



Belfast City Council

Report to:	Strategic Policy and Resources Committee
Subject:	Future Partnership Working with the new Health Structures
Date:	23rd January 2009
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1. Relevant Background Information

Belfast City Council's overall purpose is to improve quality of life now and for future generations. One of the greatest quality of life issues in the city is health and wellbeing in that there continues to be a significant difference between the health and life expectancy of those living in deprived areas and those living in more affluent areas. This 'health gap' and indeed the general health of the population in the City is worse than many other UK Cities. It is not something which can be addressed by the Health Service alone as its causes relate to many other social, economic and environmental factors such as employment, education, housing, social inclusion, safe, clean and attractive neighbourhoods, access to leisure and recreation etc, as well as people's lifestyles.

The City Council has a key role to play in leading the City to address these issues and has included the development of a healthier City as one of its key priorities under the **Supporting People and Communities** theme of the corporate Plan. Its role can be divided into three aspects:

- Service delivery;
- Civic leadership; and
- Advocacy.

In terms of delivery, the Council currently provides a wide range of services within communities which impact or have the capacity to impact on people's health and wellbeing. These include leisure services, community services, environmental health, good relations, community safety, city development, parks and open spaces, services for children and young people and older people, economic development, regeneration, culture and arts, etc.

In terms of civic leadership, the Council has the democratic legitimacy to play a role in ensuring that health improvement is addressed in a co-ordinated way across the City by the many service providers involved. There is currently a significant opportunity for the Council to make an even greater contribution in this regard with the prospect of community planning under RPA and with the current reorganisation of health and social care structures in Northern Ireland. The new health structures will also see a greater role for local government through participation in the new Regional Agency for Public Health and Social Wellbeing (RAPHSW) and in local commissioning. For example, four

local elected representatives will sit on the Belfast Local Commissioning Group for health from April 2009, making decisions about budgets, contracts and service finance. It is also planned that at a local level, the new RAPHSW will work in a joint team with local Councils and there is currently a proposal for Belfast to pilot such an initiative during the next financial year along with a number of other Councils.

The Council also has an increasing role in liaising with Government in relation to the health and wellbeing of communities. This role can involve giving advice, lobbying in relation to policy and responding to consultations. Recent examples have included debates on suicide, alcohol abuse, poverty etc. It is essential that the Council develops its capacity in order to deliver effectively in its new and developing role. It is also likely that the Council's role in relation to health and wellbeing will be enhanced through the new power of wellbeing which is planned during the implementation of RPA.

Key Issues

The Minister for Health has now written to the Chief Executives of District Councils, inviting expressions of interest from those Councils that might wish to host an Agency/Council joint working pilot during 2009/2010 (letter and short paper attached in Appendix 1).

The Minister has stated that local government has a major role to play in improving public health and reducing health inequalities and is proposing that a number of pilot arrangements should be put in place to test out joint working between local government, the Regional Agency for Public Health and Social Wellbeing and Local Commissioning. Early proposals suggest co-locating health and social care staff with local government staff to support local government in taking forward their future power of wellbeing and community planning role and in leadership of local inter-sectoral partnerships. The staff would also assist in developing local health improvement plans, programmes and projects to reflect local community need and would also support the Local Commissioning Group in developing commissioning plans which not only deal with health service provision but also measures to prevent ill health. These arrangements would be developed further and extended post 2011.

Should the Committee agree to host such a pilot it will be necessary to ensure that that Members are involved from the outset and that they are provided with the necessary information on a regular basis to aid decision making and policy development. A further report will be brought back at a later date to gain agreement on how this should be done.

Resource Implications

Financial

The proposed formation of a co-located joint team will be jointly resourced. Any resources required from Belfast City Council during the pilot will be resourced from within existing budgets through the re-alignment of existing posts.

Human Resources

Officers time and commitment

Recommendations

It is recommended that the Committee agrees to the Chief Executive lodging an expression of interest with the Chief Medical Officer to host a pilot joint local health and wellbeing team co-sponsored by the Regional Agency for Public Health and Social Wellbeing and the Council, starting in 2009/2010.

Abbreviations

RPA - Review of Public Administration

RAPHSW – Regional Agency for Public Health and Social Wellbeing

Documents Attached

App 1: Letter and short Paper from the Minister, DHSSPS

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