

Portfolio Priorities and representation for 2015/16

Purpose of report

For discussion and decision.

Summary

This paper suggests priorities and a work programme for the Community Wellbeing Portfolio for 2015/16.

It outlines the LGA-wide priorities the Leadership Board has requested Boards/Portfolios develop and sets out priorities based on the proposals considered by members at the June Board. It also provides details of the outside bodies the portfolio has to appoint to in 2015/16.

Recommendation

Members are asked to:

1. Note the commissions from the Leadership Board;
2. Discuss and agree the Portfolio's priorities and work programme for 2015/16; and
3. Agree the list of outside bodies set out at Appendix A by Portfolio Group and make appointments to them for 2015/16.

Action

Officers to take forward as directed by members, informing outside bodies of any changes, or confirming continuation in LGA representatives.

Contact officer: Mark Norris
Position: Principal Policy Adviser
Phone no: 020 7664 3241
E-mail: mark.norris@local.gov.uk

Portfolio Priorities and representation for 2015-16

Overview

1. Members are asked to consider the policy priorities for the Portfolio's work programme for the coming year. The suggested priorities are drawn from two sources:
 - 1.1. Specific policy priorities building on the work the Community Wellbeing Board did over 2014/15 and based on the proposals considered by members at the June Board meeting; and
 - 1.2. The work that the LGA Leadership Board has asked Boards/Portfolios to undertake based on the overall policy priorities of the LGA.

CWB's work in 2014/15

2. The Board's work over 2014/15 was summarised in the Annual Review paper that was considered at the June meeting, and included work on:
 - 2.1. Influencing the 2015 Spending Review and highlighting the severe funding pressures on adult social care.
 - 2.2. Supporting implementation of the Care Act and lobbying on issues related to the legislation.
 - 2.3. The Better Care Fund and integration, including supporting areas and the pilots.
 - 2.4. Public health transformation and health protection issues such as obesity, sexual health and the sale of 'legal highs'.
 - 2.5. Funding and implementation of 0-5 public health responsibilities.
 - 2.6. Influencing and shaping the national system for health care, including developing an ambitious vision for Health and Wellbeing Boards.
 - 2.7. Child and adolescent mental health with CWB members contributing to the Children and Young People's Mental Health and Wellbeing Taskforce report.
 - 2.8. Influencing government on support for people who need health and care services such as older people and those with dementia.
 - 2.9. Sector-led improvement for health and care.

Work commissioned by the LGA Leadership from Boards/Portfolios

3. As part of the recent member-led review of governance, the LGA Executive and Leadership Board have been asked to commission work from our Policy Boards/Portfolios where a clear corporate priority has been identified or where an important policy issue straddles more than one Board/Portfolio.
4. The Leadership Board met in July 2015 and agreed the following remit for the commissioning of policy work from Boards/Portfolios on behalf of the LGA leadership:
 - 4.1. The Leadership Board's commissioning is related to the most important (current and future) issues for LGA membership.
 - 4.2. The issues commissioned cover the terms of reference of more than one Board/Portfolio.
 - 4.3. There will be no more than five corporate commissions.
 - 4.4. Boards/Portfolios will continue to set policy priorities based on their specific terms of reference. These will be reported back to the LGA Executive.
5. The following cross-cutting areas of work were agreed and are being commissioned from relevant Boards/Portfolios in 2015/16. Specific Boards/Portfolios have been asked to lead this work (and these are indicated below), with the Community Wellbeing Portfolio expected to take forward the work on promoting health and wellbeing.
 - 5.1. **Devolution and the future shape of local government**
To be led jointly by the City Regions and People and Places Boards, with any supporting evidence submitted to these Boards from other relevant Boards/Portfolios.

This work is likely to focus on supporting councils to develop and implement bespoke devolution deals within the framework provided by the Cities and Local Government Devolution Bill. The City Regions and People and Places Boards have already suggested the LGA can best add value by looking at the models and mechanisms of future governance (including work on policing and fire), and extending the evidence base for devolution deals to new service areas. The LGA will also need to work with Whitehall once the Bill is enacted to ensure that government departments do "let go". The LGA's political lobbying will be a critical factor for success, as will partnership with business and other public service bodies, such as the NHS.

5.2. **Housing**

To be led by the Economy, Environment, Housing and Transport Board, with any supporting evidence submitted to EEHT from other relevant Boards/Portfolios.

