Sector-led improvement for public health, prevention and early intervention

Prospectus
2018/19
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreword</td>
<td>4</td>
</tr>
<tr>
<td>Introduction</td>
<td>5</td>
</tr>
<tr>
<td>Improvement support available from the LGA</td>
<td>7</td>
</tr>
<tr>
<td>Improvement support from partners</td>
<td>11</td>
</tr>
<tr>
<td>Appendix a) managing the risk of significant underperformance</td>
<td>13</td>
</tr>
<tr>
<td>Appendix b) useful contact details</td>
<td>14</td>
</tr>
</tbody>
</table>
Foreword

In the last four years great strides have been made to tackle the wider social and economic determinants of poor health, making the most of the opportunity of having public health functions embedded in local government. We hugely admire the way directors of public health and their teams, with the support of councillors and chief executives, remain full of commitment and inventiveness, despite the financial barriers they face.

We know that good public health, drawing imaginatively on all of local government’s functions, can make a real difference to promoting the independence of people with long-term chronic conditions, preventing ill health, improving health and wellbeing and tackling health inequalities.

Good practice from individual councils shows just what potential there is for public health interventions to make inroads into improving health and wellbeing. Public health teams, working across councils, are tackling persistent problems like adult and childhood obesity, mental illness, substance misuse, sexually transmitted infections and the health impact of isolation and loneliness in old age, as well as addressing some of the serious health inequalities that still exist within and between communities.

One of the modern challenges to public services is to be able to demonstrate that investment and action are improving people’s lives. The LGA has a range of practical support available, on a free of charge and/or subsidised basis, to enable local authorities to exploit the opportunities that this approach to improvement provides.

There is now a real momentum around sector-led improvement. Councils support the approach, value the tools and support provided and report this has a positive impact on their delivery.

Councillor Izzi Seccombe
Chair of the LGA Community Wellbeing Board

Richard Gleave
Deputy Chief Executive, Public Health England

Dr Andrew Furber
President of the Association of Directors of Public Health
Introduction

It is important to have in place the most effective arrangements to help local authorities across the country continuously improve outcomes and deliver value for money.

Local government has a track record of working with other bodies: public sector, voluntary sector and the business community to help to transform the lives of their residents and communities for the better.

Sector-led improvement (SLI) is the approach to improvement put in place by local authorities and the Local Government Association (LGA).

The overarching approach for SLI is set out in ‘Sector led improvement in local government’, published by the LGA with the Association of Directors of Adult Social Services (ADASS), the Association of Directors of Children’s Services (ADCS) and the Society of Local Authority Chief Executives (SOLACE).¹

The following principles underpin the approach to sector-led improvement in local government:

- councils are responsible for their own performance and improvement and for leading the delivery of improved outcomes for local people in their area
- councils are primarily accountable to local communities (not government or the inspectorates) and stronger accountability through increased transparency helps local people drive further improvement
- councils have a collective responsibility for the performance of the sector as a whole (evidenced by sharing best practice, offering member and officer peers, etc).

Sector led improvement is effective and continues to have high levels of support from the sector. These principles have informed the LGA’s corporate support offer and the approach in children’s and adult’s social care.

The LGA is working with partners at Public Health England (PHE) and the Association for Directors of Public Health (ADPH) to deliver sector-led improvement activity in 2017/18 for public health, prevention and early intervention through the Care and Health Improvement Programme (CHIP) funded by the Department of Health (DH).

The LGA

The LGA’s support offer is based on what we have learnt works for improvement: strong political and managerial leadership, challenge from one’s peers, the ability to benchmark performance with others and the sharing of good practice.

In addition, the LGA maintains an overview of the performance of the sector in order to identify potential performance challenges and opportunities – and to offer support on a proactive basis.

PHE

PHE is the expert national public health agency that fulfils the Secretary of State’s statutory duty to protect health and address inequalities, and executes his power to promote the health and wellbeing of the nation. It does this through world-class science, advocacy, partnerships, knowledge and intelligence, and the delivery of specialist public health services. It has a role in enabling local public health systems, especially local authorities as the leaders of the local systems, to have the capability and capacity to improve and to tackle the challenges to the public’s health including development of the wider public health workforce.

Association of Directors of Public Health (ADPH)

The ADPH regional networks are a key mechanism for delivering sector-led improvement in public health. Each network is expected to deliver their local developed SLI plan and report to the ADPH SLI Programme Board.

