

## **Community Wellbeing Board –from Cllr Izzi Seccome (Chair)**

### **Conservative Manifesto Commitments**

1. Following the General Election, a link to the Conservative Party's manifesto commitments is shown below:  
<https://www.conservatives.com/Manifesto>

### **Health and Wellbeing Systems Improvement Programme**

2. The Shared Intelligence evaluation has provided us with a state of the nation piece on HWBs and is a firm foundation for developing the programme next year. A link to "Stick with It", a review of the second year of the Health and Wellbeing Improvement Programme is shown below:  
['Stick with it'](#)
3. The final 2014/15 health and wellbeing board (HWB) chairs/vice chairs Leadership Essentials was held in February again proving to be a most valuable and well received opportunity for attendees, many whom are clinical commissioning group (CCG) representatives. I fully support the direction of the 2015/16 grant funded sector led improvement programme to engage more fully with CCG leaders in developing HWBs to reach their full potential post-election.

### **Comprehensive Spending Review**

4. In addition to the LGA's main, corporate submission on the Comprehensive Spending Review, a separate, thematic submission is being developed that will focus just on adult social care and health.
5. This thematic submission will be produced jointly between the LGA and ADASS, allowing use of the latter's most recent annual budget survey data. The submission will set out clearly what has happened to adult social care over the last Parliamentary period, and articulate the key pressures that are being felt within the care and support system currently. Again, there will be helpful evidence from the ADASS budget survey to support this.

The thematic submission will then explore the main submission's asks in more detail.

### **Future of Health and Wellbeing Boards**

6. The LGA is working in partnership with NHS Clinical Commissioners to develop a shared vision for Health and Wellbeing Boards. The document will be launched at the LGA Annual Conference on 30 June. It is a challenge and a call to action to local commissioners, government and national bodies to support health and wellbeing boards in bringing about a radical transformation in the health of their communities.

7. Our proposals for action by boards themselves and by government, and our commitment to support draw on two national consultative workshop and a summit meeting with HWB Chairs, CCG representatives and other key stakeholders, a review of the LGA's health and wellbeing improvement programme and discussions with the board of NHS Clinical Commissioners and the LGA's Community Wellbeing Board Lead Members.

If you would like to know more about this initiative, please contact [alyson.morley@local.gov.uk](mailto:alyson.morley@local.gov.uk) .

### **Inquiry into the role of health scrutiny in integration plans**

8. The LGA and Centre for Public Scrutiny (CfPS) organised three local inquiry days in Devon, South Tyneside and Wiltshire in February and March to facilitate a series of discussions on the extent to which health scrutiny could contribute to more effective integration. We are currently finalising the publication, which will be launched at the CfPS conference in June 2015.

### **Integrated Personal Commissioning Programme (IPC)**

9. In March 2015, after an extensive selection process of around 100 applications, NHS England and LGA announced the nine successful IPC demonstrator sites. They are: Barnsley, Cheshire West & Chester, Hampshire, Lincolnshire, Luton, Portsmouth, South west consortium, Stockton on Tees and Tower Hamlets. Each site has now produced a detailed action of how they will make progress during 2015/16 and beyond for the three years of the programme.
10. IPC is a partnership between NHS England, the LGA, the Association of Directors of Adult Social Services and Think Local Action Personal and a new voluntary approach to joining up health and social care for people with complex needs. It aims to shift power to people who use health and social care services to help them shape care that is effective and meaningful to them in their lives. It aims to bring health and social care together, identifying the totality of expenditure at the level of the individual, giving people more control over how this is used and enabling money to be spent in new ways to achieve the three programme goals.
11. The Programme Board overseeing the IPC is co-chaired by Ian Dodge, National Director of Commissioning Strategy for NHS England and Carolyn Downs.

### **Public Health Update**

#### **LGA called on soft drinks firms to commit to sugar reduction in popular drinks to combat obesity**

12. Last month the LGA called on drinks industry to go further and faster with reducing sugar in popular drinks. LGA research found some cans of fizzy drink contained up to

twice the recommended daily sugar limit, while some fruit juice drinks and ginger beers commonly sold in supermarkets contain more sugar than cola drinks.