This work will focus on addressing housing need, and the clear role councils have in supporting their communities on this agenda. The introduction of the new Housing Bill will provide an opportunity for the LGA to lead the debate to ensure the wider agenda around place shaping is developed and the role issues such as skills, welfare reform, community safety and an aging population have in the delivery of our housing ambition are considered. However the Leadership Board were clear the focus needs to remain on housing, rather than on the wider debate about infrastructure in general. The work would be able to draw on new and existing work such as the cross-board work on the role of housing in supporting vulnerable adults.

5.3. **Finance**

To be led by the Resources Board, with any supporting evidence submitted to the Board from other relevant Boards/Portfolios.

This work will build on the LGA's future funding outlook and will be largely driven by the Spending Review and the decisions announced by the government around it at the end of November. This work is well-established in the organisation and it will be an important continuing priority.

5.4. **Promoting health and wellbeing**

This is the work the Community Wellbeing Portfolio is expected to lead, with input from other relevant boards and potential wider contributions from think-tanks and other parts of the public sector including the NHS and Public Health England.

The Leadership Board suggested that this work look at the integration of the health and care system, and the wider role other local services such as schools, children's services, the fire service, public health, housing, transport and leisure can play in promoting wellbeing across the life course, as well as keeping people physically and mentally healthy, in work, and in their own homes. It should also look to raise the profile of social care as an equal to the NHS, and build a business case for council-led investment as part of a much wider integrated approach to improve health outcomes and address health inequalities, as well as keep pressure off the NHS and other expensive services. Additionally it was suggested this work should consider the role of citizens and communities in supporting themselves and each other and promoting resilience and independence.

Taking forward cross-cutting work on promoting health and wellbeing

6. All the lead Boards/Portfolios have been asked to detail the scope of the Leadership Board's request at their first meeting and to report back to the LGA Executive. The greatest opportunity over the longer term for maximising citizens' health and wellbeing, as well as reducing the financial pressures on the health and care systems, is through addressing the factors and behaviour that determine how much health and care support individuals need, especially as they age. It is therefore suggested that the cross-cutting work the Community Wellbeing Portfolio has been asked by the Leadership Board to lead, focuses on the prevention of poor health and wellbeing outcomes for people. It would look across the life-course, and seek to draw in contributions from the other Boards to capture the full range of local government services that contribute to people's health and wellbeing including housing, leisure and culture, and skills and employment – for example in maximising the health of employees and understanding the importance of pathways into work for people with long term conditions and health problems. It would also seek to identify partner bodies and stakeholders (and any levers they have) that local government and the LGA engages with in other spheres who, knowingly or not, have an impact on health and wellbeing.
7. Within this package of work we would look to map the contributions made by different services and agencies to health and wellbeing; better understand the cost benefits and economic case for investing in prevention programmes; educate different sectors about what local government is trying to achieve, how they can help and highlight the benefits of doing so – for example the impact on the NHS; and examine what more councils and other key stakeholders can do to encourage the public to take a greater role by living well and providing self-care. This would involve a mixture of policy, campaigning and improvement related work.
8. The expectation is for all the cross-cutting projects identified by the Leadership Board to be drawn on to inform work launched at next year's annual conference, setting out a more forward-looking vision for the future of local public services and their relationship with communities. With this timeframe it is proposed that this cross-cutting work is conducted as part of the four broad themes identified below for the Portfolio's own priorities.

Contributions to the other cross-cutting projects

9. As well as its own cross-cutting work the Portfolio will wish to contribute to the other cross-cutting projects:
 - 9.1. Housing – promote the contribution of housing to the integration agenda, especially links to social care (for example around dementia) and the role of councils in helping people to remain living in their own homes. This work can draw on the Housing work undertaken by the Community Wellbeing Board with others last year.

- 9.2. Finance – the LGA’s spending review submission included a thematic paper covering adult social care, health and wellbeing and the portfolio will continue to contribute to the LGA’s work on the funding for councils.
- 9.3. Devolution – the portfolio is already working with the devolution team and with other key stakeholders such as NHS England, the Department of Health, ADASS and the NHS Confederation to support areas in developing proposals for health devolution. With around half of the devolution deal bids submitted to DCLG including proposals around health and care, this will also be an ongoing area of work for the portfolio.

