAs don't ensure carers are paid living wage. Jon Rouse responded saying that it is illegal not to pay minimum wage and for travel time so LAs should not contract companies who do this. He called for an open book approach as the hourly rate for carers ranges from £10-£23 and shows why there are problems in some areas. And Nick Raynsford MP highlighted the poor quality of sheltered housing. He also said that the bedroom tax has caused issues as those hit by it are moved into homes that could be used by older people. Modern highly adapted homes are a better option. In response, Jon asked whether DH has done enough to make the case for housing investment to make adaptions to support health outcomes. He said no and his department need to do more and make more of a case. He went on to ask whether there is a need for a national brokerage service for sheltered housing developments.
 - 1.3 **Neil Revelly.** Neil commented on a number of areas including the Care Act, Prevention, Rehabilitation, Adaptation, Market Shaping and Government Depts. Lord Best asked if he shared LGA reservations around the BCF? He said he had confidence in his ability to deliver their plan. Hopefully they are an early adopter. But he admitted it's different in different localities but it's not a concern locally.

- 1.4 Aileen Murphy explored the demographic and financial trends in the adult social care sector, the changes going on at present and an outline of the main risks and challenges. She commented that often these big macro level issues seem simple to resolve. But it's not as simple as moving them into smaller houses because at the heart of these issues are personal issues like not wanting to give up the car or clean out the loft. Therefore people don't make choices at 55-65 but instead wait until crisis point.
2. **16 July 2014: Cllr Gillian Ford attended Inquiry on housing and care for older people.**
 - 2.1 This had presentations from Gary Day, Land and Planning Director McCarthy and Stone and Les Mayhew CASS Business School (expert in equity release) and Elizabeth Mills, Honorary Director, Homeshare International.
3. **16 July 2014: Cllr Colin Noble attended TLAP Programme Board.**
 - 3.1 The meeting discussed TLAP's forthcoming work programme on personalisation, work programme in respect of Care Act and the NHS announcement regarding integrated personal budgets. Cllr Noble made the suggestion at the meeting that the Co-production working group might want to present to a CWB Board on the issue of the Independent Living Fund.
4. **17 July 2014: Cllr Gravells attended the 3rd meeting of the Ministerial Community Covenant Reference Group.**
 - 4.1 This meeting discussed issues and priorities for the group for the coming year.
5. **14 August 2014: Cllr Gillian Ford attended the Dementia Equity Task and Finish Group led by PHE.**
 - 5.1 Aims of this group – to create an evidence review for local commissioners on equity issues in dementia and to advise national statutory partners on how to approach building equalities insights into their future work programmes.
6. **28 August 2014: Cllrs Seccome, Ford, Thomas and Hall met Jon Rouse, Director General at DoH**
 - 6.1 The aim of this meeting was to feed back concerns, raised by members at the July 23 Board meeting, about how the government will respond if it becomes clear there is not enough funding for local government to implement the Care Act in 2015-16. It was a productive meeting at which it was agreed that we share the ambition to implement the Care Act well, but careful consideration of the latest modeling of cost information will be crucial. The timescales for decision will be tight, with the second half of

September being crucial as regulations will need to be finalised shortly after that.

- 6.2 Members also re-iterated concerns about the Better Care Fund and Deprivation of Liberty Safeguards. Members offered to host Jon to visit councils and discussed a range of potential areas for further joint work, including dementia, mental health and CAMHS.

Other CWB Business update

Addressing the financial impact of the Supreme Court Decision re Deprivation of Liberty Safeguards

7. As noted at the last Board, the LGA, jointly with the Association of Directors of Adult Social Services, sent a letter on 30 July to Government on the impact of the recent Supreme Court decision re Deprivation of Liberty Safeguards. This estimates that the financial impact of undertaking more assessments as a result of the Judgment is at least £88 million this year. The letter calls on the Government to fully fund the costs as a new burden.
8. Local authorities support the broadening of criteria for assessments and are already undertaking a range of sector led activities to assist with implementation of the changes. However, if funding is not provided, there will be significant impact on already over-stretched budgets and it will be harder for councils to meet their statutory duties in protecting this vulnerable group of people. A reply is expected by the end of September and Board Members will be kept informed of the response and any future action.