This prospectus

This prospectus sets out:

• the programme of sector-led improvement support available through the LGA and partners
• signposting to other support and resources available
• the early support arrangements for local authorities with performance challenges in public health.
Improvement support available from the LGA

Leadership support

Leadership Essentials
10–11 July or 9–10 October 2018
Warwick Conference Centre, Coventry

If you have a leading political or clinical role in a health and care system these free two day residential sessions are an opportunity to reflect on the leadership challenges of these roles, away from the day job, and to share experiences and actively learn from each other.

Using the LGA’s tried and tested approach to leadership development, the programme will be led by LGA peers and national partners and focus on a range of current and crucial issues.

To book a place email grace.collins@local.gov.uk

Prevention Matters
One-day workshops for elected members providing an overview on the determinants of health, health inequalities, the three types of prevention and the roles of the council and elected members in improving health outcomes.

We have designed a facilitated workshop with content aimed at elected members from all types of councils and in any role. We will run the session with a facilitator free of charge. The participating council/s will need to source a venue.

The session can be tailored to your area’s requirements and can be for whole councils, regional groupings, district councils or joint sessions across more than one local authority area.

In summary sessions cover:
• understanding health and wellbeing locally and nationally
• an overview of national policy drivers including the changes from the Health and Social Care Act 2012 and the NHS Five Year Forward View
• the role and impact that elected members can have on health and wellbeing in your communities
• an exploration of health inequalities
• the financial impact of investment in prevention
• influencing and planning – health and wellbeing boards (HWBs), Joint Strategic Needs Assessments and health and wellbeing strategies
• an exploration of your own ward profiles of health indicators.

There are no fixed dates for the sessions. The sessions are open to all councillors and not just HWB members or portfolio leads.

Once you have expressed an interest with us to undertake a workshop we will work with you to secure a date that suits your elected members.

Health in all policies support

Health in all Policies (HiaP) is an international initiative initiated by the World Health Organisation (WHO) to encourage the embedding of health improvement into policy decision making.

The LGA has recently created a manual to adapt this approach specifically to local councils in England and then worked with PHE and ADPH to produce a self-assessment to support areas with embedding HiaP into their policy and decision making.

The one day facilitated self-assessment offer will bring a peer team to your area to offer challenges when working through the self-assessment and support action planning in areas requiring development to progress.

We would meet with you in the first instance to understand the context for the work and plan for the self-assessment survey and workshop.
System-wide care and health peer challenge

As the health and care system has become more joined up and the policy landscape is changing, the LGA has developed a new single care and health peer challenge following consultation with national partners and sector stakeholders.

A peer challenge is a proven improvement tool. During 2016/17 the LGA delivered 125 peer challenges of a corporate, finance and subject specific nature.

This is the first time a peer challenge process has looked so widely across the health and care landscape in order to enable locally driven improvement.

The aim of the peer challenge is to support:

• local place based leadership with their particular priorities, approaches and geographies
• progress on locally identified system challenges and opportunities
• relationships across organisations and the local system, including HWBs
• sharing and application of innovative practice.

So what happens during a peer challenge?
The peer challenge involves an initial scoping and diagnostic to determine the focus of the peer challenge process and/or whether another form of support would be more appropriate. The peer challenge has the following features:

• three days onsite (interviews, focus groups and visits)
• peer challenge team composition to reflect the areas of focus and the particular requirements of the place
• the peer team is led by an experienced system leader.

At the end of the three days the peer team provide a constructive but challenging feedback session to local leaders and stakeholders.

Contact your regional principal adviser to discuss how a peer challenge might suit, and be tailored, for your support needs.

Prevention at scale support

The LGA, ADPH, PHE are working jointly to design support for areas to deliver prevention and early intervention activities at a larger scale.

This offer will launch in September 2017 and will initially help areas focus on one particular outcome or service that could be at a larger scale, offering robust challenge to plans, a clear logic model for service redesign, and free access to a range of expertise to support implementing the plans.

To find out more about how this offer is developing please contact us.

Design in the Public Sector

Delivered in a partnership between the LGA and the Design Council, the Design in Public Sector programme equips councils with design skills and techniques to apply to their service challenges.

If your organisation has a public health or prevention service challenge requiring some fresh thinking or a different approach, this could be your opportunity to receive training and support through this proven, innovative development programme.

Key design principles, methods and tools such as understanding users’ needs, prototyping, visual techniques and working collaboratively can all be applied to service, system and digital challenges in the public sector to great effect.
To date, more than 57 project teams in eight regions have benefited from this innovative new training programme.