The other lead Boards are meeting at about the same time or after the Portfolio Away Day, so as the other cross-cutting commissions are developed we will seek contributions from the Portfolio to this work.

Community Wellbeing priorities in 2015/16

10. Drawing on the Board’s work in 2014/15 and the discussion on priorities in June, as well as the cross-cutting work identified by the Leadership Board this paper suggests four key overarching themes. Members’ views are sought on whether these capture the right priorities to make a difference to our member authorities and ensure we are well positioned to influence government thinking on key health and wellbeing issues. Although these priorities can be delivered in available resources, adding substantially to them will impact both on the ability to deliver all the projects and also to respond effectively to any issues that arise throughout the year.
11. The proposed priorities include:
 - 11.1. **Future vision for health and care systems**
 - 11.1.1. Lead the debate on the future of health and care by continuing to support social care and health integration and lobbying for closing the funding gap in adult social care, investment in a transformation fund for prevention and the expansion and improvement of the Better Care Fund.
 - 11.1.2. Develop and promote a clear vision for the local authority role in health and social care, with health and wellbeing boards leading a place based approach to health and social care commissioning.
 - 11.1.3. Develop an offer to support areas negotiating for the devolution of health resources and decision making.
 - 11.1.4. Develop and deliver a programme on the key challenges for local leaders in care and health and work with the grant funded Care and Health Improvement Programme (CHIP) to support sector led improvement, including, for example, work on quality, safety and dignity; developing an integrated workforce, managing risk, Transforming Care, and implementation of the Mental Capacity Act.
 - 11.1.5. Work with providers and commissioners of independent health complaints advocacy and local Healthwatch, to assess the need for further good practice support on complaints services.

11.2. Funding for social care and support

- 11.2.1. Support councils on implementing the Care Act Phase 1 through work on costs and eligibility, and continue to engage with the government about the future implementation of the Phase 2 reforms.
- 11.2.2. Support the LGA's work on the Budget and Spending Review, including setting up a joint working group to create a common understanding of the future challenges in both adult and children's care.
- 11.2.3. Consider a new state of the nation publication, continue work on winter pressures and Deprivation of Liberty Safeguards, and explore the impact of the Government's commitment to implement the Living Wage on adult social care commissioners and providers.
- 11.2.4. Understand the pressures on, and the sustainability of, the provider market and the risk of failure of care home providers.
- 11.2.5. Continue to co-sponsor the Integrated Personal Commissioning Programme with NHS England and offer support to demonstrator sites, encourage the alignment of IPC with other national programmes on integration, and to consider how to disseminate key messages on integration to all areas.

11.3. The role of councils and place-based leadership in promoting health and wellbeing

- 11.3.1. Take forward the proposals related to prevention set out earlier in the paper around the Leadership Board's commission to the Portfolio.
- 11.3.2. Continue to make the case for increased investment in public health, and disseminate and showcase knowledge and best practice including delivering a whole systems and whole age approach to tackling obesity and the impact of alcohol misuse on health, health services and employment.
- 11.3.3. Embed public health across councils' policies and work.
- 11.3.4. Ensure that systems and processes are in place to support public health to deal with extreme events and health protection emergencies.
- 11.3.5. Support councils to make the most of new 0 - 5 public health commissioning responsibilities and to engage with work to improve CAMHS.

11.4. Vulnerable people and older people

- 11.4.1. Develop policy proposals which assist councils in:
 - improving dementia and across age mental health services and support;
 - develop integrated approaches to meeting the housing, health and care needs of vulnerable adults;
 - implementing the Armed Forces Community Covenant;
 - providing better support to those with autism and learning difficulties;
 - driving innovation which tackles and challenges and exploits the opportunities posed by an ageing population;
 - supporting the embedding of the Think Local Act Personal (TLAP) partnership priorities of personalisation, coproduction and community capacity building; and

- as and when appropriate addressing ordinary residence issues in access to housing and also for looked after children who are placed out of area and their access to health checks.

It is suggested that the Policy Groups proposed in the governance paper elsewhere on the agenda reflect these four themes.

