

Appendix 3

East Lancashire District Councils Public Health Offer

We, the East Lancashire District councils, ask that the emerging Pennine Lancashire Transformation Programme acknowledge the multifaceted role of districts and commit to reflect a 'whole-system' approach to preventative public health policy. This is because as District councils we are well positioned to influence and deliver many preventative measures, both through our key functions and our enabling role. Similarly, we are well placed to support the creation of integrated place-based public services.

In order to be more influential in improving our residents' health and helping to deliver the 'radical upgrade in prevention' that the NHS Five Year Forward View argues for, we recognise that, collectively, we need to:

- Demonstrate that our actions have a positive effect on public health
- Ensure that our actions are cost-effective and, where possible, offer a positive return on investment
- Strengthen our enabling role in health and communities
- Innovate in service planning and delivery

This Statement is our response to this challenge, outlining how our core functions contribute to the wider preventative agenda and our commitment to the transformation process.

Our contribution to preventative public health policy

Housing

With housing a key determinant of health, poor housing conditions are estimated to cost the NHS £2 billion every year and cost the wider economy even more. Improving poor homes can pay back quickly in reduced costs across the public sector.

The Building Research Establishment (BRE) estimates that the first year treatment costs to the NHS of leaving people in the poorest 15 per cent of housing stock in England are around £1.4 billion per year due to falls, dampness, pests, water supply, sanitation, excess cold and overcrowding, among other hazards. For example, among the over 65s, falls and fractures occurring in the home account for 4 million hospital bed days each year in England, costing £2billion.

We are instrumental in controlling, minimising and preventing poor housing conditions by:

- Helping to facilitate access to social housing to residents who need it
- Delivering the Council's statutory homelessness function by investigating all homelessness enquiries, securing temporary accommodation, seeking re-housing and ensuring an out of hours service is in place.
- Managing Refuge accommodation scheme for women fleeing or at risk of domestic abuse
- Facilitating Pennine Lancashire Mental Health & Housing Project, a joint initiative to provide advice and assistance to individuals at risk of homeless or whose discharge from psychiatric in-patient units may be delayed by lack of appropriate housing.
- Regulating landlords in the private rented sector, including Houses in Multiple Occupation (HMOs) . Selective licensing of landlords operates in some districts (Burnley), whereas others districts are considering areas for selective and additional licensing schemes (Pendle).
- Investigating and taking action, including prosecutions, against landlords for harassment and illegal eviction.
- Allocating the Disabled Facilities Grants to fund adaptations to enable residents to stay in their own homes for as long as possible and avoid hospital admissions.
- Working with LCC and other partners to improve the condition of the housing stock, including energy efficiency, and the health conditions of residents.

1. Environmental Health

Most aspects of environmental health services are likely to have an impact on health. For example, air and noise pollution are both associated with a number of negative health outcomes, while food-borne diseases can result in hospital visits and time off work.

The health impacts of environmental noise include sleep disturbance, annoyance and stress, tinnitus, cognitive impairment and hypertension. Initial estimates from 2008 suggest that the cumulative UK-wide impact of noise pollution on health is in the region of £2 billion to £3 billion per year (DEFRA 2008).

Our environmental health functions, many of which are statutory, are potentially vast, covering functions such as monitoring and managing local air quality, noise nuisance, food safety, enforcing the smoking ban, ensuring compliance with occupational health and safety regulations, pest control, and health protection. Each is multi-faceted in itself. For example, food safety encompasses not only the prevention of illnesses caused by bacteria and viruses, but also the avoidance of harm from contaminated food. Through the food safety function, we ensure the availability of safe and nutritious food, encourage and promote compliance with food legislation whilst also promoting accurate food labelling and healthier, affordable, accessible alternatives.

We also continue to provide essential interventions that protect communities from environmental hazards and also provide local intelligence to inform the health protection priorities. We are vital partners in emergency planning and delivering comprehensive interagency plans to respond to major public health incidents in disease control and environmental contamination.

Our environmental health officers make every contact count by recognising additional needs and ensuring referral to the appropriate services e.g. Lancashire wellbeing service, affordable warmth.

2. Parks and Leisure

Leisure facilities and greenspace can help increase physical activity, healthy eating and general wellbeing through open, environmentally clean surroundings.

Physical inactivity is one of the biggest health challenges facing us as a nation. Across pan-Lancashire, an average of 49% of adults is estimated to be physically inactive. In April 2013, Sport England estimated that the cost of physical inactivity in Lancashire was £29,282,690.