Children's Mental health

9. Following discussions at the Children's Health and Wellbeing Partnership which has representation from the LGA, the Government has committed to making children and young people's mental health and emotional well-being a priority.
10. It has committed to setting up a Children's and Young People's Mental Health and Well-Being Taskforce, which will bring together experts on children and young people's mental health and those with knowledge of wider system transformation from across the education, social care and health sectors. The LGA has been asked to sit on the Taskforce and membership is being sought from Members of the Community Wellbeing and Children and Young People's Board.
11. The Taskforce will make recommendations to Ministers and agree actions aimed at achieving better outcomes for children and young people with mental health problems and will consider:
 - 11.1 The changes and improvements necessary in the current operational systems,
 - 11.2 the system levers which can be applied, and

- 11.3 identify innovative and cost-effective solutions for achieving progress.
12. The Taskforce will agree recommendations, solutions and actions which set out what is needed from the national and local leadership across health, social care and education, and partners can best work together to ensure better outcomes for children and young people's mental health and well-being.
13. In producing its recommendations, the Taskforce will work with the key national organisations accountable for policy, commissioning and delivery of services.

Autism

Proposed next steps to publicise and support council leaders to promote 'Think Autism' within their local areas

14. In response to the publication of DH's revised Autism Strategy published on 2 April, members of the CWB Board agreed to take forward an initial programme of work to publicise and promote 'Think Autism', which involved:
 - 14.1 The LGA continuing to influence the detailed 'next steps' for Think Autism, including the Innovation Fund, Autism Awareness Campaign and champions programme being developed by DH, and publicise this via LGA networks so as to encourage local councils and local councillors to become involved;
 - 14.2 The LGA continuing to influence the refresh of the Self-Assessment exercise so that it reflects local governments priorities and concerns, and taking forward work with PHE and ADASS to produce and publicise examples of innovative practice gained from this and the Innovation Fund; and
 - 14.3 The LGA continuing to influence the revision of the statutory guidance
15. LGA officers held an informal discussion with a number of key partners on 26 August, to review how the LGA might most effectively take forward work to publicise Think Autism so as to encourage local councils and councillors to become involved. It was agreed that it would be helpful for this work to follow that of the proposed work on Dementia. This might therefore be focused on the following:
 - 15.1 Providing core messages targeted at local councillors (whether in their role as local champions or their wider roles within the local council) - on what autism is, why it is important that they support the development of more accessible services for people living with autism and simple steps that they can take to help drive this forward;
 - 15.2 Disseminating examples of positive practice that local councils are already involved in – as part of this wider work to promote local authorities key leadership role to support the development of wider autism aware services; and

- 15.3 Setting out clearly for those in local councils with a leadership role in respect of health, well-being and social care – the key contribution that local councils, working in partnership with their health and wider partners, can and are making to improve the lives of people living with autism, why this is important and how this can deliver benefits for wider populations locally.
16. And that this might be most effectively delivered by the following:
 - 16.1 **Publishing a Top Tips for local councillors on Think Autism.** This might include core messages re What Autism is, why it is important to support the development of more accessible and inclusive services and simple steps that they can take to drive this forward. It was agreed that it might be appropriate to publish this in mid October. This would then provide an opportunity to signpost members who were interested to further information on Think Autism and the importance of the Self-Evaluation exercise in particular;
 - 16.2 **Creating a short 5 minute video** that includes the experiences of people living with autism and examples from local councils who, through their leadership role, are supporting the development of more inclusive approaches to meeting their needs. Text for this video could signpost councillors who were interested to further information on 'Think Autism' – produced by NAS and other organisations;
 - 16.3 **Creating a more focused web-presence on Autism' on the LGA's website.** This could include easily accessible information as set out above, and sign post to further more detailed information on Autism and how local authorities can support the development of more inclusive services. It would also enable us to include policy updates from ADASS and signpost to other relevant policy information and developments in respect of Autism; and
 - 16.4 **Publish a series of blogs and articles in relevant LGA magazines** eg 'First' magazine etc – in which councillors and experts in specific areas are invited to contribute etc. This would enable us to reinforce messages concerning the role of councillors on a regular basis, reflect recent and up-to-date policy developments.

17. Members are asked to offer their views on these proposals.

Alzheimer's and Dementia

Proposed next steps to maintain the momentum to support local councillors to promote dementia friendly communities

18. This note sets out a proposed time-limited and focused 'next steps' programme of work to further promote and build on work that we have recently been involved in to support local councillors and councils develop dementia friendly communities in their areas.

