LGA response to the discussion document 'Health in Europe: a strategic response'

12 February 2007

The Local Government Association (LGA) represents the interests of all councils in England and Wales.

The LGA works to secure a better deal for tax payers, to promote efficiency, and to transform local public services.

Introduction

- 1. The Local Government Association (LGA) welcomes the opportunity to take part in the discussion document on plans for an overarching Health Strategy to be adopted by the European Commission in 2007.
- 2. The LGA believe that the European Commission has a role to play in improving the public health of all EU citizens but is of the firm belief that it is at the local level where any EU-wide strategies will become effective.
- 3. Within the UK, there is now an open recognition that sustainable long-term improvement in the health of the nation will be more cost-effectively delivered by the wider social and economic programmes run by local authorities.
- 4. The quality of public health and strategies to improve public health will always impact upon local communities and it is important that decisions be made through local authorities, as democratically accountable bodies closest to the citizen.
- 5. The LGA welcomes the Commission's proposed focus to promote health in all policies, to ensure that all sectors work to improve and protect health.
- 6. All levels of government, including the Commission, need to consider the health implications of their policies.
- 7. The LGA is disappointed that the role of local government has not been specifically discussed within the discussion document, and urges there to be further consideration of the role and importance of local government as the strategy develops.

The LGA would like to see:

- Full recognition that local government has an integral role to play in promoting good public health and supporting those in poor health in their local communities
- Additional assistance and information from the Commission on health promotion to help exchange best practice at the local level
- Dissemination of best practice, demonstrated by local authorities throughout Europe, in improving health and tackling health inequalities

The role of local government in ensuring and promoting good health

- 8. Local government provides many of the services that contribute towards people's physical environment, which in turn has a significant impact on people's overall wellbeing. Local authorities, as providers of services related to education, health, social care, community safety, community transport, housing and the physical environment, are key players in ensuring the social, economic and environmental wellbeing of their communities.
- 9. Local government has a crucial strategic and leadership role in ensuring that changes happen locally. In order to do this, local authorities will need to coordinate, commission and work closely with an increasingly diverse range of health and social care providers, the voluntary sector and other kinds of private service suppliers.
- 10. In considering an EU health strategy, we ask the European Commission to acknowledge the vital role played by local government in health issues. Strategies at EU and national government level can only be effective at the local and community level with the support and assistance of local government. Local authorities can learn from each other about practical aspects of improving the coherence of actions in different policy sectors.
- 11. Local government makes a vital contribution both to the promotion of good health and to assistance for those in poor health. Local government:
 - a. has an elected and legitimate mandate to represent the interests of local people and to act in response to demand for social action at a local level;
 - b. plays a crucial role in supporting and influencing the wide range of agencies and organisations that make up civil society; and
 - c. works in partnerships with voluntary organisations, schools and health organisations (including the National Health Service) to improve and promote good health and assist those in poor health in their local community.
- 12. The Healthy Communities Programme is a new national service area for local government identified for development by the Department of Health (DH). A two-year initiative, funded by the DH, the programme will be managed by the Improvement and Development Agency (IDeA) for local government and will run to March 2008. The Healthy Communities Programme aims to build the capacity of local authorities working within their communities to:
 - tackle local health inequalities
 - provide leadership to promote well being
 - foster a joined-up approach to health improvement across local government itself

Further information can be found on the following **Building healthy communities** flyer: http://www.idea-knowledge.gov.uk/idk/aio/5152337

- 13. The LGA and central Government agreed 7 shared priorities for public services one of which includes; *promoting healthier communities and narrowing health inequalities*, by targeting key local services, such as health and housing.
- 14. A group of 'pathfinder' local authorities exists for each shared priority. The aim of the health shared priority project is to build capacity of local authorities to enable them to work with Primary Care Trusts (PCTs) and regional partners to promote healthier communities and narrow health inequalities by demonstrating measurable improvements in the development, use, access and outcomes of services that will help reduce inequalities.



Submission

DX 119450 Westminster 2 Email info@lga.gov.uk Tel 020 7664 3000 Fax 020 7664 3030 Information centre 020 7664 3131 www.lga.gov.uk

Local Government House, Smith Square, London SW1P 3HZ

- 15. Within the health priority, 12 local authorities were allocated Shared Priorities Pathfinder status and 11 key areas of work were identified as follows:
 - integrated delivery of services for families, mothers and children
 - delivery of an effective teenage pregnancy strategy
 - increase in physical activity, especially in disadvantaged groups, the over-50s and teenagers
 - reduction in the gap in educational attainment between schools in disadvantaged areas and the average
 - reduction in people who are homeless and elimination of the use of Bed & Breakfast accommodation for homeless families with children, except in shortterm and urgent cases
 - narrowed gap between deprived neighbourhoods and the rest of the country so that within 10-20 years no-one should be seriously disadvantaged by where they live
 - increase access to mainstream services, and opportunities for mainstream employment and social participation, for people with mental health problems
 - reduction in accidents, especially among children, in disadvantaged groups
 - increase in people eating healthily, especially low income groups, infants and children
 - all council-owned housing meets decent homes standard by 2010, and increase awareness of energy efficiency measures
 - reduction in smoking
- 16. Within each of the 11 areas of work, key examples of potential projects have been highlighted and relevant local authority case studies identified. The full resource, comprising information and case studies from all 11 work areas can be found at http://www.idea-knowledge.gov.uk/idk/aio/262063 Five examples are summarised below:
- i) Delivery of an effective teenage pregnancy strategy:
 - Support schools in the provision of effective and good quality sex and relationships education
 - Ensure that school-age mothers are able to fully participate in education
 - Ensure suitable supported accommodation is available for 16-17 year old mothers unable to live with their families
 - Case study: Bolton Metropolitan Borough Council, Teenage Pregnancy Strategy.
- ii) Increase in physical activity, especially in disadvantaged groups, the over-50s and teenagers:
 - Increase in use of green space for recreation and exercise
 - Work with schools, national governing bodies of sport, county sports partnerships and other local delivery agencies to ensure that the provision of leisure services complements and supports the national strategy for Physical Education (PE).
 - Link the design, maintenance and use of public space to health objectives (for example through sport, leisure and cultural events) and having regard to crime and the fear of crime
 - Case Study: Cornwall County Council, Prevention of type 2 diabetes.