Nationally, Sport England suggests that the economic value of sport is around £11 billion every year, of which around £1.7 billion is related to avoidable NHS costs. Innovative reduced-cost schemes and free access to leisure services suggests that up to £23 in value is created for every £1 invested.

Well over half the adult population in Lancashire (68%) are now living with excess weight which can impact significantly on health, employment and life expectancy. Severe obesity reduces life expectancy by around 8–10 years – the same reduction as a lifetime of smoking. Obese and overweight individuals also use more health and social care services; costs to the wider economy have been estimated at £27 billion, including costs to the NHS, social care and days off due to sickness.

Green, public spaces are a vital community resource for physical activity. District councils provide and manage much of the local green spaces such as parks, playing pitches, play grounds and allotments. Wherever possible, we are working with our Town and Parish councils to continue to ensure such provision remains in public ownership. Districts have been involved in planning cycle routes to improve the cycling offer and reach locally.

In East Lancs, the leisure function (delivered through 4 Leisure Trusts and 1 council, Ribble Valley) provide the services within the leisure centres, sports development and weight loss programmes, targeting specific groups by their age, health needs or socioeconomic group to boost physical activity rates. District councils work closely with their Leisure trusts and are valued members of district Health and Wellbeing groups with healthy lifestyles a priority for many local partnerships. The recently formed East Lancashire Leisure Consortium now offers scope for synergy across the districts.

3. Community Safety and Licensing

The impact of crime and fear of crime on health and well-being is well documented and is particularly emphasised in areas of deprivation and upon vulnerable individuals. Exposure to crime and anti social behaviour in all its forms is a wider determinate of health contributing to anxiety and mental illness and can undermine the confidence of whole communities. In some instances it can result in serious physical injuries and long term problems. Districts are instrumental in Community Safety Partnerships and through their priorities and partnership working help to reduce the negative impact of crime on both communities and individuals. By working collaboratively, both locally and across East Lancashire, we directly address a number of health issues:

- Support vulnerable victims of anti-social behaviour
- Domestic Violence – including the provision of hostel facilities for those escaping violence
- Reduce re-victimisation of victims of burglary and other crimes
- Casualty reduction – with an aim to reduce child pedestrian casualties of road accidents
- Supporting agencies and communities to tackle substance misuse and aid recovery of users
- Implement the Council's policies on Licensing and Gambling which can help support Health & Wellbeing Boards to measure the health impacts of granting alcohol licences and shaping local licensing policy.
- Licence premises for the sale of alcohol and work with retailers to promote responsible drinking and reduce the sale of high strength alcohol.
- Piloting the Pennine Lancashire Transforming Lives programme to seek coordinated resolution of individuals with complex needs and demands on agencies. Transforming Lives panels are being set up in all East Lancashire districts, supported by a Co-ordinator. These will deal with vulnerable adults with complex needs but seek to move to a preventions and early help model – i.e. individuals at risk of crisis.
- Promote early intervention opportunities for families and young people
- Weekly Environmental Visual Audits in priority areas to remove fly-tipping and highlight accumulations of rubbish in yards for enforcement action
- A Dog Warden service that promotes responsible dog ownership relating to fouling; noise and nuisance
- Community Protection investigation and enforcement to problem solve issues that are detrimental to the quality of life of residents
- Direct delivery of health projects e.g. Transformation Challenge award pilot – Living Well, Living Better in Rossendale to tackle social isolation and loneliness.

4. Employment & Welfare

Districts process housing benefit and council tax support, and can signpost individuals to debt advice, credit unions and budgeting help with many of the East Lancashire Districts currently providing grant funding for the local CAB service. For the vulnerable in society and those falling on hard times, such services have a fundamental impact on the wider determinants of poor health.

Through our business support teams, we also work with businesses to provide the right local conditions for growth to help reduce unemployment, which can be a symptom and cause of poor health.

Our enabling and influencing role

Beyond delivering the core functions outlined above, we believe that district councils have enabling roles that underpin good public health. These affect and shape how other functions are delivered and therefore their impacts on health.

1. Planning

The National Planning Policy Framework has a section on promoting healthy communities, which states that the planning system can play an important role in facilitating social interaction and creating healthy, inclusive communities. This includes measures aimed at reducing health inequalities, improving access to healthy food and reducing obesity, encouraging physical activity, improving mental health and wellbeing, and improving air quality to reduce the incidence of respiratory diseases. The framework requires us to work with public health leads and health organisations to develop a robust evidence base that takes into account future changes and barriers to improving health and wellbeing.