19. The aim is to build on recent work that the LGA has taken forward to promote the role of local councillors in developing Dementia Friendly Communities (DFCs) within their local areas and to ensure that relevant, accessible and up-to-date information is available for local councillors within LGA's website. With this in mind, we would therefore like to propose the following:
 - 19.1 **Re-fresh the LGA tool-kit on Dementia Friendly Communities.** This document, which was extremely well-received, was created under the Ageing Well Programme. It contains a great deal of relevant and useful information for local council leaders on how they could support the development of dementia friendly communities within their areas. It has however become slightly outdated but could be brought up to date with a relatively light touch rewrite. This would involve:
 - 19.1.1 Updating the policy context sections (to reflect the PM's Dementia Challenge etc – this would include a new relatively short section on such areas as new developments in respect of work to prevent dementia and work on equalities etc); and
 - 19.1.2 Adding a few new case studies, which could be drawn from the research carried out in respect of the recent Video on dementia.
 - 19.2 **Publishing a Top Tips for local councillors on what they could do to support their areas become DFC's, set up or become actively involved in DAAs etc.** This would be relatively easy and cost effective to produce, as it would in effect be a summary of the updated refreshed tool-kit set out above. It would include the same core messages and signpost local councillors etc onto further material – LGA tool-kit, JRF, AS and DAA websites and resources.
 - 19.3 **Publish a series of blogs and articles in relevant LGA magazines eg 'First' magazine etc – in which councillors and experts in specific areas are invited to contribute etc.** This would enable us to reinforce messages concerning the role of councillors on a regular basis, reflect recent and up-to-date policy developments.
 - 19.4 **Create a more focused web-presence on dementia and other 'conditions' on the LGA's website.** We will need to discuss this with the LGA web-team. Currently information on dementia and work that the LGA is involved in to promote DFCs etc is difficult to find. We would aim to create a specific 'landing page' on dementia and other conditions – to ensure that this the information set out above is more accessible and easier to find.
20. Officers would welcome members' views on the above proposals.

All Together Now: Making Integration Happen

21. In July, the LGA and the NHS Confederation published our shared ambition for the future of integration. The report will be used to engage partners and key influencers who work in health and social care to gain support for a joint action plan that will significantly develop how integration is rolled out at national level. The report outlines a common vision for the future of the integration of health and social care and identifies the current barriers that councils and the NHS are facing and highlights what government needs to do to incentivise and promote integration.
22. Over the coming weeks and months we will be developing our proposals of what the NHS Confederation and LGA can do as national membership organisations representing the NHS and local government, to support local political, clinical and community leaders to outline long-term plans for integration. We would be interested in hearing your views on the proposals. The publication is available at:

[All Together Now: Making integration happen \(PDF, 16 pages, 105KB\)](#)

Please contact Helen.kay@local.gov.uk for further information

Integration Personal Commissioning (IPC) Programme

23. At the LGA Annual Conference, NHS England Chief Executive, Simon Stevens announced a new national programme to promote shared health and social care budgets. The prospectus for the IPC Programme was published in early September, with support from LGA and the Association of Directors of Social Services, who will be key partners in the programme.
24. The IPC will build on work already commenced to extend personal budgets for health and social care for four groups: children and young people with complex needs; people with learning disabilities; mental health service users; and people with long-term conditions – in particular frail, elderly people.
25. The objectives of the IPC are to: provide a better quality of life and improved health and wellbeing outcomes; prevention of crises and unplanned hospital admissions through better self-management and preventative action; and integration of care and support at the level of the individual.

Barker Commission Report on the Future of Health and Adult Social Care

26. On 4 September, the King's Fund will publish their final report and recommendations on the future of health and social care. We will be providing CWB Members with a briefing and commentary on the key recommendations once the report is published.

Task and Finish Group on local government's response to an ageing society.

27. The aim of this Task and Finish Group is to review the future role of local government in respect of an ageing society; the opportunities and challenges that an ageing society presents and how local government might prepare itself in the immediate and longer term to respond to these. The Group will be made

up of members drawn from relevant LGA Boards (Community Well-Being; Culture, tourism, and sport; Environment, economy, housing and transport; Innovation and Improvement; City Regions and People and Places) working alongside a small number of co-opted representatives from key representative organisations.

28. The aim is that there will be approximately 4 meetings of this Task and Finish Group. The first meeting will take place in late September and the final meeting will take place in January/February 2015. The meetings in October and November will be comprise two 'round table' sessions attended by external experts, presenting papers on key issues to facilitate focused debate on the issues.
29. The aim is that a report of the work of the Task and Finish Group will be published in March 2015.
30. **Action:** For the CWB Board to agree on a member from the Board to Chair this time limited Task and Finish Group.

