

COUNTY COUNCIL MEETING – 6 JULY 2011

POSITION STATEMENT BY THE LEAD MEMBER FOR HEALTH

National Announcements: Health and Social Care Bill

- The Listening Exercise, which resulted in a pause in the passage of the Health and Social Care Bill, has now concluded. The Leicestershire Shadow Health and Wellbeing Board submitted a response to the Listening Exercise which can be found on the County Council's website. The full findings from the Listening Exercise were published on 13 June by the NHS Future Forum who led the consultation.
- This was followed by the Government's response, and a detailed transition letter from the Chief Executive of the NHS Sir David Nicholson on 20 June, which gave more details about the implications for policy and legislation. This led to a series of proposed amendments to the Bill being published on 27 June.
- The timetable for the reforms has essentially been affected by a number of factors.
 - The elapsed time caused by the pause
 - The time required to redraft legislation and produce additional guidance
 - The need to address concerns about the overall pace and risks within the original reform timescale
- As a result some milestones are now delayed, with others having a longer phase-in time to full adoption

Assessing Local Implications

- On 23 June, the Leicestershire Shadow Health and Wellbeing Board met for a second time, and received a briefing on the NHS Future Forum report and the Government's response. Key points as follows:
 - GP Consortia are to be renamed Clinical Commissioning Groups, with wider clinical representation on their Boards. They will be required to have 2 lay members and to meet in public. There will be a phased approach to implementing Clinical Commissioning Groups. For those that are not ready/authorised by April 2013, the NHS Commissioning Board will support them

- deliver their commissioning responsibilities, until they can assume their full delegated duties.
 - The role of Health and Wellbeing Boards is endorsed and strengthened with more emphasis on the authorisation of Clinical Commissioning Groups, a new duty on patient and public engagement, and a clearer policy drive on joint commissioning and integration between the NHS, Public Health and LAs.
 - Strategic Health Authorities (SHAs) to remain until April 2013. Standardised operating models to be issued for PCT Clusters (50 organisations nationally) and SHAs (4 organisations nationally).
 - HealthWatch England and Local Healthwatch – new implementation date – October 2012
 - Public Health England to be an executive agency (e.g. external to Dept of Health)
 - 2014 remains the target for achieving Foundation Trust status for the majority of NHS provider organisations, with a small number having target dates individually agreed beyond April 2014.
- Nevertheless the Government's response highlights a complex set of responsibilities in the new NHS. This needs to be worked through and Leicestershire's good reputation with the Department of Health puts us in a good place to work at both the national and local levels on mapping exercises, which should be welcomed by patients and the public, as much as professionals.
 - The Leicestershire Shadow Health and Wellbeing Board commented that the local approach to developing Clinical Commissioning Groups (GP consortia) has been broadly inclusive to date, so the proposed changes to their composition will represent minimal impact. Also the good progress already made on Health and Wellbeing Board implementation locally means we are positive about the additional responsibilities suggested and can maintain our momentum.

Implications for HealthWatch

- We are awaiting the outcome of our pathfinder application, with a decision expected from the Department of Health at the end of July. In the meantime, preparatory work continues at pace with Leicestershire LINK. Although the implementation date for HealthWatch has been delayed until October 2012, there is a significant amount of work to cover in order to commission the new HealthWatch service effectively from 2012, hence every effort is being taken to prepare early and effectively.

Priorities for the Shadow Health and Wellbeing Board

- At their June meeting the Leicestershire Shadow Health and Wellbeing Board agreed 8 priorities based on existing JSNA evidence and current strategic priorities such as those in the Staying Healthy Leicestershire Together Strategy. These 8 will form the initial focus and workplan of the Board and are:
 - i. Increasing life expectancy and reducing inequalities
 - ii. Reducing the prevalence of smoking
 - iii. Reducing the harm caused by alcohol and drugs
 - iv. Reducing the prevalence of obesity and physical inactivity
 - v. Improving the care of older people with complex needs and enabling more older people to live independently
 - vi. Improving the care of adults and children with complex needs and their carers, including those with:
 - Mental health needs
 - Complex disability needs
 - vii. Shifting investment to prevention and early intervention
 - viii. Making urgent care systems for adults and children work