We can work collaboratively with e.g. ELCCG to analyse the impact of fulfilling the Government's requirement for numbers of new homes on the health infrastructure in any one district.

2. Economic development

Stable and fulfilling employment is fundamental to good health and our role in economic development and job creation is invaluable for making improvements in wider public health indicators. We approve the intention to better integrate economic development in Healthier Lancashire via the Combined Authority and hope this sets a framework for a 'whole system' approach to addressing the wider determinants.

We, along with our partners, lever significant investment into large-scale regeneration programmes, which transform local communities and deliver employment opportunities for residents. The introduction of the Community Infrastructure Levy and New Homes Bonus has strengthened local growth agendas and the importance of district councils in facilitating the economic conditions for better health outcomes. Joining with partners in Lancashire's Local Enterprise Partnership and Lancashire's Combined Authority, we can help deliver a new phase of collaboration with the private sector on regional growth and devolved budgets in infrastructure, housing and transport.

As districts, we facilitate and enable the local conditions for sustainable economic growth, job creation and rising living standards by:

- Working with partners to develop and deliver a programme of housing and economic projects.
- Facilitating the growth of existing businesses, attracting new investment and thereby increasing wealth and employment opportunities for local people.
- Regenerating our town centres by stimulating new retailing, leisure and office developments and enhancing the quality of the built environment, streets and public spaces.
- Facilitating the improvement of vacant/derelict sites and buildings and where possible bring them back into productive use.

3. Community engagement

District councils have an important role to play in supporting social capital by strengthening social networks and community-centred approaches to health, potentially through enabling greater volunteer involvement. Although approaches to supporting social capital vary across East Lancashire districts, examples of outputs include volunteer lead walking programmes, local Parkruns, infant mortality prevention projects and the roll out of Dementia Friendly communities.

Strengthening community resilience can have strong and direct links to health, as acknowledged too by the East Lancashire CCG's approach to social prescribing. Community capacity building is important in determining or averting health behaviours as well as resilience to, and recovery from, illness.

Districts enable and support neighbourhood forums providing opportunities for local people to input further into the local decision making structures and raise issues of concern on a neighbourhood level.

East Lancashire District Councils- our pledge to the Pennine Lancashire Transformation Programme

As outlined above, through our core functions and our enabling role, we contribute significantly to the public health and wellbeing of East Lancashire residents. We believe that the emerging local health economy now offers even greater scope to maximise our contribution. *We strongly advocate that district councils are integral to the local health policy as our contribution will significantly benefit the prevention priorities of the Pennine Lancashire Transformation Programme.*

Whilst we intend to develop specific recommendations for each of the functions outlined above (which we will do through our service planning process), at this stage we believe there is a more pressing demand to voice our commitment and influence the Pennine Lancashire Transformation process, ensuring East Lancashire districts are key to the emerging systems and structures. Our proposed Offer to the Pennine Lancashire Transformation Programme is thus:

1. To formally acknowledge our commitment to public health through our service planning process.
2. To highlight local health needs, priorities and mapping existing service provision to influence future commissioning.
3. To explore opportunities for redesigning our services and resources to maximise preventative measures and promote good health.
4. To offer opportunities for delivering and co-locating services with health and social care providers, whether public, private or voluntary.
5. To deliver commissioned ELCCG and LCC/ BwD services directly (i.e Transforming Lives, Affordable Warmth) given our experience of working in local communities and identifying hard to reach communities.
6. To continue to advocate for and support our Members in the on-going negotiations around devolution, it's opportunities for long term health improvement and its implementation.
7. To work together as district partners to identify good practice and opportunities for synergy and shared service delivery.
8. To work with other public sector bodies and our Community, Voluntary & Faith Sector partners to identify good practice and opportunities for joint working.
9. To consider opportunities for pooling budgets and resources with other public sector bodies to maximise joint working and public health gains for East Lancashire residents.
10. Facilitate a 'One Public Sector' vision for our district.

We advocate that Lancashire's Combined Authority Health & Wellbeing Board draws on district services, assets and officer expertise as a potential source of place shaping, public health delivery, integrated public services, commissioning and intelligence gathering to support the development of a more enabled and healthier Lancashire.