12. Members also identified a number of strands of joint work with the Children and Young People's Board. These include supporting councils to take a place-based approach to children and young people's health issues, including childhood obesity and child and adolescent mental health services, and identifying how best to develop approaches in both children's and adult services for people with learning disabilities that are both efficient and provide better outcomes for individuals.
13. The portfolio will also continue to provide input to, and receive reports from, a number of elements of the Department of Health funded CHIP including:
 - 13.1. Health and Wellbeing Systems Leadership;
 - 13.2. Towards Excellence in Adult Social Care;
 - 13.3. Winterbourne View Joint Improvement Programme; and
 - 13.4. Care and Reform Support joint programme office.

Communications and events

14. A number of internal and external communications channels are available to help the Community Wellbeing Portfolio promote the work it is doing and to seek views from member authorities. Some of these are detailed in the paper on the governance for the Portfolio in 2015/16.
15. In addition to these there is a full programme of conferences and events which can support the delivery of the proposed priorities, and are designed to support members and officers around a range of health and wellbeing issues. Conferences already being planned include:
 - 15.1. 14-16 October 2015: National Children and Adult Services Conference
 - 15.2. 3 February 2016: Public Health Conference

16. We also have a dedicated section on the LGA website, regular e-bulletins, outside speaking engagements and interviews, features and news items in First magazine, as well as twitter accounts which are used to keep in touch with our members.

Outside Bodies

17. The LGA currently benefits from a wide network of member representatives on outside bodies across all its Boards. These appointments are reviewed on an annual basis across the organisation to ensure that the aims and objectives of the outside bodies remain pertinent to the LGA.

18. The organisations to which the Board currently appoints member representatives are listed by proposed Portfolio Group (more detail is provided on these in the paper on the agenda on the portfolio's governance). In order to establish a pool of interested councillors from across the political groups Lead Members propose that members self-nominate themselves for a Portfolio Group of interest as well as outside bodies they are interested in representing the LGA on.
19. To maximise the value of members attending regular or ad-hoc outside engagements it is proposed that members continue to provide updates to the rest of the portfolio, which will be included in a quarterly report circulated to all members of the portfolio.
20. Reasonable travel and subsistence costs will be paid by the LGA for expenses incurred by a member appointee, whilst carrying out a representative role on an outside body or attending an ad-hoc meeting on behalf of the LGA.

Next steps

21. Members are asked to:
 - 21.1. Note the commissions from the Leadership Board;
 - 21.2. Discuss and agree the Portfolio's priorities and work programme for 2015/16; and
 - 21.3. Agree the list of outside bodies and overarching priority themes set out at Appendix A and make appointments to them for 2015/16.

Financial implications

22. This programme of work can be delivered in existing resources but any additional priorities will impact both on the ability to deliver all the projects and also to respond effectively to any issues that arise throughout the year.

Appendix A: Portfolio Groups and associated outside bodies

1. The future vision for health and care systems
Member: Member: Member: Member: Member: Member: Portfolio holder (Lead Member):
Supporting LGA Officers: Alyson Morley, Emma Jenkins, Andrew Webster
Related Outside Bodies:
Public Health System Group & Stakeholder Forum Chair - 4/y Planning for care roundtable DH Care and Support Transformation Group Ministerial regular integrated care meetings - Pioneers
2. The funding and support for adult social care
Member: Member: Member: Member: Member: Member: Portfolio holder (Lead Member):
Related Outside Bodies:
Supporting LGA Officers: Matt Hibberd, Emma Jenkins
3. The role of councils in promoting health and wellbeing
Member: Member: Member: Member: Member: Member: Portfolio holder (Lead Member):

Related Outside Bodies:		
Tuberculosis Oversight Group	Vacant/Paul Ogden	4/y
Obesity Review Board		Jan and June
Ministerial Obesity Roundtables -		
Public Health Responsibility Deal Network Meetings	Various	
Sexual Health Forum	/Paul Ogden attend	
CAMHS Task Force		
Supporting LGA Officers: Paul Ogden		
4. Vulnerable people and older people		
Member:		
Member:		
Member:		
Member:		
Member:		
Member:		
Portfolio holder (Lead Member):		
Related Outside Bodies:		
Dementia Action Alliance Quarterly Meetings		4/year
Mental Health System Board		
Ministerial advisory group on mental health		3 / year
Ministerial Learning Disability Programme Board		
Disability Action Alliance		
Ministerial Autism Programme Board		
PM's Dementia Friendly Communities Champion Group Cllr		
Dignity in care working group -		2 / year
Supporting LGA Officers: Abigail Gallop, Kevin Halden		