Task and Finish Group on housing for vulnerable adults with care and support needs.

31. The aims of this task and finish group is to provide a support, challenge and oversight role of this initial programme of work as it develops and to provide a clear link between the project and the work of relevant LGA's Boards – so that members are fully engaged in the work as it develops.
32. This programme of work has particular relevance the Environment, economy, housing and transport Board and the Innovation and Improvement and in addition to a representative from the CWB Board we are seeking representatives from these Boards in particular for this work.
33. The aim is that this Task and Finish Group will meet twice during the life-time of this project, which will take place between September and March 2015.
34. **Action:** For the CWB Board to agree on a member from the Board to become a member of this time-limited Task and Finish Group and for a lead member to chair the group.

Update on Joint programme support to Adult Social Care. August 2014.

35. The following outlines the current improvement offer to adult social care in four key areas; TEASC, the Care Act implementation, Health and Wellbeing Board support, the Better Care Fund and Winterbourne View Joint Improvement Programme. A presentation on the Joint Programme can be provided at the next board meeting.
36. Please contact the relevant officer if you would like further information

Towards Excellence in Adult Social Care (Officer Contact Sarah Mitchell)

37. The Towards Excellence in Adult Social Care (TEASC) programme brings together partners at a local, regional and national level to improve outcomes for citizens. It works with and for local government and its partners to enable them to take responsibility for their own improvement, with a focus on innovation and people centred coordinated care. It uses the commitment of councils to share learning and support; to find new ways of engaging local people; to invite challenge from peers; and to use the knowledge of what works, data and innovation to act as drivers for improvement in the quality of services locally. The programme is based on the adult social care sector's confidence that this approach is best able to improve outcomes for local people and to identify risks.
38. The Making Safeguarding Personal (MSP) programme and support to councils with the Mental Capacity Act and Deprivation of Liberty standards are also part of the TEASC programme. MSP is a sector led improvement initiative it aims to transform safeguarding practice so that it is person centred and outcomes focused, with a range of support and approaches to enable people to resolve or improve their circumstances. The MSP programme was initiated by the sector and the 2013/14 work has informed statutory guidance. 138 councils are currently registered for the MSP programme for 2014/15. Though not all have agreed their level of involvement.
39. The TEASC programme began in 2011. The programme is delivered regionally and led by the TEASC Board. The TEASC Board has representation from a range of partners including ADASS, LGA, DH, CQC and others and the Board is chaired by David Pearson the new ADASS President. Funding for TEASC comes from the DH. The new Programme director is Sarah Mitchell who began her role in August 2014.
40. There are six key priorities agreed by the Board for TEASC for 2014-15. These are:
 - 40.1 All authorities to publish local accounts. Local Accounts are a way of ensuring that communities have an overview of the performance and development of Adult Social Care services in their area.
 - 40.2 Identifying and sharing best practice in SLI regional systems. Regional Chairs, LGA Principal Advisors and TEASC regional leads will work together to share best practice, to identify joint regional objectives for the year and to establish an evidence base of what works.
 - 40.3 Commitment to demonstrating outcomes. TEASC Board will promote the production of evidence to demonstrate the impact of sector led improvement.
 - 40.4 Building confidence amongst stakeholders. TEASC Board will work with regions to build confidence amongst stakeholders and continue to develop a vision for excellence in adult social care.

- 40.5 Ensure an effective and transparent system for identifying and supporting authorities where there are concerns about delivery. The President of ADASS and the Director of TEASC will continue work with Regional Chairs, Principal Advisors, DH Deputy Directors and TEASC leads to be clear about how we offer the right support challenging environment; in line with the existing protocol.
- 40.6 Clarifying the offer of support to organisations and over what issues. TEASC Board will articulate the current offer of support in adult social care and continue to review and update it to meet the needs of the sector.