Local Government House, Smith Square, London SW1P 3HZ

- iii) Narrowed gap (in health inequalities) between deprived neighbourhoods and the rest of the country so that within 10-20 years no-one should be seriously disadvantaged by where they live:
 - Ensure neighbourhood renewal and use of appropriate funding improves health and contributes to tackling health inequalities, achieving health related floor targets.
 - Case study: Tower Hamlets, Addressing health inequalities (<u>www.renewal.net</u>)

iv) Increase access to mainstream services, and opportunities for mainstream employment and social participation, for people with mental health problems:

- Ensure equal opportunities policies and practice include mental health
- Increase local authority activity at neighbourhood level to support action to promote the mental health of communities
- Increase access to information about services and ensure that services themselves are flexible, sensitive and user friendly
- Case Study: Kirklees Metropolitan Borough Council, Research into employment for people with mental health problems

v) Reduction in smoking:

- Working to reduce prevalence of smoking
- Promoting a smoke-free environment
- Case Study: Coventry City Council, Reducing passive smoking
- From 1 July 2007 virtually all enclosed public places and workplaces in England will become smoke-free. Local authorities have led on the issue of tackling smoke in the workplace, as the following examples highlight:
 - o Middlesbrough Borough Council banned smoking in all council-run public spaces
 - o Liverpool Council has introduced a bill into Parliament this year to attempt to ban smoking in every workplace in the city
 - Salford City Council provides local businesses that do not have smoke free policies with assistance and tailored support.

Best practice from local government

- 17. The LGA are pleased to see the emphasis placed by the European Commission on the need to promote good health.
- 18. The LGA would welcome assistance and information from the Commission on health promotion at the local level, which would have benefits across communities and society as a whole, as well as potentially easing the ongoing burden on health services.
- 19. The LGA would welcome examples of best practice, demonstrated by local authorities throughout Europe, in improving health and tackling health inequalities. The report, *A tale of twelve pathfinders*, jointly produced by the Improvement and Development Agency (IDeA), LGA and Department of Health, describes the breadth of work done by 12 local councils in England in improving health and narrowing the health divide. The full report can be found at: http://www.lga.gov.uk/Documents/Briefing/projects/A%20Tale%20of%20Twelve%20pathfinders.pdf.

Conclusion

20. Local authorities have a crucial role to play in ensuring the wellbeing of their communities. Their role in ensuring and promoting good health cannot be underestimated, and should not be overlooked.



Local Government House, Smith Square, London SW1P 3HZ

Current LGA work on related areas

Joining up the Health and Children's Agenda

Aim: to demonstrate where local government can add value by facilitating better ioining up of health and other children and young people's services http://www.lga.gov.uk/ProjectHome.asp?lsection=59&ccat=1166

Older People Shared Priority

Aim: to achieve radical changes to the way services are planned and delivered, as well as affect the way older people live and perceive themselves http://www.lga.gov.uk/ProjectHome.asp?lsection=59&ccat=952

Vision for social care

Aim: to bring about improvements in health and adult social care, through closer and more effective partnership working in strategic planning, commissioning and delivery of services.

http://www.lga.gov.uk/ProjectHome.asp?lsection=59&ccat=1169

Related European responses from the LGA

- LGA / LGIB response to EU green paper on mental health (31 May 2006)
- LGA / LGIB response to Commission green paper on diet and nutrition (15 March 2006)
- LGA / LGIB response to the European Commission's reflections process on the future of EU health policy (11 October 2004)

Contacts:

Craig Titterton, Policy and Public Affairs Officer Local Government Association European and International Unit Tel: 020 7664 3121

E-mail: craig.titterton@lga.gov.uk

Helen Jackson, Team Leader Local Government Association European and International Unit

Tel: 00 322 502 36 80

E-mail: helen.jackson@lga.gov.uk

LGA European and International Unit

The Local Government Association has a new European and International Unit, which is responsible for all the work previously carried out by the Local Government International Bureau (LGIB). The integration strengthens lobbying work, bringing international issues closer to local government.

The new LGA European and International Unit:

- lobbies the EU and international institutions to get the best deal for councils;
- keeps councils informed about EU policies that affect them;
- develops international partnerships and co-operation;
- supports locally elected members in European and international institutions; and
- promotes the development of local democracy around the world.

www.lga.gov.uk/international



Local Government Associatio

DX 119450 Westminster 2 Email info@lga.gov.uk Tel 020 7664 3000 Fax 020 7664 3030 Information centre 020 7664 3131 www.lga.gov.uk

This paper represents the views of its author on the subject. These views have not been adopted or in any way approved by the Commission and should not be relied upon as a statement of the Commission's or Health & Consumer Protection DG's views. The European Commission does not guarantee the accuracy of the data included in this paper, nor does it accept responsibility for any use made thereof.