To see how other councils have used this programme to help them tackle some of the most pressing issues currently faced by public services please visit www.local.gov.uk/our-support/efficiency-and-income-generation/design-public-sector.

To register your interest in being on the programme please contact rhian.gladman@local.gov.uk.

Bespoke support

We are able to provide completely tailored support if your area has a specific issue around public health, prevention and early intervention that is not suited to the previous activities on offer. We would work with the senior leadership team in an area to scope what type of support is needed. A few examples of previous support initiatives included:

• workshops with senior teams and elected members
• coaching and mentoring
• support and challenge for improving outcomes and performance.

We use experienced peers and expert associates to design and deliver our support.

Please contact your regional principal adviser for discussion.

LG Inform and LG Inform Plus

LG Inform is the LGA’s free and interactive online reporting and comparison tool based on council areas. There are a range of LGA reports available on the tool that cut across health, wellbeing and social care themes.

LG Inform Plus is a subscription service focusing on small area data and bespoke neighbourhoods. It supports comparative analysis within local areas. www.lginform.local.gov.uk

Regional support

The LGA will offer support to the ADPH regions in developing capacity for locally led peer-to-peer support for public health services. This can include peer training and support with designing methodologies to use in a peer support process.

Integration

Local leaders across the country are already bringing together services and doing things differently in order to achieve improved outcomes for local citizens. As well as the leadership offers listed previously, we provide information on a range of issues including local authority engagement in sustainability and transformation plans (STPs); Better Care Fund support, a resource library, and transformation through the use of information and technology.

More information on our ongoing work both to support local authorities and their partners, and our work to influence central government is available at www.local.gov.uk/topics/social-care-health-and-integration.
Efficiency and sustainability

The LGA works with councils, NHS England, Better Care support, and other national and local partners to improve the efficiency and sustainability of health and care systems. The care and health efficiency programme works with groups of councils and partners to develop new, innovative and sustainable approaches that can be shared for the benefit of the wider sector. Recent work has focused on reducing delayed transfers of care, efficiency opportunities through integration, commissioning better public health services and learning disability services efficiency, among others. For information visit www.local.gov.uk/our-support/efficiency-and-income-generation/care-and-health-efficiency

Case studies and good practice

The LGA regularly commissions topical case studies to showcase good practice and share learning. You can browse through the case studies at www.local.gov.uk/case-studies?topic[2506]=2506

A comprehensive list of the LGA’s publications featuring best practice, briefings, guidance and more available here www.local.gov.uk/publications

Accessing support

Principal advisers are the key point of contact for the LGA who are based regionally and are able to signpost and discuss our support with you. You can find their contact details in Appendix B.

Care and Health Improvement Advisers (CHIAs) support the principal advisers with specific health and care issues.

Health and wellbeing system improvement bulletin

The LGA provides a monthly e-bulletin which contains insight into national policy development, links to new tools and useful information from partner organisations as well as information on our programme’s support offer and upcoming events.

You can sign on our website.
 www.local.gov.uk/about/news/e-bulletins
Improvement support available from partners

Public Health England

PHE has a key role supporting councils in the delivery of their local priorities. Practical help is available via PHE’s centres who can provide local professional advice and support, drawing on national expertise when needed, as well as from their local knowledge and intelligence service, field epidemiology teams and their national centre for radiation, chemicals and environmental hazards.

PHE will provide, in collaboration with key partners, a responsive service to meet the needs of local authorities and clinical commissioning groups (CCGs), through directors of public health (DsPH). They can provide:

- expertise to support local health surveillance, needs assessment, benchmarking and outcome assessments
- evidence of what works, emerging practice from across the country and expertise evaluating impact
- access to a wide range of profiles, atlases and tools.

PHE online tools include:

- health profiles
- local health (neighbourhood) profiles
- public health outcomes framework data tool
- NHS Atlas of healthcare variation
- Strategic Health Asset Planning and Evaluation tool (SHAPE)
- decision support tool
- spend and outcomes tool (SPOT)
- return on investment tools
- general practice profiles
- cancer commissioning toolkit
- obesity fingertips tool
- mental health fingertips tools
- local alcohol profiles
- diabetes outcomes versus expenditure (DOVE) tool
- child health profiles
- kidney disease CCG profiles.