Care Act (Officer Contact: Andrew Webster)

41. The programme to implement the care and support reforms introduced by the Care Act is part of a wider programme of system change, including the greater integration of health and social care. The programme is led by a partnership between the LGA, Department of Health and ADASS and is managed by a joint programme management office bringing staff from the three organisations together. A partnership board, including a number of local authority representatives has oversight of the programme.
42. A recent stocktake of progress by local authorities (carried out in May and June this year) showed that most councils have plans underway for implementation and that there is a high level of confidence that the plans are on track and that the reforms will be implemented effectively. However, the main challenges to implementation, and the current priorities for the support programme are:
 - 42.1 Ensuring that the local government workforce is trained and ready for the changes;
 - 42.2 Ensuring IT systems are ready for new processes and with sufficient capacity;
 - 42.3 Communicating effectively about the changes to stakeholders, service users and carers; and
 - 42.4 Understanding the cost impact on local authorities in 2015/16 and 2016/17.
43. Key developments over the next few weeks will be: the publication of a guide to resources and tools for implementation including learning and development materials for staff, a set of communications resources for local adaptation and modelling of costs through work being jointly led by DH, LGA and CIPFA (Chartered Institute of Public Finance and Accountancy).

Health and Wellbeing Board support (Officer Contact: Caroline Tapster)

44. The Health and Wellbeing System Improvement Programme 2014/15 is in its second year and is now part of an integrated support offer across health and

care managed by the LGA and funded by Department of Health. For this year's sector led support offer we have taken every opportunity to seek the input of HWBs and their partners to shape the programme. Through this feedback and the independent evaluation of the programme by Shared Intelligence, we have adopted a more simplified and coordinated approach.

45. There are three main priorities reflected in the new programme:
 - 45.1 To support HWB leadership;
 - 45.2 To strengthen regional partnerships; and
 - 45.3 To provide some capacity for bespoke support.
46. We will continue to work collaboratively with a host of key partners eg NHS England, Public Health England, NHS Confederation and Healthwatch England to develop and align the offer to the sector which is as follows:
 - 46.1 Two-day residential leadership development opportunity for chairs and vice-chairs of HWBs – running three times and so far we have had excellent feedback;
 - 46.2 Mentoring programme for chairs of HWBs ;
 - 46.3 Support to regional partnerships through funding for activities such as Chairs Networks and other local priorities;
 - 46.4 Health and Wellbeing peer challenge programme – including peer training and sharing learning – the programme has risen from 17 last year to 22 this year;
 - 46.5 Bespoke peer support – accessed through LGA Principal Advisers, currently 11 areas are engaged;
 - 46.6 Revised Self-Assessment Tool and other products such as the revised Governance Guide for HWBs and social media guidelines for HWBs;
 - 46.7 National post to coordinate support to local Healthwatch – we have launched our offer 'On the Board' to support Local Healthwatch reps with their role on the HWB; and
 - 46.8 A monthly electronic bulletin.

Better Care (Officer Contact: Andrew Webster)

47. A Better Care Task Force was set up in June under programme director Andrew Ridley to oversee the submission and assurance of BCF planning. The LGA has expressed its concerns to ministers and Simon Stevens at both the delay and revisions to the fund, noting that they undermine the fund's core purpose of promoting locally led integrated care, and reduce the level of resources to protect social care.

48. The LGA continues to work with NHS England and government officials to explore how the risks associated with the changes could be mitigated, and to ensure that the voice of local government is heard and understood. These include high-level representation across national government as well as contributing to the task force, which also includes officers across Departments of Health and Communities and Local Government, and NHS England.
49. The BCF programme has a number of work streams including assessment, assurance, improvement support, and communications, among others. The task force has issued revised templates and supporting guidance covering the new requirements of the Better Care Fund (BCF). Local areas are required to submit their completed templates by 19 September. Copies of all documentation, as well as recent communications from Andrew, government leads and ministers, can be found on the LGA website at http://www.local.gov.uk/home/-/journal_content/56/10180/4096799/ARTICLE.
50. The key policy change relates to the £1bn payment for performance framework, with the proportion now linked to performance dependent solely on an area's scale of ambition in setting a planned level of reduction in total emergency admissions.
51. The assessment and assurance process has been strengthened, with the template requiring local areas to set out a detailed, risk-stratified vision and plan of action for implementing integrated care. The quality of the plans and the context in which they will be delivered – for example provider financial health – will be assessed by NHS England regional teams and local government peers, followed by a national assurance review to develop a consistent view of the status of local plans. Each plan will be awarded to one of four categories: approved; approved with support; approved with conditions; and not approved.
52. It is anticipated that the assurance phase will be completed by the end of October.
53. Five local areas have agreed to act as 'fast tracks', and are being supported to submit their plans on 29 August. The five are: Sunderland, Nottinghamshire, Greenwich, Wiltshire and Reading. Their completed templates will be shared as exemplars, and the learning from working intensively with these areas has shaped the revisions to the template as well as to developing improvement support packages. The task force has issued a range of resources to support local areas in meeting the new requirements. This package of support includes universally available material such as online resources, webinars and FAQs, through to tailored regional workshops and seminars, and bespoke support for areas requesting it. The LGA is working with the Leadership Centre and NHS IMAS to develop bespoke peer-led support around strengthening systems leadership and governance arrangements. The programme director issues a weekly bulletin covering key developments – to subscribe, email bettercarefund@dh.gsi.gov.uk – or go to the LGA's BCF page for further details of available support and programme milestones.