[http://www.local.gov.uk/web/guest/media-releases/-/journal\\_content/56/10180/7171018/NEWS](http://www.local.gov.uk/web/guest/media-releases/-/journal_content/56/10180/7171018/NEWS)

### **Local Solutions, Healthy Lives: council's role in drug and alcohol services**

13. Last month the LGA published a new resource that describes 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 drug and alcohol services. They include councils spread across England, covering both rural and urban environments and with varying levels of deprivation and affluence.

[http://www.local.gov.uk/web/guest/publications/-/journal\\_content/56/10180/7160134/PUBLICATION](http://www.local.gov.uk/web/guest/publications/-/journal_content/56/10180/7160134/PUBLICATION)

### **Sector Led Improvement Public Health**

14. Improvement in public health practice will be founded on Sector Led Improvement principles but there is a recognition that there may be occasions where things go wrong and more focused support will be needed. LGA, Association Directors of Public Health (ADPH), Department of Health and Public Health England have developed a protocol that describes arrangements for identifying councils that may be facing performance challenges in public health in order that the sector can offer early support for improvement. [http://www.adph.org.uk/wp-content/uploads/2014/10/Managing-the-risk-of-underperformance-in-PH-FINAL\\_07-10-14.pdf](http://www.adph.org.uk/wp-content/uploads/2014/10/Managing-the-risk-of-underperformance-in-PH-FINAL_07-10-14.pdf)

### **0-5 Public Health Commissioning**

15. In March 2015 The Department of Health published the final regulations for the five mandated universal health checks delivered by health visitors. We successfully influenced the wording of the regulations to make it very clear that councils are expected to only take a reasonably practicable approach to delivering the checks and to continuous improvement over time. The regulations are also time limited and will be reviewed after 12 months, following a successful review they will expire after 18 months. Link to regulations <http://www.legislation.gov.uk/uksi/2015/921/contents/made>
16. LGA responded to the Advisory Committee on Resource Allocation (ACRA) consultation with councils on the 0-5 element of the public health grant and argued for it to urgently move towards a needs-based formula from 2016-17 because the current allocations do not relate to need but are based on existing provision.

17. In March, LGA sent out a local authority self-assessment on the state of readiness for the transfer. We received a 100% response rate from local authorities, the results showed that 97% of councils are confident that commissioning arrangements will be fully operational in their council from 1<sup>st</sup> October 2015 and that there is good joint working with NHS England to transfer these services. Whilst it showed that there are few remaining issues outstanding, it identified issues around data quality and reporting arrangements and issues relating to the move from registered to resident population that need to be addressed. Local authorities also requested examples of good practice to be shared more widely to support them to transform and embed these services. The LGA with national partners will work together to resolve outstanding issues and to develop support tools for councils.

#### **Update on Child and Adolescent Mental Health**

18. In March the Department of Health and NHS England published the Report of the Children and Young People's Mental Health Taskforce, which sets out the changes which need to take place at both local and national levels to improve the system. The CWB lead members played an active role in contributing to this work. We are very keen to work with the Department and NHS England to take forward work on children and young people's mental health as a joint endeavour and are working with them to establish next steps. We need an approach that promotes strong and accountable local leadership to ensure co-ordinated commissioning arrangements at local level which genuinely improves outcomes in children and young people's mental health.
19. The Government announced in the budget a package of funding to improve child and adolescent mental health services this included investing over £1 billion over the next 5 years to start new access standards, providing £118 million by 2018- 19 to complete the roll-out of the Children and Young People's Increasing Access to Psychological Therapies.
20. Investing £75 million over the next 5 years in maternal mental ill health services, the he Department for Education will also provide an additional £1.5 million towards piloting joint training for designated leads in Child and Adolescent Mental Health Services (CAMHS) and schools to improve access to mental health services for children and young people, including the most vulnerable. We have long called for more money to support children and young people's mental health services and we are pleased to see that there are plans to invest additional funding into these services which could improve much needed access to these vital services for thousands more young people. However, we desperately need to see the whole system properly funded and national and local partners working together to implement the recommendations from the Taskforce.