ADPH

ADPH’s role in sector-led Improvement is to strengthen the networks and support their local SLI programmes to maximise the improvement in outcomes and performance. Our specific objectives revolve around the following activities:

Providing leadership

ADPH SLI Programme Board provides a national focus and leadership for SLI in public health by offering support to the regional work and setting standards and expectations. This includes development of the public health SLI framework as well as a set of templates for periodic reporting to ensure consistency across networks. We also develop tools to be shared nationally and currently we are working on a self-audit tool to provide networks with challenge and benchmarking. Introduction to SLI is already an integral part of the new ADPH member induction process and our ambition is to ensure all key stakeholders understand the role and importance of SLI.
Providing structures
We believe that learning and development is best facilitated through a strong network of specialists who can share knowledge and build on each other’s expertise. For this reason, we make efforts to strengthen the links between DsPH, be it regional or thematic, by offering a range of face-to-face events and teleconferences throughout the year. To bring non-geographic networks together we coordinate thematic networks such as DsPH from two-tier counties or those who have an Accountable Care Organisation on their patch.

Furthermore, ADPH supports the creation of necessary conditions for SLI by strengthening the geographic networks. This involves setting up individual webpages to allow networks to share updates on their recent activity as well as coordinating periodic newsletter and meetings for the network coordinators with updates on SLI and sharing resources.

Facilitating learning across networks
ADPH engages in disseminating good practice among the networks and facilitating further learning. To this end we manage a password-protected online platform where we post updates on networks’ SLI work and where members can share tools and methodologies. We celebrate the successes of networks by showcasing what is done well. We do that through national workshops on SLI as well as weekly network updates in member newsletter. Our further plans include case study publication and designing an SLI session to be delivered locally to the networks.

The National Institute for Health and Care Excellence (NICE)
NICE provides guidance and advice to improve health and social care as well as resources to support you in translating guidance into practice.

NICE quality standards set out priority areas for quality improvement in health and social care

Each one covers a topic, for example ‘community engagement’ or ‘preventing harmful alcohol use in the community’. They comprise of a list of four to six statements describing priority areas where we know there is unwarranted variation. The rationale for each statement briefly explains why this is a priority area.

Each statement is also supported by quality measures (which can be used to develop questions to support service review or to develop performance or quality indicators and measure the impact of quality improvement efforts).

‘Definitions of terms used’ provide further clarity and of course there are links directly to the underpinning guidance.

Appendix A
Managing the risk of significant under-performance

The public health function in local authorities sits within the context of council’s wider responsibilities to promote the economic, social and environmental wellbeing of their areas and there are specific statutory responsibilities for improving the public’s health.

Significant underperformance at a service or corporate level is likely to have a detrimental impact on local people and localities. The sector wants councils to be able to voluntarily signal their need of support and to seek it from sector controlled improvement activities to help prevent specific incidences of service or corporate underperformance.

In summary our approach, is as follows:

1. Our team of principal and senior advisers gather qualitative information about the performance of councils in their areas and act as the key point of contact between councils and the LGA. They work with and are supplemented by our lead and regional member peers, who are drawn from local councils and make use of political networks.

2. The principal advisers are supported with analysis of published, high level key quantitative performance data, including that derived from LG Inform and with feedback from our wider engagement with councils, for example the results of a peer challenge, and intelligence gathered from other published datasets as appropriate (eg government departments, service specific inspectorates).

3. Where information and intelligence is shared about performance challenges, the purpose will be primarily to improve the public’s health and protect the public’s interest. This will most effectively be done by enabling timely, appropriate and effective support to be offered, in accordance with the following general principles:
   - the individual council will be aware information is being shared
   - any concerns should be specific and evidence-based
   - information is treated in confidence.

4. Where the information and intelligence gathered appears to identify councils facing significant performance challenges and a potential serious concern, the principal adviser will make contact at the earliest opportunity with the authority involved. How he/she approaches the council and the level of contact will depend on the circumstances and relationships in each case, but would normally be at leader/chief executive level.

5. The principal advisers will engage with the council and draw together an appropriate improvement offer, working with the authority to facilitate its implementation and review progress.

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In addition the LGA maintains an overview of the performance of the sector in order to identify potential performance challenges and opportunities – and to offer support on a proactive basis. The LGA’s support offer is based on what we have learnt works for improvement: strong political and managerial leadership, challenge from one’s peers, the ability to benchmark performance with others and the sharing of good practice.

In addition the LGA maintains an overview of the performance of the sector in order to identify potential performance challenges and opportunities – and to offer support on a proactive basis.
Appendix B
Useful contacts

LGA

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