The Winterbourne View Joint Improvement Programme (Officer Contact Sally Burlington)

54. In response to the abuse which took place at Winterbourne View, the Winterbourne View Joint Improvement Programme (JIP) was established to help local areas fundamentally transform health and care services for people with a learning disability and / or autism (including Asperger's Syndrome) with behaviour that challenges and /or a mental health condition or those who are at significant risk of the above.
55. Joint with NHS England, the key aim of the JIP is to support local partners to work together to develop safe, appropriate and high quality services that allow people to get the support they need to live locally in community-based settings. The focus is on prevention and sustainability, with the aim of reducing reliance on inpatient care for this group and leading to a permanent and significant reduction in the numbers of people in places like Winterbourne View.
56. As noted in the previous update to the Board provided in June 2014, the response to Winterbourne requires an ambitious programme that seeks to bring lasting change where other programmes and policy initiatives have not been successful for this group of people. There is still a lack of appropriate provision, a system that does not work in an integrated way and one that does not focus on the 'move on' of inpatients with behaviour that challenges.
57. As well as working with key national stakeholders, the programme is providing a range of 'supported improvement' options for local areas, working with 35 local partners on an 'in depth review', aimed at providing bespoke support for each area, based on local area support needs and requests. The Programme is also working to develop a spectrum of support for engagement with all remaining local areas.
58. The JIP is also collating good practice from local areas and is always keen to gain more examples of how local areas are overcoming the challenges of ensuring progress. An engagement strategy group has been set up to ensure that all aspects of the Joint Improvement Programme are influenced by people with learning disabilities and autism, their family members and wider support networks.
59. Ten local workshops will look at identifying local challenges to developing a clear pathway between services commissioned by specialist NHS commissioners, and those commissioned by local NHS and social care commissioners. The events will lead to the development of action plans for local areas to implement, to be followed up during a second round of workshops.

Dates of future meetings

Regional 0-5 Transfer Events (various)

http://www.local.gov.uk/events/-/journal_content/56/10180/6372084/EVENT

Making better spending decisions on public health: joint Kings Fund/LGA event - 18 September 2014

http://www.local.gov.uk/events/-/journal_content/56/10180/6341128/EVENT

Health and wellbeing peer training event (Coventry, 2 – 3 October 2014)

http://www.local.gov.uk/events/-/journal_content/56/10180/6181533/EVENT

Making every contact count: taking every opportunity to improve health and wellbeing in local populations (London) - 2 October 2014

http://www.local.gov.uk/events/-/journal_content/56/10180/6349218/EVENT

Leadership Essentials for HWB Chairs (Coventry, 14 – 15 October 2014)

http://www.local.gov.uk/events/-/journal_content/56/10180/6103314/EVENT

Councils' role in tackling female genital mutilation (FGM) conference (London) - 14 October 2014

http://www.local.gov.uk/events/-/journal_content/56/10180/6356935/EVENT

Redesigning the Health and Care landscape (London) - 22 October 2014

http://www.local.gov.uk/events/-/journal_content/56/10180/6349064/EVENT

Leadership Essentials for HWB Chairs (Horsham, 2 – 3 December 2014) South East - 2 December 2014

http://www.local.gov.uk/events/-/journal_content/56/10180/6348076/EVENT

National children and adult services conference, 29 – 31 October 2014

This year's joint LGA, ADASS and ADCS conference will include sessions by key individuals in the adult, children and education sectors. To be held in Manchester, the main sessions will focus on integration, Care Act Implementation and other key issues, such as mental health, workforce and transitions. There will also be plenty of opportunities to participate in breakout sessions and networking, as well as the opportunity for discussions with Ministerial and shadow teams. In response to requests for a focus on current practice, as well as a range of 'innovation' sessions on the conference programme, an informal 'speakers corner' will give delegates an opportunity to discuss current issues via short sessions on key topics. There will also be specific sessions just for Councillors to aid networking and the sharing of innovative practice. For more information and to make a booking, please go to <http://www.adass.org.uk/ncasc-2014/>