Promoting Health and Wellbeing

**Purpose**

For noting and discussion.

**Summary**

This report sets out how the Community Wellbeing Portfolio will take forward the cross-cutting work it is leading on promoting health and wellbeing.

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| **Recommendation**  That the Leadership Board notes the work programme agreed by the Community Wellbeing Portfolio for its cross-cutting work on promoting health and wellbeing.  **Action**  Officers to progress as directed by Members. |

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**Promoting Health and Wellbeing**

**Background**

1. At its meeting in July, the Leadership Board agreed four cross-cutting areas of work for relevant Boards to lead in 2015-16. The Community Wellbeing Portfolio was commissioned to lead work on promoting health and wellbeing, with contributions from other Boards and other parts of the public sector.
2. The key issues identified for this cross-cutting work included the further integration of health and care systems, and building the business case for council-led investment to keep the pressure off the NHS and more acute care. They also included examining the role other local services such as schools, children’s services, the fire service, public health, housing, transport, and leisure can play in promoting wellbeing and keeping people physically and mentally healthy during their life time, thereby reducing demand for health and care services.

**Community Wellbeing cross-cutting work and priorities**

1. The Community Wellbeing Portfolio considered this cross-cutting work alongside the priorities it had identified over the summer at its Away Day at the start of October. It agreed four overarching themes to cover them: the future vision for health and care systems; funding for social care and support; the role of councils and place-based leadership in promoting health and wellbeing; and vulnerable people and older people.

Future vision for health and social care

1. The Portfolio agreed that it will look to lead the national debate on the future of health and care, and that as part of this work it would develop and promote a clear vision of the local authority role in the health and care systems. The integration of health and care will be at the centre of this work, with the case being made for the expansion and improvement of the Better Care Fund. Members also wanted to see health and wellbeing boards leading a place based approach to both health and social care commissioning as part of this closer integration. Councils will be supported on this agenda through an offer to support negotiations around the devolution of health resources and through the grant funded Care and Health Improvement Programme (CHIP).

Funding for social care and support

1. With the funding shortfall for adult social care growing by £700 million a year the Portfolio agreed lobbying around the closing of this gap was vital. Within this wider work members discussed looking specifically at the impact of winter pressures, Deprivation of Liberty Safeguards and the implementation of the Living Wage would have on adult social care budgets and the sustainability of the provider market, while supporting councils with implementation of Phase 1 of the Care Act. The Portfolio also saw this work as contributing to the LGA’s work on the Spending Review, and would be supported by the setting up of a joint working group to create a common understanding of the future challenges in both adult and children’s care.

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

1. Portfolio members felt the greatest opportunity over the longer term for maximising citizens’ health and wellbeing, while reducing the financial pressures on the health and social care systems, was by addressing the factors and behaviours that determine how much support people need, especially as they age. The Portfolio therefore agreed that a significant part of its work will focus on the prevention of poor health and wellbeing outcomes for people, and in making the case for increased investment in public health.
2. The work in this area will 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. Members also agreed this work will 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.
3. Within this package of work the Portfolio agreed to:
   1. map the contributions made by different services and agencies to health and wellbeing;
   2. better understand the cost benefits and economic case for investing in prevention programmes;
   3. 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
   4. 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 will involve a mixture of policy, campaigning and improvement related work.

Vulnerable People and Older People

1. At the Away Day the portfolio members heard from a service user about the impact personalisation of budgets and the co-production of services could have in improving care. Members therefore agreed to assist councils in supporting carers, improving dementia and mental health services, tackling the challenges and exploiting the opportunities of an aging population, and better supporting those with autism and learning difficulties. The Portfolio also agreed to continue it work with councils around the Armed Forces Community Covenant.

**New ways of working**

1. As well as discussing its priorities and work programme the Portfolio also considered how it would work over the year head. Members agreed that there would be nominations by the groups to key areas of work grouped under the four overarching themes. There was an extensive discussion about how the Portfolio could better connect with member authorities and councillors. These discussions covered making better use of the range of electronic communications available including the use of social media, but members also supported building stronger links with regional networks and agreed to appoint ambassadors to do so. In addition there was agreement that the Portfolio should seek the views of lead members in councils on how best the portfolio could involve them in its work and communicate with them, and this will be discussed with member authorities at the first of the portfolio forums, which is being held on Thursday 15 October at the National Children’s and Adults Services Conference in Bournemouth.

**Financial Implications**

1. The work described will be undertaken within existing resources.