#### **An Ageing Population**

21. The LGA Task and Finish Group on Ageing, chaired by me has finalised the report. – Ageing: The Silver Lining, a report in to the challenges and opportunities of an ageing population for local government. The report is being launched on 24<sup>th</sup> June from 7pm at the House of Commons, hosted by Baroness Greengross. The report

highlights the increasing contribution an older population could make to society and the economy through empowered local government and challenges the commonly-held belief that an ageing population is a burden.

22. These findings are being fed into wider work such as improving crisis care for older people.
23. The LGA has responded to a **consultation from the Centre for Ageing Better**. We submitted a positive and collaborative response to foster close partnership working and encourage them to fund work with councils. We strongly advocated a sector-Led approach and offered LGA insight and partnership – dependent on our resources.

### **Dementia**

24. The LGA is launching a revised **guide on Dementia Friendly Communities** at the Alzheimer's Society annual conference on 9<sup>th</sup> July 2015. The guidance updates the original guidance, published by the LGA in May 2012. Shortly before the original publication, the concept of dementia friendly communities was given a boost by the launch of the Prime Ministers Challenge on Dementia. Since then, more than 70 communities have committed to become dementia-friendly and more than a million people have signed up to become Dementia Friends. At the same time there has been a rise of 17 per cent in diagnosis rates, against the backdrop of significant financial pressures on public services, including those for people with dementia. The original guidance, and the tools it contained, has been widely used and adapted both in the UK and overseas, making a significant contribution to the creation of dementia friendly communities. With the introduction of health and wellbeing boards, the return of public health duties and powers, and an increased focus on prevention and information and advice in the Care Act, new guidance was required. The guidance looks at current best practice and learning in the creation of dementia friendly communities, how it fits within the broader policy landscape, and what actions local authorities can take, and are already taking.
25. The LGA has signed up to a **declaration on post-diagnosis support for people with dementia**. The aim of the declaration is to encourage particular focus on the experiences of people diagnosed with dementia and their families immediately after diagnosis. This covers the process of diagnosis, information, advice, the roles of local professionals and services, integration and the role of voluntary services.

### **Think Local Act Personal**

26. The LGA has submitted an annual report on its contribution to the 'Think Local Act Personal' (TLAP) initiative, led by the Social Care Institute for Excellence (SCIE). The LGA is represented on the Board of TLAP by Cllr Colin Nobel from the CWB Board. TLAP have worked with the joint LGA-ADASS-DH programme to develop and produce significant guidance on meeting new duties, in areas such as; Information and advice, building community capacity, market development, workforce and inclusive communities. A key agreed priority for the Community Wellbeing Board for

2014/15 was to influence national policy and local practice in supporting personalisation. The LGA also worked with TLAP on developing a 'must know' for lead members on personalisation and Making it Real. For the forthcoming year, the LGA has committed to continuing to work with TLAP, DH and ADASS and other partners to promote the care and support reform programme, helping local government and partners implement the Care Act and to help prepare the sector for introduction of phase 2 of the Act in 2016. The LGA will continue to champion the work of TLAP to elected members through our Community Wellbeing Board and the Building Community Capacity Steering Group. This will assist members to support TLAP priorities of personalisation, coproduction and community capacity building in their local communities. An LGA Board Member will continue to attend TLAP Partnership meetings.

### **Autism**

27. The deadline for councils to return their **self-assessments** against their statutory duties under the Autism Strategy has now finished, and the data is being analysed by Public Health England. The LGA are liaising with PHE about the results of the data and possible implications for councils. The intention is to launch an LGA and ADASS-led case study publication on Autism to coincide with the release of the results of the self-assessment later in the summer.

### **Armed Forces**

28. The LGA CWB Board was represented by Cllr Andrew Gravells at the Armed Forces Community Covenant Reference Group meeting on 26<sup>th</sup> March, The MOD has undertaken a number of regional events for councils and their partners and is meeting regularly with the LGA with the intention of increasing the profile of the community covenant and the needs of the armed forces community within local government. A paper to further analyse issues for the armed forces community, and the role of the LGA, is due to be presented to the CWB Board at their October meeting.

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